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Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

MAJOR FINDINGS



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Public Health Agency of Canada

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and the Bell Canada Child Welfare Research Unit,
Faculty of Social Work, University of Toronto**

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The 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003) reflects a truly national effort by a group of over 1,500 child welfare service providers, researchers and policy makers committed to improving services for abused and neglected children through research.

The Public Health Agency of Canada provided core funding for the study, with additional funds provided by the provinces of Ontario and Alberta, the Northwest Territories, the First Nations Child & Family Caring Society, Indian and Northern Affairs Canada, and the Bell Canada Child Welfare Research Unit. In addition to its financial contribution, the Public Health Agency of Canada, through the Injury and Child Maltreatment Section (ICMS) of the Health Surveillance and Epidemiology Division, provided a critical organizational infrastructure for the study, with the active support of Margaret Herbert, Anne-Marie Ugnat and the Director of the Division, Catherine McCourt.

The National Steering Committee to the CIS-2003 (see Appendix B) provided key input into the design of the study and in supporting implementation. I would particularly like to acknowledge the contributions of Peter Dudding (Committee Co-Chair) and Margaret Herbert (former Committee Co-Chair), who have championed this project for many years, and of Harriet MacMillan, who provided constructive feedback and support throughout the project.

The CIS-2003 was conducted by a large team of researchers who demonstrated an exceptional ability to keep focused on the objectives of this collective effort while bringing to bear their own expertise. In addition to the report authors, special acknowledgement should go to site-based researchers who played a critical role in presenting the study and generating support while maintaining high standards for case selection. These site researchers are Connie Bird, Corbin Shangreaux, Daniel Moore, Ellen Perrault, Heidi Kiang, Jennifer Banks, Katharine Dill, Marlyn Bennett, Denis Lacerte, Janet Douglas, Megan McCormack, Nathalie Forest, Shirley Cole, Theresa Knott, Valérie Gaston, Victor Montgomery, Richard De Marco, Kathy Bent and Maria Mulloy (see Appendix A for institutional affiliations).

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Dedication

This report is dedicated to the children and families who are served by Canadian child welfare workers. It is our sincere hope that the study contributes to improving their well-being.

In memory of Dan Offord, who was committed to reducing the burden of suffering for children and their families.

Preface

This report presents the major findings of the second cycle of the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003). In this initiative, data are collected every five years on child maltreatment reported to, and investigated by, child welfare agencies in Canada. The CIS is a collaborative effort of many partners: the federal, provincial and territorial governments; university-based researchers; the First Nations Child & Family Caring Society; child advocacy groups; and most important, child welfare service providers across the country.

The CIS is a national child health surveillance initiative of the Public Health Agency of Canada. The CIS complements national surveillance programs in unintentional injury, perinatal health and infectious diseases, among others. Surveillance, which is a core function of public health, is a systematic process of data collection, expert analysis and interpretation, and communication of information for action on key health issues. Surveillance information supports effective priority-setting and policy and program development. It is also an important foundation for more in-depth research.

The CIS contributes to a better understanding of the occurrence of child maltreatment in Canada, the circumstances of the children and their families, and the services provided by child welfare agencies in response to reported maltreatment. Child welfare agencies across the country provide the data for the CIS — they are the “window” through which the study views this very important issue of child health and well-being.

The Public Health Agency of Canada is fortunate and proud to be part of the CIS. We acknowledge the valuable contribution of all those who made this cycle of the CIS possible. Special thanks go to the research team, the national steering committee, the provincial and territorial Directors of Child Welfare and the child welfare service providers who took part in the study. The CIS embodies the important principles of strong interdisciplinary and intersectoral collaboration, collegiality and a commitment to scientific excellence, on behalf of Canada’s children.

Catherine McCourt, MD, MHA, FRCPC

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Executive Summary

The Canadian Incidence Study of Reported Child Abuse and Neglect – 2003 (CIS-2003) is the second nation-wide study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by Canadian child welfare services. The CIS-2003 tracked 14,200 child maltreatment investigations conducted in a representative sample of 63 Child Welfare Service Areas across Canada in the fall of 2003. In all jurisdictions excluding Quebec, child welfare workers completed a three-page standardized data collection form; in Quebec, information was extracted directly from an administrative information system. Weighted national annual estimates were derived based on these investigations. The following considerations should be noted in interpreting CIS statistics:

- the study is limited to reports investigated by child welfare services and does not include reports that were screened out, cases that were investigated only by the police, or cases that were never reported;
- the study is based on the assessments provided by the investigating child welfare workers, which were not independently verified;
- because the study is not designed to conduct regional comparisons, variations in rates of investigated

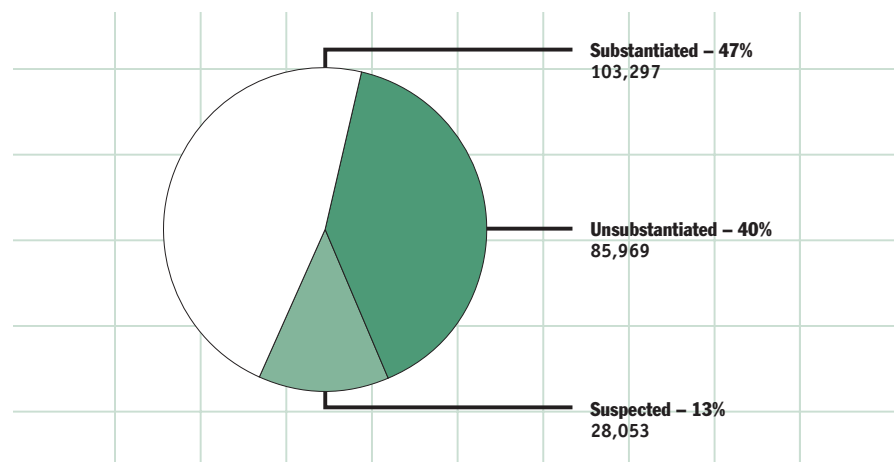
cases of maltreatment across Canada cannot be examined;

- most of the tables in the CIS-2003 Major Findings Report do not include Quebec;
- all estimates are weighted annual estimates for 2003, presented either as a count of child maltreatment investigations (e.g., 14,200 child maltreatment investigations) or as the annual incidence rate (e.g., 38.33 per 1,000 children); and
- there are many reasons to explain the overall increase in rates of investigated and substantiated maltreatment between 1998 and 2003, including changes in reporting and investigation practices.

INVESTIGATED AND SUBSTANTIATED MALTREATMENT

Figure 1 and Table 1 show that an estimated 217,319 child investigations were conducted in Canada (in all Canadian jurisdictions excluding Quebec in 2003), of which 47% were substantiated, involving an estimated 103,297 child investigations (an incidence rate of 21.71 cases of substantiated maltreatment per 1,000 children). In an additional 13% of investigations there was insufficient evidence to substantiate maltreatment; however, maltreatment remained suspected by the investigating worker. A total of 40% of investigations were unsubstantiated.¹

FIGURE 1 Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003
For sample size, see Table 3-1.



¹ This rate of unsubstantiated maltreatment is similar to or lower than rates reported in most jurisdictions and reflects laws that require the public and professionals to report all cases where they suspect maltreatment may have occurred. Most unsubstantiated cases are indeed reports made in good faith; only 5% of reports tracked by CIS-2003 were considered to have been made with malicious intent (see Table 8-2(a) in CIS-2003 Major Findings).

TABLE 1 Child Maltreatment Investigations, by Level of Substantiation, in Canada in 2003*

	Level of Substantiation			Missing Substantiation Information	Total
	Substantiated	Suspected	Unsubstantiated		
Maltreatment Investigations in Canada, Excluding Quebec					
Child Investigations*	103,297	28,053	85,969		217,319
Incidence per 1,000 Children	21.71	5.90	18.07		45.68
Row Percentage	47%	13%	40%		100%
Total Maltreatment Investigations in Canada					
Child Investigations*	114,607	28,053	90,869	1,786	235,315
Incidence per 1,000 Children	18.67	4.57	14.80	0.29	38.33
Row Percentage	49%	12%	38%	1.0%	100%

* For sample size, see Table 3-1.

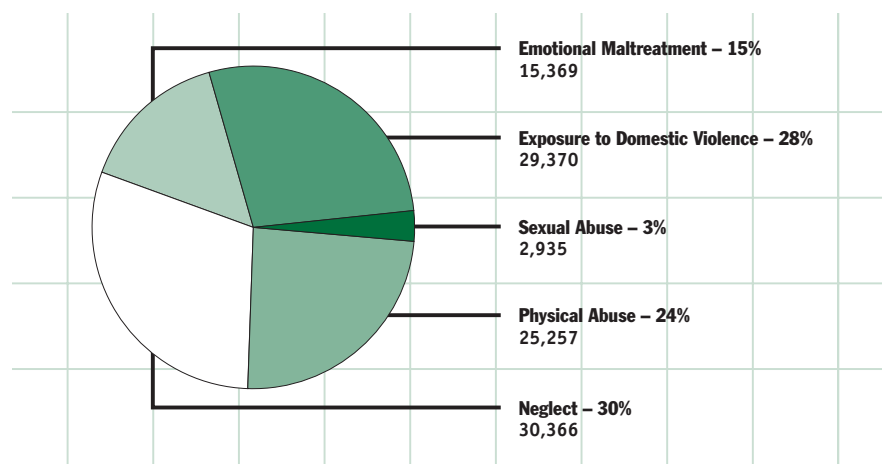
When the Quebec administrative data are included, an estimated 235,315 child maltreatment investigations (38.33 investigations per 1,000 children) were conducted in Canada in 2003. Nearly half of the investigations were substantiated by the investigating worker, a national incidence rate of 18.67 cases of substantiated maltreatment per 1,000 children.²

CATEGORIES OF MALTREATMENT

Table 2 and Figure 2 present the primary categories of substantiated maltreatment in Canada in 2003. Neglect was the most common form of substantiated maltreatment in Canada. Nearly a third (30%) of all cases in which maltreatment was substantiated involved neglect as the primary category of maltreatment, which totals an estimated 30,366 neglect investigations at a rate of 6.38 cases of substantiated maltreatment per 1,000 children.

FIGURE 2 Primary Category of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003

For sample size, see Table 3-3.



Exposure to domestic violence was the second most common form of substantiated maltreatment (an estimated 29,370 cases of substantiated maltreatment, a rate of 6.17 per 1,000 children), followed closely by physical abuse (an estimated 25,257 cases of

substantiated maltreatment, a rate of 5.31 per 1,000 children). Emotional maltreatment was the primary category of substantiated maltreatment in 15% of cases (an estimated 15,369 substantiated investigations, a rate of 3.23 per 1,000 children) while sexual abuse

² To avoid confusion between the two sets of estimates (with and without Quebec) data presented in the Executive Summary, with the exception of Table 1, are limited to the core CIS sample, which otherwise excludes data from Quebec.

TABLE 2 Primary Category of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003*

	Primary Category of Substantiated Maltreatment					Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence	
Substantiated Child Investigations*	25,257	2,935	30,366	15,369	29,370	103,297
Incidence per 1,000 Children	5.31	0.62	6.38	3.23	6.17	21.71
Row Percentage	24%	3%	30%	15%	28%	100%

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* For sample size, see Table 3-3.

cases represented 3% of all cases of substantiated maltreatment (an estimated 2,935 cases of substantiated maltreatment, a rate of 0.62 per 1,000 children).

1998-2003 COMPARISON

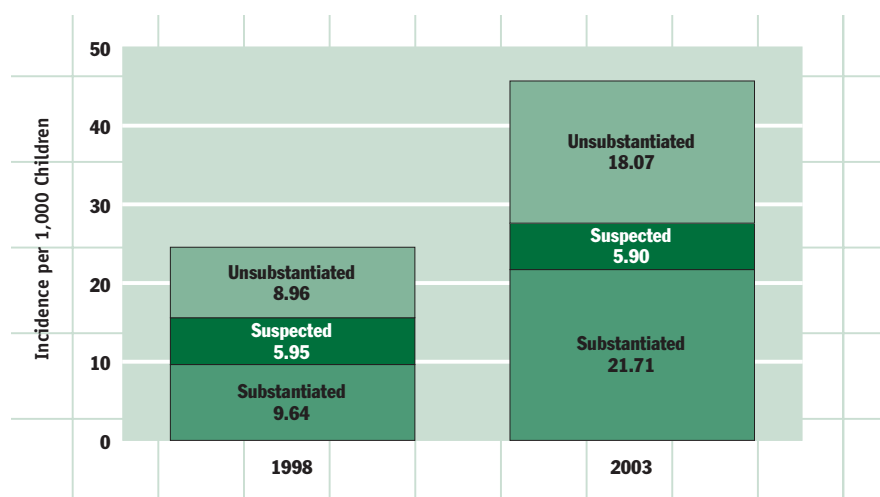
The rate of substantiated maltreatment in the core CIS sample, Canada excluding Quebec, increased 125%, from 9.64 cases of substantiated maltreatment per 1,000 children in 1998 to 21.71 cases of substantiated maltreatment per 1,000 in 2003 (Figure 3). This increase in documented maltreatment may be explained by improved and expanded reporting and investigation procedures, including:

- (1) changes in case substantiation practices,
- (2) more systematic identification of victimized siblings, and
- (3) greater awareness of emotional maltreatment and exposure to domestic violence.

Part of the increase in the number of cases of substantiated maltreatment seems to be attributable to a shift in the way child welfare workers classify cases, with a much smaller proportion of cases being classified as suspected: 13% in 2003 compared with 24% in

FIGURE 3 Child Maltreatment Investigations in Canada, Excluding Quebec, in 1998 and 2003

For sample size, see Table 9-1.



1998. The introduction of structured assessment tools and new competency-based training programs may account for part of this shift.

Better identification of victimized siblings is a second factor explaining the overall increase in cases of substantiated child maltreatment. The average number of investigated children per family increased from 1.41 to 1.66 (see Table 9-2 in CIS-2003 Major Findings Report). As a result, the number of investigated children has increased at a faster rate than the number of investigated families, which increased 56%

from an estimated 83,976 investigated families in 1998 to 130,594 in 2003.

The third and most important factor driving the increase in the number of cases of substantiated maltreatment is the dramatic increase in cases of exposure to domestic violence and emotional maltreatment (Figure 4). The rate of exposure to domestic violence increased 259%, from 1.72 substantiated cases per 1,000 to 6.17 cases per 1,000, and the rate of emotional maltreatment increased 276%, from 0.86 cases per 1,000 to 3.23 cases of substantiated maltreatment per 1,000.

FIGURE 4 Categories of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 1998 and 2003

For sample size, see Table 9-3.

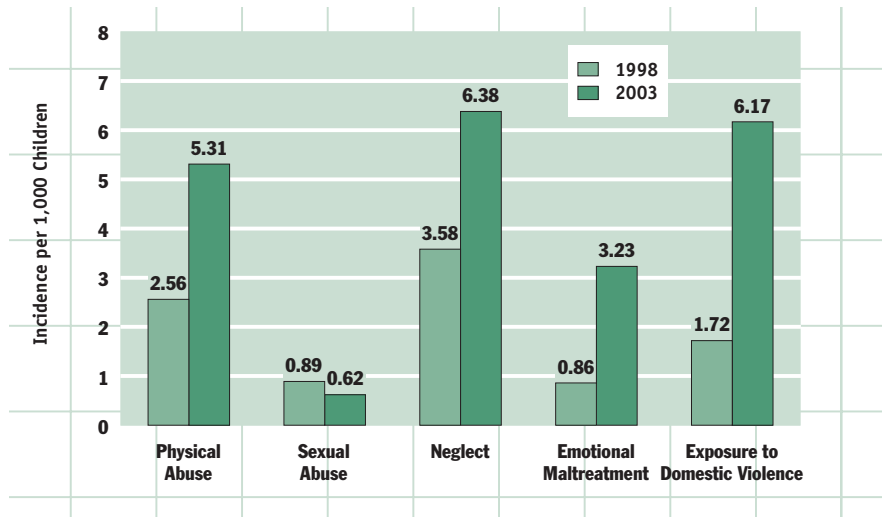


FIGURE 5 Physical Harm in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

For sample size, see Table 4-1(a).

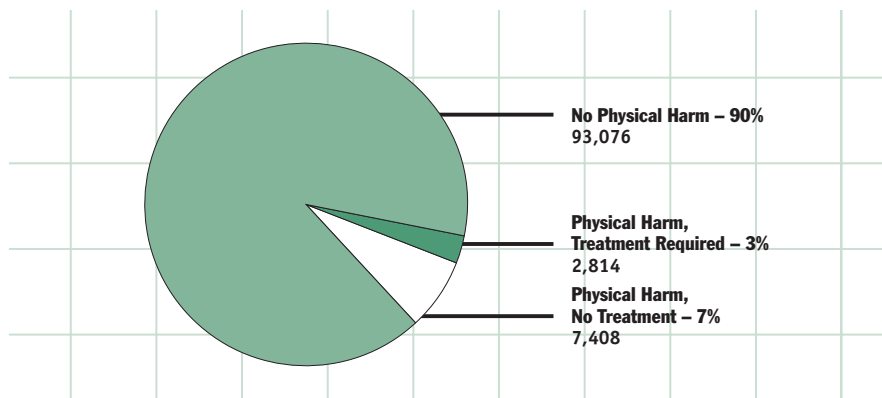
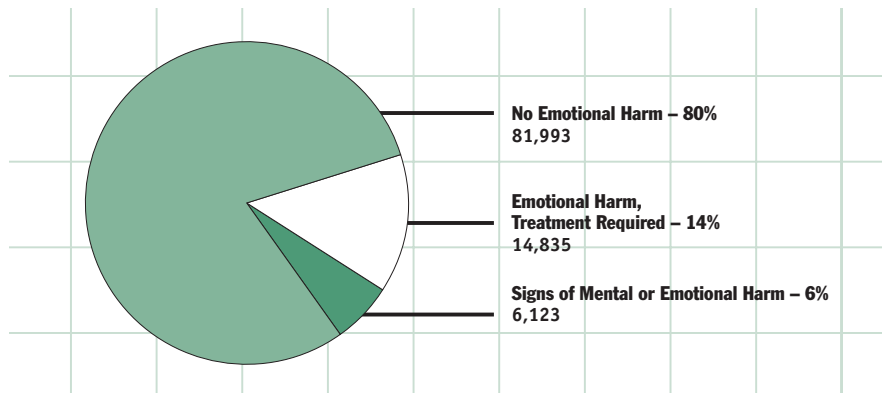


FIGURE 6 Emotional Harm in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

For sample size, see Table 4-2.



In 1998 these two forms of maltreatment accounted for 27% of all cases of substantiated maltreatment; by 2003 they accounted for 43% of cases. These increases reflect a shift in awareness, and in some jurisdictions shifts in legislation, on the impact of emotional maltreatment and exposure to domestic violence on children.

PHYSICAL AND EMOTIONAL HARM

Physical harm was identified in 10% of cases of substantiated maltreatment (Figure 5). In 7% of cases (an estimated 7,408 cases of substantiated maltreatment) harm was noted but no treatment was considered to be required. In an additional 3% of cases (an estimated 2,814 cases of substantiated maltreatment), harm was sufficiently severe to require treatment.

Information on emotional harm was collected using a series of questions asking child welfare workers to describe emotional harm that had occurred after the maltreatment incidents. Workers were asked to indicate whether the child was showing signs of mental or emotional harm (e.g., nightmares, bed wetting or social withdrawal). In order to rate the severity of mental/emotional harm, workers indicated whether therapeutic intervention (treatment) was required in response to the mental or emotional distress shown by the child. Emotional harm was noted in 20% of all cases of substantiated maltreatment, involving an estimated 20,958 of cases of substantiated maltreatment. In 14% of cases of substantiated maltreatment, symptoms were severe enough to require treatment (Figure 6).

SERVICE DISPOSITIONS

Service dispositions documented by the CIS-2003 include:

- (1) previous child welfare contact;
- (2) provision of ongoing child welfare services; and
- (3) placement of children in out-of-home care.

CIS service disposition statistics should be interpreted with care, because they track only events that occurred during the initial child welfare investigation. Additional referrals for services and admissions to out-of-home care are likely to occur in cases kept open after the initial investigation.

Nearly two-thirds of substantiated investigations (an estimated 63,450 cases of substantiated maltreatment) had had at least one previous case opening; 21% had had more than three previous case openings (Figure 7).

An estimated 45,885 (44%) substantiated child maltreatment investigations were identified as remaining open for ongoing services while an estimated 57,320 (56%) substantiated investigations were to be closed (Figure 8).

Admissions to out-of-home care at any time during the investigation were tracked. Of all cases of substantiated child maltreatment, 8% (an estimated 8,260) led to a child being placed in formal child welfare care (kinship foster care, other family foster care, group home or residential/secure treatment) during the initial investigation. An additional 5% of cases of substantiated maltreatment resulted in children being placed in informal kinship care, while placement was considered in an additional 4% of substantiated child maltreatment investigations. In total, 13% of children experienced a change of residence during or at the conclusion of the initial substantiated maltreatment investigation, 8% of them in the form of a placement in a child welfare setting (Figure 9).

FIGURE 7 Previous Openings in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

For sample size, see Table 5-1(a).

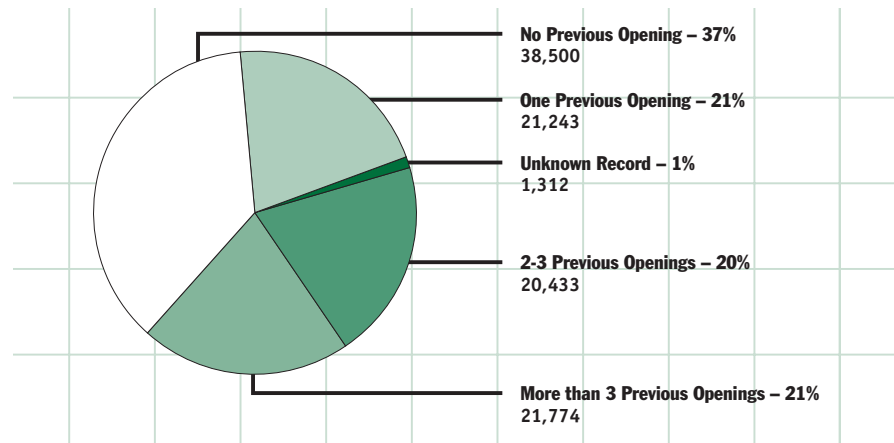


FIGURE 8 Ongoing Services in Cases of Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

For sample size, see Table 5-2.

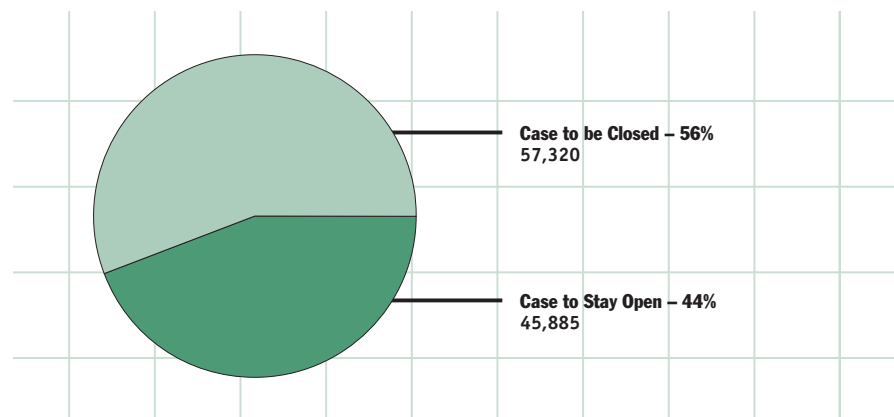


FIGURE 9 Placement in Out-of-Home Care in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

For sample size, see Table 5-4.

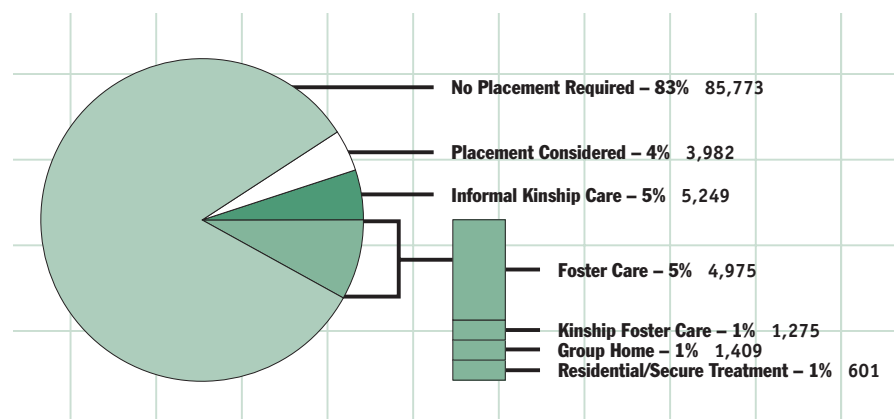


FIGURE 10 Age and Sex of Victims, by Primary Category of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003

For sample size, see Table 6-3.

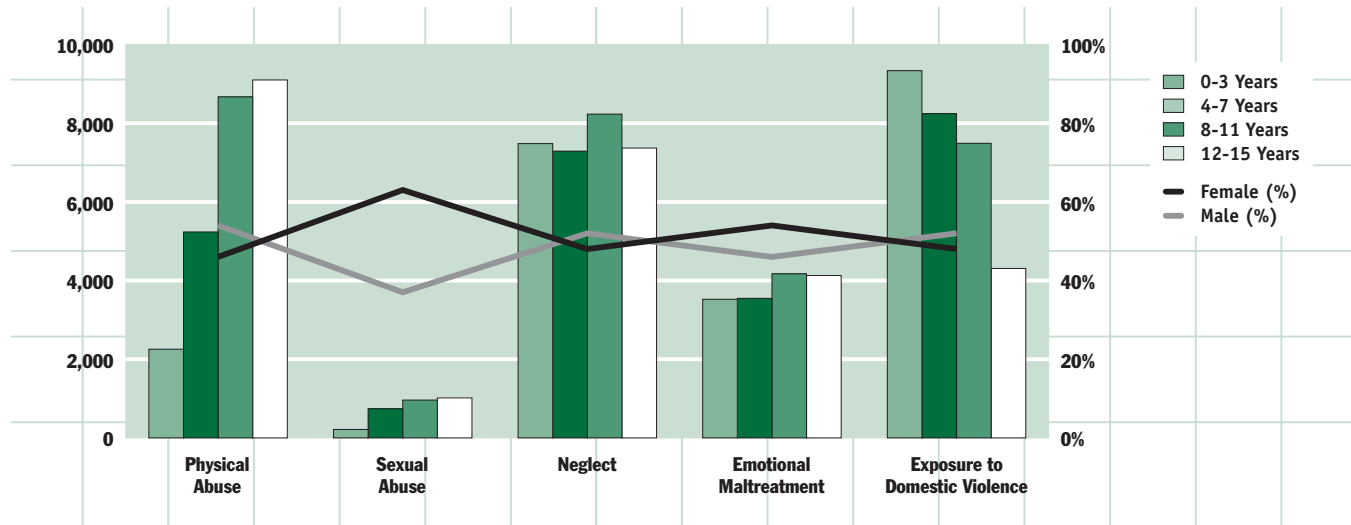
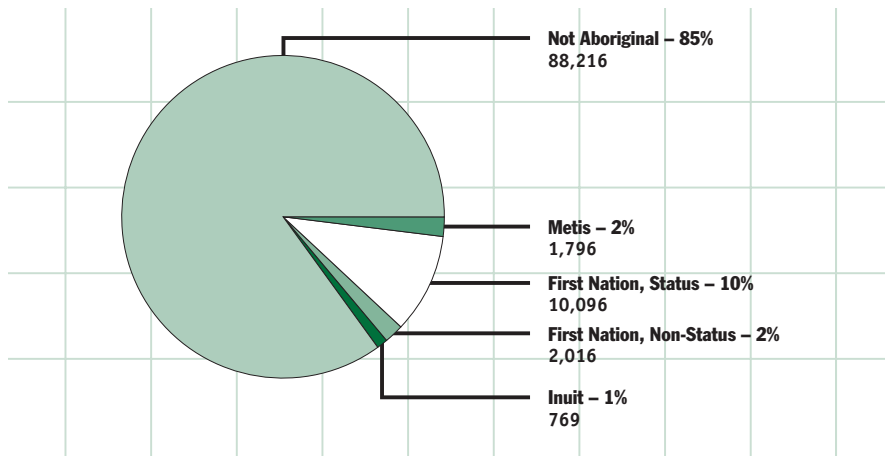


FIGURE 11 Aboriginal Status of Victims of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003

For sample size, see Table 6-5.



Aboriginal heritage was documented by the CIS-2003 in an effort to better understand some of the factors that bring Aboriginal children into contact with the child welfare system. Aboriginal children were identified as a key group to examine because of concerns about their overrepresentation in the foster care system. Of the total number of cases of substantiated maltreatment, 15%, or nearly 15,000 cases of substantiated maltreatment involved children of Aboriginal heritage (Figure 11). Of this total, 10% involved First Nations Status children, 2% involved First Nation Non-Status children, 2% involved Metis children, and 1% involved Inuit children.

CHILD CHARACTERISTICS

Figure 10 presents the age and sex of children by the primary category of substantiated maltreatment. While girls made up 49% of victims, girls made up a larger proportion of victims in cases of sexual abuse (63%) and emotional maltreatment (54%), whereas boys were more often victims in cases of physical abuse (54%), neglect (52%), and exposure to domestic violence

(52%). There was relatively little variation in the age distribution of children in cases of emotional maltreatment and neglect. Older children were more often identified as victims of physical abuse and sexual abuse (70% of physical abuse victims and 67% of sexual abuse victims were between the ages of 8 and 15), whereas younger children were more often victims in cases of exposure to domestic violence (60% were 7 or under).

HOUSEHOLD CHARACTERISTICS

Nearly one-third (32%) of cases of substantiated maltreatment involved children who lived with both biological parents; 16% lived in a two-parent blended family in which one of the caregivers was a step parent, a common law partner, or an adoptive parent who

FIGURE 12 Parents of Victims of Substantiated Maltreatment in Canada, Excluding Quebec, in 2003

For sample size, see Table 7-1.

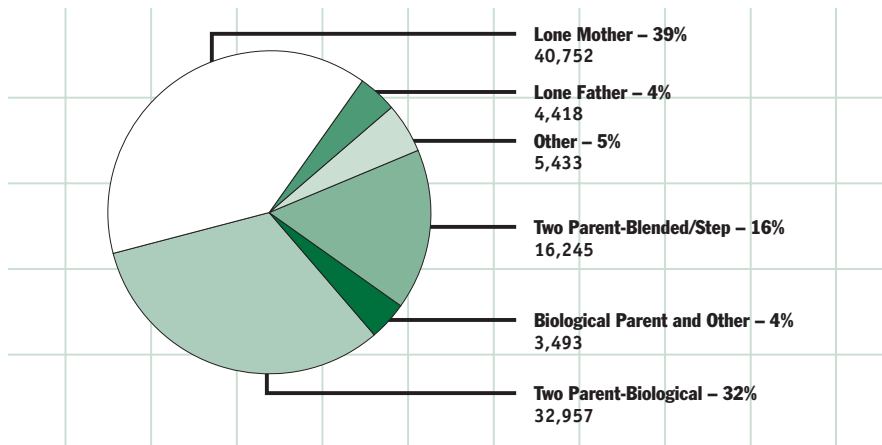


FIGURE 13(a) Female Caregiver Risk Factors for Victims of Substantiated Maltreatment in Canada, Excluding Quebec, in 2003

For sample size, see Table 7-9(a).

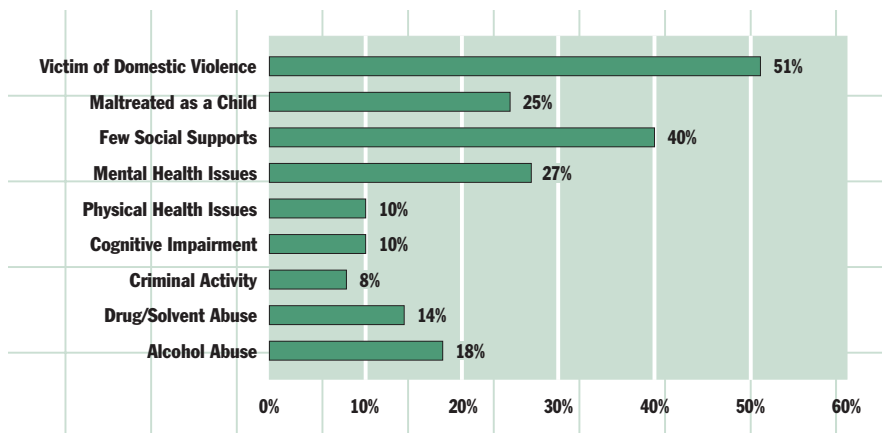
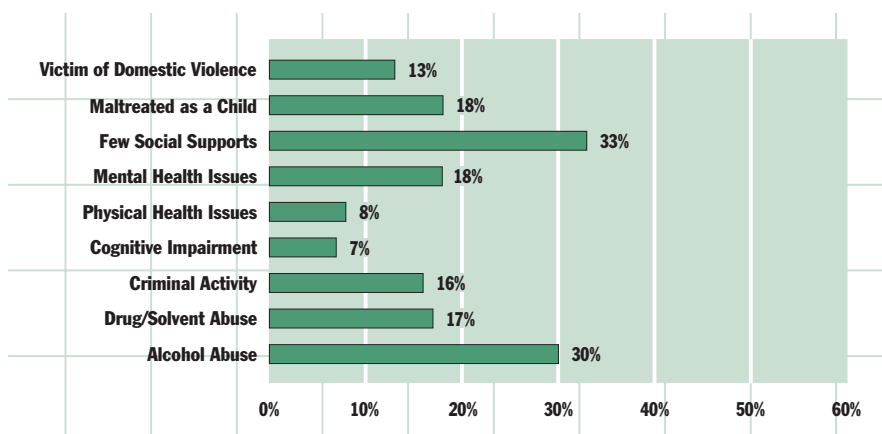


FIGURE 13(b) Male Caregiver Risk Factors for Victims of Substantiated Maltreatment in Canada, Excluding Quebec, in 2003

For sample size, see Table 7-9(b).



was not the biological parent of at least one of the children in the family. An additional 4% of cases of substantiated maltreatment involved a biological parent living with another adult who also acted as a caregiver to the child (e.g., the child's grandparent, aunt or uncle), and 43% involved children who lived in a family led by a lone parent (39% by a female parent and 4% by a male parent)(Figure 12).

The CIS-2003 tracked a number of potential family stressors by asking participating child welfare workers to complete a simple checklist of caregiver risk factors that they had noted during the investigation. The three problems for mothers and other female caregivers that were most frequently noted were domestic violence (51%), lack of social support (40%), and mental health issues (27%) (Figure 13a).

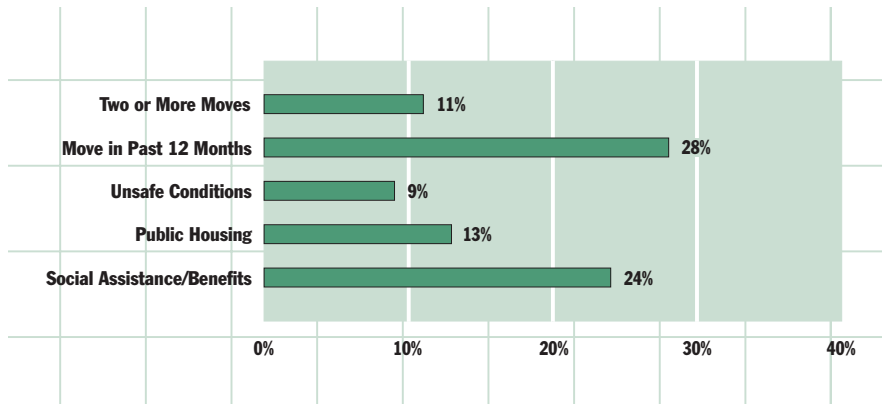
For fathers and other male caregivers the most frequently noted problems were lack of social supports (33%) and alcohol abuse (30%). Childhood maltreatment history (18%), mental health issues (18%) and drug or solvent abuse (17%) were all noted about the same number of times (Figure 13b).

Household risk factors tracked by the CIS-2003 included housing, source of income and frequency of moves.³ Almost a quarter (24%) of households depended on social assistance or other benefits as their major source of income, 13% of households lived in public housing, 9% were considered to be living in unsafe conditions, 28% had moved at least once in the past 12 months, and 11% had moved two or more times (Figure 14).

³ A direct measure of poverty could not be tracked because most child welfare workers were unable to estimate family income.

FIGURE 14: Household Risk Factors for Victims of Substantiated Maltreatment in Canada, Excluding Quebec, in 2003

For sample size, see Tables 7-5 to 7-8.



FUTURE DIRECTIONS

The CIS-2003 Major Findings report provides a first glance at the dramatic changes in child welfare services that have taken place across Canada since 1998. In a period of five years the number of investigations of suspected child abuse and neglect have doubled. While service providers across the country are keenly aware of the increase in the demand for child welfare services, the CIS-2003 provides a unique opportunity to examine these changes at the national level and to analyze them in far more detail than would be possible using current provincial and territorial administrative information systems.

The CIS-1998 and CIS-2003 datasets will provide researchers across the country with the opportunity to examine in more detail the factors underlying the changes in reported and substantiated maltreatment. Given the changes in the types of maltreatment

being reported, it will be particularly important to examine the changes from 1998 to 2003 within each category of maltreatment, and the changes in specific sub-forms of maltreatment. It will also be important to analyze trends in different age groups and in different populations, such as children from Aboriginal backgrounds. As it did with the CIS-1998, the Injury and Child Maltreatment Section at the Public Health Agency of Canada will make the CIS-2003 dataset available to researchers wanting to explore these data more fully.

The preliminary analyses of the important changes between 1998 and 2003 demonstrate the critical importance of public health datasets like the CIS. Findings from the Ontario portion of the CIS-1998 and an earlier 1993 Ontario-wide study

have already contributed to important policy changes in several jurisdictions across Canada. Together, the 1998 and 2003 studies allow the first comparison of national child welfare data at two points in time. Plans are being developed for the third national cycle of the CIS to be conducted in 2008.

In addition to providing a system to periodically collect national data, the CIS data also support provincial and territorial efforts to more efficiently integrate their administrative information systems. With better-integrated information systems, jurisdictions across the country will be in a better position to learn from the diverse policies and programs that have been developed.

The CIS-1998 and CIS-2003 datasets will provide researchers across the country with the opportunity to examine in more detail the factors underlying the changes in reported and substantiated maltreatment.

Chapter 1

INTRODUCTION

This report presents the major descriptive findings from the 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003). The CIS-2003 is the second nation-wide study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by Canadian child welfare services. The estimates presented in this report are based primarily on information collected from child welfare investigators on a representative sample of over 11,500 child welfare investigations conducted across Canada, excluding Quebec. Where available, Canada-wide estimates that include Quebec are presented using information collected in Quebec through the administrative information systems of a representative sample of child welfare service centres. The report also includes selected comparisons with estimates from the 1998 cycle of the study (see Chapter 9).

This introduction presents the rationale and objectives of the study, provides an overview of the Canadian child welfare system, describes the definitional framework used for the study, and outlines the organization of the report.

BACKGROUND: CIS-1998

In Canada, most child abuse and neglect statistics are kept on a provincial or territorial basis. However, because of differences among provinces and territories in definitions of maltreatment and in methods for counting cases, it is not possible to aggregate provincial and territorial statistics. The lack of comparability of provincial and territorial data has hindered the ability of governments and social service providers to improve policies and programs that address the needs of maltreated children. National data are also needed to provide a meaningful context for interpreting findings from Canadian and international child maltreatment research.

The 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998) was the first study in Canada to estimate the incidence of child abuse and neglect reported to, and investigated by, the Canadian child welfare system. The CIS-1998 was based on a study design developed by Nico Trocmé for the 1993 Ontario Incidence Study of Reported Child Abuse and Neglect, which in turn was partially based on the design of the U.S. National Incidence Studies of Child Abuse and Neglect.¹

The CIS-1998 found that an estimated 135,573 child maltreatment investigations were conducted in Canada in 1998, an incidence rate of 21.52 investigations per 1,000 children. Almost half (45%) of these reports of maltreatment were substantiated, 22% could not be substantiated although maltreatment remained suspected, and in 33% of investigations the worker² determined that child maltreatment did not occur. In 4% of the cases of unsubstantiated maltreatment the allegation was considered to be intentionally false.

Neglect was the most common reason for investigation; in an estimated 53,922 child maltreatment investigations (40%) neglect was the primary reason for investigation. Of these, 21,568 reports of neglect (43%) were substantiated. In 31% of investigations (41,551), physical abuse was the primary reason for referral; of these, 14,127 reports of child maltreatment were substantiated. Emotional maltreatment was the primary reason for investigation in 19% of cases (25,694); 13,875 reports of maltreatment were substantiated. Finally, sexual abuse was the primary reason for investigation in 10% of cases (14,406), of which 5,474 were substantiated.

¹ Trocmé, N., McPhee, D., et al. (1994). *Ontario incidence study of reported child abuse and neglect*. Toronto: Institute for the Prevention of Child Abuse.

Sedlak, A.J. and Broadhurst, D.D. (1996). *Executive summary of the third national incidence study of child abuse and neglect*. Washington, D.C.: U.S. Department of Health and Human Services.

² Worker is used to describe all individuals who conduct child protection investigations. These people may be social workers, social service workers or other persons with training in child protection. In some jurisdictions the terms social worker and social service worker are used for individuals who have met licensing requirements within those professions; however, not all individuals conducting child maltreatment investigations will fall into these two categories.

The largest proportion of physical abuse cases were single incidents involving older children, and these were more likely to involve injuries than were other forms of maltreatment. Although sexual abuse cases predominantly involved female victims, the study also drew attention to the large proportion of pre-adolescent male victims of sexual abuse reported to child welfare authorities. Neglect and emotional maltreatment typically involved more complex situations, in which children had more emotional and behavioural difficulties than in other categories of maltreatment, and families struggled more with housing problems, lower employment rates, isolation, substance abuse, and domestic violence.

The study found Aboriginal children to be at high risk of being reported for maltreatment, as they were over-represented at every stage of intervention. Although only 5% of children in Canada were Aboriginal in 1998,³ 17% of children reported to the child welfare system were Aboriginal, 22% of substantiated reports of child maltreatment involved Aboriginal children, and 25% of children admitted to care were Aboriginal. International comparisons indicated that rates of investigated and substantiated child maltreatment were considerably lower in Canada than in the United States, but higher than in Australia.

Findings from the CIS-1998 have provided much-needed information to service providers, policy makers, and researchers seeking to better understand the children and families coming into contact with the child welfare system.

The study highlighted the large number of neglect and emotional maltreatment cases that had not been previously identified as priorities. A number of jurisdictions have used the study findings to assist in adapting child welfare policies to better address the array of difficulties faced by victims of maltreatment and their families. To support the use of CIS-1998 data, the Public Health Agency of Canada's Injury and Child Maltreatment Section has made the dataset available to a number of researchers across the country.

Building on the success of the CIS-1998, the CIS-2003 is an updated profile of maltreated children across Canada, and provides the first opportunity in Canada to examine changes in the profile of children and families reported to child welfare services (see Chapter 9 for comparisons between the findings of the CIS-1998 and the CIS-2003).

Funding

The CIS-2003 combines a study funded by the Public Health Agency of Canada (PHAC) with three studies funded by the governments of Ontario, Alberta, and the Northwest Territories. Funding from the PHAC was provided to gather information from a nationally representative sample of 63 child welfare service areas (CWSAs). A CWSA is a geographic or administrative area served by a distinct child welfare office. In decentralized provinces and territories, a CWSA refers to a child welfare agency, and in centralized provinces and territories it corresponds to a district or regional office.⁴

Ontario, Alberta, and the Northwest Territories provided additional funds to

allow for enriched samples so that provincial incidence estimates could be calculated. These studies applied the CIS-2003 survey instrument and case selection procedures to additional sites in these provinces and territory.

In addition to direct funds received from federal, provincial, and territorial sources, all participating agencies and offices contributed significant in-kind support, which included not only the time required for child welfare workers to attend training sessions, complete forms, and respond to additional information requests, but also the time required to coordinate support from team administrative staff, supervisors, managers and data specialists. Supplementary funding was also provided by the Bell Canada Child Welfare Research Unit and the First Nations Child & Family Caring Society.

OBJECTIVES AND SCOPE OF THE CIS

The primary objective of the CIS-2003 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by child welfare services in Canada in 2003. A second objective is to compare findings over time. As in the CIS-1998, cases tracked by the CIS-2003 include those in which maltreatment was substantiated, suspected or unsubstantiated, but do not include those that were screened out before investigation or that were investigated by the police only (see Figure 1-1). The CIS-2003 is not designed to document unreported cases (see Definitional Framework, Table 1-1 for a detailed presentation of the scope of the study).

³ Trocmé, N., Knoke, D. and Blackstock, C. (2004). Pathways to the over-representation of Aboriginal children in Canada's child welfare system. *Social Service Review*, 78(49), 577-600.

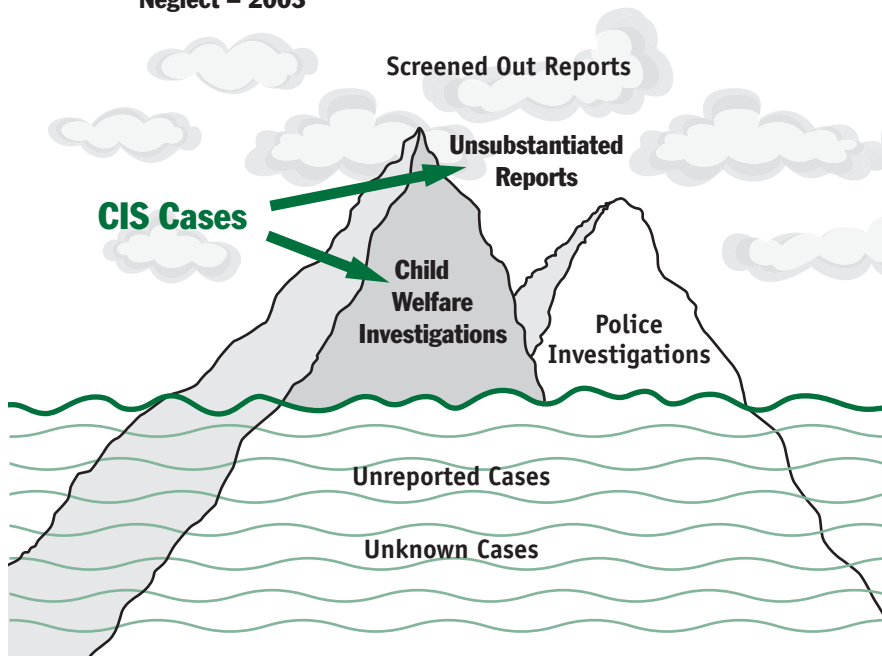
⁴ In some cases several agencies serve the same geographic area on the basis of children's religious or Aboriginal status. In such instances, all child welfare agencies sharing the same geographic boundaries are counted as a single CWSA. In the CIS-2003, 58 agencies participated, covering 55 CWSAs (totals do not include Quebec sites).

TABLE 1-1 Canadian Incidence Study of Reported Child Abuse and Neglect – 2003: Definitional Framework

	Definitional Problem	Measures Taken by CIS-2003
Source of data	Statistics are rarely presented with sufficient detail to allow one to consider all the data collection issues.	CIS-2003 data were collected from child protection workers upon completion of their initial investigation (time depends on provincial, regional, and site practices).
Forms of maltreatment	Maltreatment statistics vary considerably in the forms of maltreatment included.	The CIS-2003 includes 25 defined forms* of maltreatment under five main categories: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence.
Multiple forms of maltreatment	Failure to document multiple forms of maltreatment can lead to underestimating some forms of maltreatment.	CIS-2003 documents up to three forms of maltreatment.
Level of harm	Some statistics include only cases where children have been harmed; others include cases of harm and substantial risk of harm.	CIS-2003 includes cases where children are harmed and cases where children are at risk of harm. Physical and emotional harm are documented.
Timeframe	Research on child maltreatment can focus on the annual incidence, which is the number of cases in a single year; or it can focus on childhood prevalence, which is the number of children maltreated during childhood.	The CIS-2003 measures the annual incidence of investigated maltreatment.
Reporting year	Rates of reported maltreatment have been increasing steadily as public awareness of child abuse increases. Rates from two different years must be compared accordingly.	The reporting year for the CIS-2003 is 2003. Some data are compared with data from the CIS-1998.
Unit of analysis	Child welfare investigations can use either a child-based or family-based method of tracking cases. For child-based, each investigated child is counted as a separate investigation, while for family-based investigations, the unit of analysis is the investigated family, regardless of the number of children investigated.	The CIS-2003 counts cases on the basis of child investigations.
Duplication	Children investigated several times in a year are often counted several times, each time as a separate investigation. Approximately 20 per cent of investigations in a given year involve children investigated more than once.	The CIS-2003 estimates are not unduplicated. Children who are investigated twice during a year are counted as two separate child investigations.
Age group	The age group of children investigated by child welfare services varies by province or territory (See Table 1-2).	CIS-2003 estimates are presented for children under 16 (birth to 15 years, inclusive).
Levels of identification/substantiation	The point at which cases are being identified significantly affects child maltreatment estimates, given that many identified cases are not reported, many reported cases are not investigated, and many investigated cases are not substantiated.	CIS-2003 reports on cases investigated by child welfare authorities. A three-tiered definition of substantiation is used: (1) substantiated, (2) suspected, and (3) unsubstantiated. Screened out or uninvestigated reports are not included.

* Because of limitations in the available information systems in Quebec, fewer types of maltreatment were tracked and two-tiered substantiation (substantiated/unsubstantiated) was used in Quebec.

FIGURE 1-1 Scope of the Canadian Incidence Study of Reported Child Abuse and Neglect – 2003*



* Adapted from Trocmé, N., McPhee, D., et al. (1994). *Ontario incidence study of reported child abuse and neglect*. Toronto: Institute for the Prevention of Child Abuse, and Sedlak, A. J. and Broadhurst, D.D. (1996). *Executive summary of the third national incidence study of child abuse and neglect*. Washington, D.C.: U.S. Department of Health and Human Services.

Specifically, the CIS-2003 is designed to:

- (1) determine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence, as well as multiple forms of maltreatment;
- (2) investigate the severity of maltreatment as measured by forms of maltreatment, duration, and physical and emotional harm;
- (3) examine selected determinants of health that may be associated with maltreatment;
- (4) monitor short-term investigation outcomes, including substantiation rates, out-of-home placements, use of child welfare court, and criminal prosecution; and
- (5) compare 1998 and 2003 rates of substantiated physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence; the severity of maltreatment; and short-term investigation outcomes.

CHILD WELFARE SERVICES IN CANADA

Child welfare legislation and services are organized in Canada at the provincial and territorial level. Child welfare is a mandatory service, directed by provincial and territorial child welfare statutes. Although all child welfare systems share certain basic characteristics, including investigating reports of alleged maltreatment, providing various

types of counseling and supervision, and looking after children in out-of-home care, there is considerable variation in the organization of these service delivery systems (see Table 1-2). Some provinces and territories operate under a centralized, government-run child welfare system; others have opted for decentralized models run by mandated agencies. A number of provinces and territories have recently moved toward regionalized service delivery systems.

Child welfare statutes vary considerably. Some jurisdictions limit their investigation mandates to children under 16 while others extend their investigations to youth under 19. Provincial and territorial statutes also vary in the specific forms of maltreatment covered, procedures for investigation, grounds for removal, and timelines for determining permanent wardship. In addition to these legislative differences, there are important differences in regulations and investigation policies. These differences may be further accentuated by the implementation of different assessment tools and competency-based training programs.

For Aboriginal people in Canada, child welfare services fall under provincial and territorial statutes and regulations, although funding for on-reserve services is provided by the federal government under the *Indian Act*.⁵ The structure of Aboriginal child welfare services is changing rapidly. A growing number of services are being provided either by fully mandated Aboriginal agencies or by Aboriginal counseling services that work in conjunction with mandated services to reach Aboriginal families living on or off reserve.⁶

⁵ *Indian Act*, R.S.C. 1985, c.I-5, s.81.

⁶ Blackstock, C. (2003). First Nations Child and Family Services: Restoring peace and harmony in First Nations communities. In Kufeldt, K. and McKenzie, B. (Eds.). *Child Welfare: Connecting Research, Policy and Practice*. Waterloo: Wilfrid Laurier Press, 331-343.

TABLE 1-2 Administrative Structure of Provincial and Territorial Child Welfare Services in Canada in 2003*

Province/Territory	Administration	Child Welfare Statutes	Age Coverage
Newfoundland and Labrador	The Department of Health and Community Services is responsible for the provision of child welfare programs and services. Child protection is provided through four regional health and community services boards, and two regional integrated health and community services and institutional boards.**	<i>Child, Youth and Family Services Act</i>	Under 16
Prince Edward Island	The Ministry of Health and Social Services, Child, Family and Community Services Division, Children's Services Section is responsible for child welfare programs and services. Child protection is delivered through 5 regional Health Authorities.	<i>Child Protection Act</i>	Under 16, and 16-18 for children with mental, developmental, or physical challenges
Nova Scotia	The Department of Community Services, Family and Children's Services Division, is responsible for child welfare programs and services. Child protection services are provided through 20 child welfare offices; 6 are district offices and 14 are privately run societies/family and children's services agencies; 1 agency is mandated to serve the Mi'kmaq First Nation community.	<i>Children and Family Services Act</i>	Under 16
New Brunswick	Child welfare is the responsibility of the Department of Family and Community Services. Child protection services are provided through 19 delivery sites in 8 regions. In addition, there are 12 agencies providing services to the First Nations communities of New Brunswick.	<i>Family Services Act</i>	Under 16 and disabled youths 19 and under
Quebec	The ministère de la Santé et des Services sociaux funds child welfare programs and services through 19 Centres Jeunesse in 18 regions.	<i>Youth Protection Act</i>	Under 18
Ontario	The Ministry of Children and Youth Services provides the funding for child welfare programs and services, which are provided by Children's Aid Societies throughout the province. There are 52 Children's Aid Societies, which are each governed by a Board of Directors elected from the local community. Four Children's Aid Societies were fully mandated to serve First Nations communities in Ontario in 2003.	<i>Child and Family Services Act</i>	Under 16

* Information was compiled through interviews with Ministerial officials and by reviewing information posted on provincial and territorial websites. (cont'd...)

** Fully mandated child protection agencies serving First Nations communities have been noted for provinces/territories in which these services exist.

TABLE 1-2 Administrative Structure of Provincial and Territorial Child Welfare Services in Canada in 2003 (cont'd)

Province/Territory	Administration	Child Welfare Statutes	Age Coverage
Manitoba	Child welfare is the responsibility of the Department of Family Services and Housing, Child and Family Services Division, Child Protection Branch. Child protection is provided through 5 department offices, 4 private agencies, and 12 First Nations agencies.	<i>Child and Family Services Act</i>	Under 18
Saskatchewan	Child welfare is the responsibility of the Department of Community Resources and Employment. Child protection is provided through 21 service offices in 6 regions. There are 17 fully delegated First Nations child protection agencies in Saskatchewan.	<i>Child and Family Services Act</i>	Under 16
Alberta	The Ministry of Children's Services is responsible for child welfare programs and services. Child protection services are provided through 10 Child and Family Services Authorities; 9 are regionally based and 1 provides services to Metis settlements throughout the province. In addition there are 18 First Nations agencies providing child protection services.	<i>Child Welfare Act</i>	Under 18
British Columbia	The Ministry of Children and Family Development, Child Protection Division is responsible for child welfare programs and services. Workers in 429 offices in 5 regions provided child protection services with support provided by the provincial office of the Child Protection Division. There are 6 fully mandated First Nations child protection agencies in British Columbia.	<i>Children, Family and Community Service Act</i>	Under 19
Yukon Territory	The Department of Health and Social Services, Family and Children's Services is responsible for the provision of child welfare programs and services. Child protection services are provided through 11 offices.	<i>Children's Act</i>	Under 18
Northwest Territories	The Department of Health and Social Services is responsible for child welfare programs and services. Child protection is delivered through 6 regional health and social service boards.***	<i>Child and Family Services Act</i>	Under 16
Nunavut	The Department of Health and Social Services provides child protection services to the communities in Nunavut. Child protection services are provided from 3 regional offices.	<i>Child and Family Services Act</i>	Under 16

*** There are now 8 Health and Social Services Boards in Northwest Territories.

QUEBEC

Because of the recent implementation of a common information system, *Projet Intégration Jeunesse (PIJ)*, for all children's services in Quebec, it was not considered feasible to collect data from investigating workers using the CIS-2003 Maltreatment Assessment Form. Information was collected instead from PIJ using the newly developed *Plate-forme informationnelle pour le bien-être de l'enfant (PIBE)* research database. The feasibility of this strategy was tested by mapping the PIBE fields to the CIS-2003 questions for a sample of 100 cases. Although this strategy provided a base for deriving selected national estimates that include Quebec, there was not sufficient correspondence between the PIBE fields and the CIS-2003 questions to allow us to include the Quebec sample in the core CIS-2003 sample. Therefore, most tables in this report do not include Quebec.

DEFINITIONAL FRAMEWORK FOR THE CIS-2003

In Canadian jurisdictions statistics on child abuse and neglect are collected and reported in very different ways.⁷ Confusion can easily arise because of variations in the way a particular statistic is calculated. The following discussion and framework will help readers interpret this report's statistics.

Child abuse and neglect statistics can be misinterpreted because of two types of problems: confusion about the definitions of child abuse and neglect used, and misunderstanding of the case selection and reporting methods used. Definitional differences can have considerable impact on reported rates. For example, in the U.S. National Incidence Study of Child Abuse and Neglect-3 (1996), estimates of the number of physically neglected children quadrupled when the definition of physical neglect was expanded beyond the Evidence of Harm standard to include cases in which there was substantial risk of harm (Endangerment Standard).⁸ Similarly, estimates of the prevalence of child sexual abuse doubled when acts of exposure were included in the cross-Canada sexual abuse survey conducted for the federal Committee on Sexual Offences Against Children and Youths.⁹

Unfortunately, there is no consensus on definitions of child maltreatment. Definitions have been shown to vary because of differences in legal mandates, professional practices, or social and cultural values. This lack of standards in defining child abuse and neglect has been repeatedly identified as a major obstacle to the development of child maltreatment research and practice.¹⁰ Several jurisdictions have taken steps to set more explicit criteria for defining abuse and neglect. However, the establishment of completely standardized

definitions is constrained by the fact that, in practice, judgments about child maltreatment are shaped by a complex array of changing professional standards and community values.

In addition to the differing research and legal definitions, child welfare agencies and practitioners develop their own standards that do not necessarily reflect governing legislation. Furthermore, even within agencies there is evidence that, in practice, standards are influenced by factors such as neighbourhood characteristics.¹¹

A second source of variation in maltreatment rates arises from differences in the way statistics are collected and reported. Child maltreatment statistics can end up measuring very different things, depending on who collects them and how they are collected. Some rates refer to the number of reported incidents; others refer only to allegations that have been substantiated by a thorough investigation. Some rates are based on annual incidence counts, whereas others measure childhood prevalence. These differences limit any direct comparison of maltreatment statistics derived from different data sources. However, unlike the more intractable definitional problems, collection issues can be resolved by clearly specifying case selection methods. Table 1-1 summarizes the challenges in comparing child maltreatment statistics by considering how they are affected by different case selection methods.

⁷ Trocmé, N., McPhee, D., et al. (1994). *Ontario incidence study of reported child abuse and neglect*. Toronto: Institute for the Prevention of Child Abuse.

⁸ Sedlak, A.J. and Broadhurst, D.D. (1996). *Executive summary of the third national incidence study of child abuse and neglect*. Washington, D.C.: U.S. Department of Health and Human Services.

⁹ Government of Canada. (1984). *Sexual offences against children: Report of the committee on sexual offences against children and youths (Vols 1 & 2)*. Ottawa: Canadian Government Publishing Centre.

¹⁰ National Research Council. (1993). *Understanding child abuse and neglect*. Washington, D.C.: National Academy Press.

¹¹ Shor, R. (2000). Child maltreatment: Differences in perceptions between low income and middle income neighbourhoods. *British Journal of Social Work*, 30: 165-178.

Categories and Forms of Maltreatment

The first area of potential confusion in interpreting child maltreatment statistics is the inconsistency in the categories of maltreatment included in different statistics. Most child maltreatment statistics refer to both physical and sexual abuse, but other categories of maltreatment, such as neglect and emotional maltreatment, are not systematically included. There is even less consensus on subtypes or forms of maltreatment.¹² For instance, some child welfare authorities include only intra-familial sexual abuse; the justice system deals with cases of extra-familial sexual abuse.

The CIS-2003 definition of child maltreatment includes **25 forms of maltreatment**¹³ subsumed under **five categories** of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence.¹⁴ This classification reflects a fairly broad definition of child maltreatment and includes several forms of maltreatment that are not specifically stated in some provincial and territorial child welfare statutes (e.g., educational neglect and exposure to domestic violence).

The documentation of **multiple forms** of maltreatment is also problematic. Many child welfare information systems have the capacity to classify cases only as a single form of maltreatment. Systems

that count only one form of maltreatment tend to under-count neglect and emotional maltreatment because these often appear in conjunction with abuse, but are generally considered less severe.¹⁵ The CIS-2003 tracked up to three categories of maltreatment.

Level of Harm

There is some debate in the child maltreatment literature about defining maltreatment in terms of caregiver maltreatment behaviours versus **actual harm** done to children as a result of abuse or neglect.¹⁶ Cases of maltreatment that draw public attention usually involve children who have been severely injured or, in the most tragic cases, have died as a result of maltreatment. In practice, child welfare agencies investigate and intervene in many situations in which children have not yet been physically harmed, but are **at risk of harm**. Many of these children display cognitive and emotional difficulties that are associated with maltreatment, but not necessarily a specific injury that has led to a report. Provincial and territorial statutes cover children who have suffered from demonstrable harm due to abuse or neglect, and children at risk of harm. The level or risk of harm is based on the severity of the act. In cases of sexual abuse, for instance, evidence of harm to the child is not considered to be relevant, whereas in cases of physical abuse, especially those involving corporal punishment, physical

injury is more closely tied to the determination of abuse. The third U.S. National Incidence Study of Child Abuse and Neglect NIS-3 (1996) includes two standards in calculating estimates of maltreatment: a narrow standard based on evidence of harm to the child, and a broader standard that includes cases of children at risk of harm.¹⁷ The CIS-2003 documents both physical and emotional harm; however, definitions of maltreatment used for the study do not require the occurrence of harm.

Timeframe

Maltreatment statistics can also be misinterpreted because of confusion about the **timeframe** to which statistics refer. The most serious source of misunderstanding is the difference between annual incidence and **childhood prevalence**. For a given population, childhood prevalence refers to the number of people maltreated at any point during their childhood, whereas **annual incidence** refers to the number of child maltreatment investigations per 1,000 children in a given year. The relationship between the two timeframes is complicated and is influenced by factors that include the duration of maltreatment, the number of separate incidents, and the age at onset of the maltreatment. Although this use of the term “incidence” is common in child welfare, it is different from the way in which the

¹² Portwood, S. G. (1999). Coming to terms with a consensual definition of child maltreatment. *Child Maltreatment: Journal of the American Professional Society on the Abuse of Children*, 4(1): 56-68.

¹³ Because of limitations in the available information systems in Quebec, fewer types of maltreatment were tracked in this province.

¹⁴ Given the expansion of domestic violence investigations, the CIS-2003 treats exposure to domestic violence as a separate maltreatment typology.

¹⁵ Cicchetti, D. (2004). An odyssey of discovery: Lessons learned through three decades of research. *American Psychologist*, 59(8): 731-741.

¹⁶ Portwood, S. G. (1999). Coming to terms with a consensual definition of child maltreatment. *Child Maltreatment: Journal of the American Professional Society on the Abuse of Children*, 4(1): 56-68.

¹⁷ Sedlak, A.J. and Broadhurst, D.D. (1996). *Executive summary of the third national incidence study of child abuse and neglect*. Washington, D.C.: U.S. Department of Health and Human Services.

term is used by epidemiologists, where incidence refers to the number of new events (e.g., new cases of a disease or disorder in a given population and time period).¹⁸ The CIS-2003 did not track new incidents of maltreatment on already open cases.

The **reporting year** can significantly affect documented rates of maltreatment, since reporting rates change over time. In Ontario, for example, there was a 44% increase in the number of cases of reported maltreatment between 1993 and 1998.¹⁹ The reporting year can also lead to confusion because some jurisdictions use the calendar year, whereas others refer to the fiscal year. CIS-2003 estimates were calculated for the calendar year from January 1 to December 31, 2003.

Unit of Analysis

The **unit of analysis** determines the denominator used in calculating maltreatment rates. Some statistics refer to the number of child investigations, but others refer to the number of family investigations. The relationship between the two is unclear in some instances, because with **family-based** statistics it is difficult to determine how many children have been maltreated, particularly in cases of neglect. The CIS-2003 uses **child-based** statistics to be consistent with the way most child service statistics are kept (e.g., health, corrections, education, and foster care).

Some jurisdictions provide child welfare services to families when there is no alleged maltreatment. This is particularly true in Quebec, where the mandate of child welfare services

explicitly extends to non-maltreatment situations in which children's emotional or behavioural problems are considered to require intervention. These are referred to as **non-maltreatment** cases in the CIS-2003 (e.g., services for prenatal counseling and child behaviour problems) and are tracked separately as non-maltreatment case openings. The CIS-2003 reports only on child maltreatment investigations.

Consideration should also be given to the **age group** included in the child welfare statistics. As noted earlier, the scope of child welfare investigations varies considerably across Canada because of the differing ages at which children are considered to need protection (see Table 1-2). To ensure consistency in the application of definitions across Canada, CIS-2003 data are generally reported for children aged under 1 year to 15 years. Data on older youth investigated in jurisdictions that include a higher age range were also collected and are presented in Chapter 6, Table 6-2.

Case Duplication

Most annual child welfare statistics are reported by the number of investigations, and not the number of investigated children. Some investigations involve children who were previously investigated in the same year. Therefore, statistics based on the number of investigations double count children who are investigated more than once in one year. Although each investigation represents a new incident

The CIS-2003 definition of child maltreatment includes 25 forms of maltreatment subsumed under five categories of maltreatment: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence.

of maltreatment, confusion arises if these investigations are assumed to represent an unduplicated count of children. To avoid such confusion, the CIS-2003 uses the term **child investigations** rather than **investigated children**, since the unit of analysis is the investigation of the child's suspected maltreatment.

Most child welfare data systems report numbers of investigations, not numbers of investigated children. For example, the U.S. National Child Abuse and Neglect Data System (2003) report²⁰ states: "In the data presented in this report, a child is counted *every time* he or she is the subject of a substantiated or indicated report" (emphasis added). An estimate of how often maltreated children will be counted more than once can be derived from those jurisdictions that maintain separate investigation and child-based counts.

¹⁸ Last, J.M. (1995). *A dictionary of epidemiology*, 3rd edition. New York: Oxford University Press.

¹⁹ Trocmé, N., Fallon, B., MacLaurin, B. and Copp, B. (2002). *The Changing Face of Child Welfare Investigations in Ontario: Ontario Incidence Studies of Reported Child Abuse and Neglect (OIS 1993/1998)*, Toronto: Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto.

²⁰ U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2005). *Child Maltreatment 2003*. Washington, D.C.: U.S. Government Printing Office.

During a 12-month follow-up, rates of recurrence range from 5.2% to 31%.²¹ The U.S. National Child Abuse and Neglect Data System (NCANDS)²² reports that for substantiated reports of child maltreatment, the recurrence rate was 8.4% within 6 months during 2003. In Quebec, the recurrence rate was 8.8% of screened-in investigations over a 12-month period.²³

Although all duplicate reports were removed from the CIS-2003 sample,²⁴ it was not possible to develop unduplicated child estimates for the whole year because the investigation statistics used to derive the CIS-2003 annualization weights were investigation-based counts that included children investigated more than once in 2003.

Level of Case Identification

A major source of variation in maltreatment statistics occurs with the *level of identification and substantiation* used. Figure 1-2 illustrates four

key stages in the case identification process: detection, reporting, investigation, and substantiation. Child maltreatment statistics vary considerably depending on the level of case identification. For example, several jurisdictions screen out a significant number of reports before conducting investigations. In Quebec, nearly half of all reports are screened out; thus the number of reports of suspected child maltreatment is double the number of investigations.

Detection is the first stage in the case identification process. Little is known about the differences between detected and undetected. Surveys of adult survivors indicate that some have never “before” (i.e., before disclosing the experience in the survey) disclosed their childhood experiences of abuse.²⁵

Reporting suspected maltreatment is required by law in all Canadian provinces and territories, and in all U.S. states.²⁶ A number of studies of

reporting practices in the United States show that as many as half the cases of suspected maltreatment detected by professionals working with children are not reported to child welfare services.²⁷ The CIS-2003 does not document unreported cases.

It is also important to distinguish between cases reported to child welfare services and cases reported to the police. Although there is some overlap between these two groups (19% of substantiated CIS-2003 reports were jointly investigated by child welfare services and the police), many cases involving alleged perpetrators outside the family (e.g., a stranger exposing himself to a child) may involve only a police investigation and therefore may not be counted in child welfare investigation statistics. The CIS-2003 documents only cases investigated by child welfare services, or cases jointly investigated by the police and child welfare services.

²¹ For example: Baird, S. C. (1988). Development of risk assessment indices for the Alaska Department of Health and Social Services. In T. Tatara (Ed.). *Validation research in CPS risk assessment: Three recent studies* (Occasional Monograph Series) No. 2:84-142.

Coleman, H. D. J. (1995). *A longitudinal study of a family preservation program*. Unpublished doctoral dissertation, University of Utah, School of Social Work.

Luttrell, J., Hull, S. and Wagner, D. (1995). *The Michigan Department of Social Services Structured Decision Making System: An evaluation of its impact on child protection services*. Paper presented at the Ninth National Roundtable on CPS Risk Assessment, San Francisco.

DePanfilis, D. and Zuravin, S. J. (1998). Rates, patterns, and frequency of child maltreatment recurrences among families known to CPS. *Child Maltreatment: Journal of the American Professional Society on the Abuse of Children*, 3(1): 27-42.

²² U.S. Department of Health and Human Services, Administration on Children, Youth and Families. (2005). *Child Maltreatment 2003*. Washington, D.C.: U.S. Government Printing Office.

²³ Hélie, S. (2005). *Fréquence et déterminants de la récurrence du signalement en protection de la jeunesse : Analyse de survie d'une cohorte montréalaise*. Unpublished doctoral dissertation, Université du Québec à Montréal, Département de psychologie.

²⁴ Duplicate cases were screened out and deleted on site on the basis of agency identification numbers, family initials, and date of referral.

²⁵ For example: Finkelhor, D., Hotaling, G. et al. (1990). Sexual abuse in a national survey of adult men and women: Prevalence, characteristics, and risk factors. *Child Abuse & Neglect*, 14(1):19-28.

Anderson, J. and Martin, J. (1993) *Woman's health survey*. Dunedin: Dunedin Public Hospital, Department of Psychological Medicine.

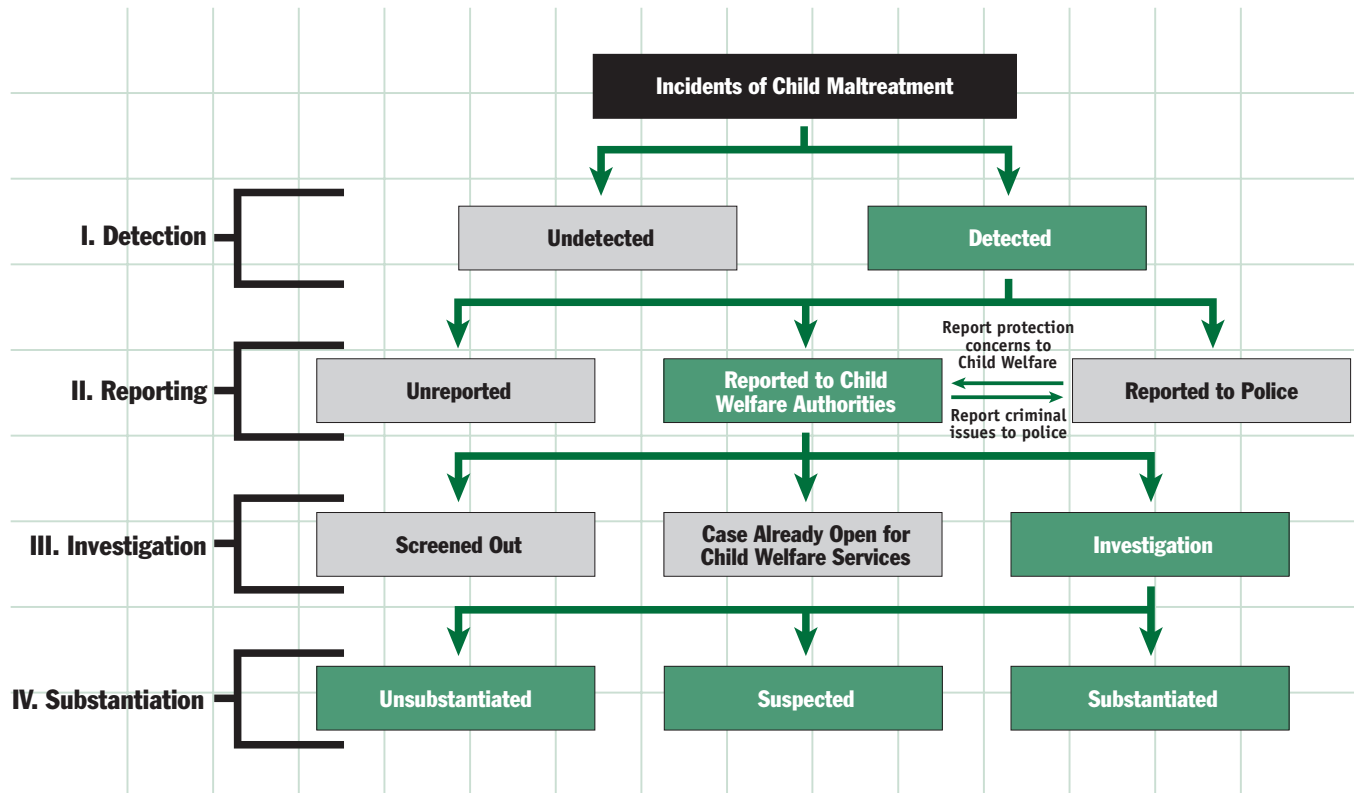
MacMillan, H., Jamieson, E., and Walsh, C. (2003) Reported contact with child protection services among those reporting child physical and sexual abuse: Results from a community survey. *Child Abuse & Neglect*, 27(12):1397-1408.

²⁶ Although Yukon Territory does not include mandatory reporting in the *Children's Act*, the *Education Act* and the *Child Care Act* require teachers and daycare providers to report suspicions that a child needs protection to the child welfare authority. As well there are protocols and/or policies within various government departments and several non-governmental organizations that require their staff to report abuse/neglect.

²⁷ Zellman, G. (1990). Report decision-making patterns among mandated child abuse reporters. *Child Abuse & Neglect*, 14(3):325-336.

Sedlak, A.J. and Broadhurst, D.D. (1996). *Executive summary of the third national incidence study of child abuse and neglect*. Washington, D.C.: U.S. Department of Health and Human Services.

FIGURE 1-2 Stages of Identification of Incidents of Child Maltreatment, CIS-2003*



* Green boxes describe cases tracked by the CIS-2003.

Investigation, the third stage in the case identification process, can lead to confusion when child maltreatment statistics are compared. As noted earlier, all reports are not necessarily investigated. Some may be screened out because of insufficient information about a child’s whereabouts to launch an investigation; others may be screened out because they are not considered to be within the defined mandate of the child welfare services. **Screening practices** in Canada vary from an informal and undocumented process to a structured, formal telephone investigation. Because of these variations the CIS-2003 could not track screened-out cases.

In addition to reports being screened out, reports received about cases already open may be investigated by the ongoing worker and may not be tracked as new investigations. The CIS-2003 did not track new incidents of maltreatment on already open cases.

Substantiation distinguishes cases in which maltreatment is confirmed through an investigation from cases in which it is not. Some jurisdictions use a two-tiered substantiation classification system that distinguishes between substantiated and unsubstantiated reports, or between verified and not-verified reports. The CIS-2003 uses a three-tiered classification system,²⁸ in which a

“suspected” level provides an important clinical distinction in cases in which there is not enough evidence to substantiate maltreatment, but in which maltreatment cannot be ruled out.

SUMMARY OF CIS-2003 DEFINITIONAL FRAMEWORK

The CIS-2003 provides an estimate of the number of cases (child-based, under age 16) of alleged child maltreatment (physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence) reported to and investigated by Canadian child

²⁸ Because of the organization of information systems in Quebec, two-tiered substantiation (substantiated/unsubstantiated) was used in the province.

welfare services in 2003 (screened-out reports not included). The estimates are broken down in Chapter 3 into three levels of substantiation: substantiated, suspected, and unsubstantiated. With the exception of nine tables, estimates are limited to substantiated cases only. Cases opened more than once during the year are counted as separate investigations (see Table 1-1).

ORGANIZATION OF REPORT

This report presents the major descriptive findings from the CIS-2003 and selected comparisons between CIS-1998 and CIS-2003. Because of the limited availability of data from Quebec, most of the estimates presented in the report are for Canada excluding Quebec.

Where comparable data are available, Canada-wide estimates are presented.

This report is divided into 9 chapters and 9 appendices. Detailed descriptive findings are provided for all variables from the CIS-2003 study. Chapter 2

describes the study's methods. Chapter 3 presents estimates of the incidence of reported child maltreatment for each category of maltreatment, by level of substantiation. Chapter 4 examines the characteristics of different categories of substantiated maltreatment by the nature, severity, and duration, and the identity of the alleged perpetrators. Investigation outcomes, provision of services, placement, police involvement, and applications to court are presented in Chapter 5. Chapter 6 describes child characteristics, including categories of maltreatment by age and sex, child functioning, and Aboriginal status. Chapter 7 describes household characteristics, including age and sex of caregivers, income and income source, housing accommodations, and other selected determinants of health (e.g., caregiver functioning, risk factors, and coping practices). Referral and agency characteristics are described in Chapter 8. Chapter 9 compares selected findings of the CIS-1998 and CIS-2003 studies, and outlines directions for further research.

The **Appendices** include:

- Appendix A: CIS-2003 Site Researchers
- Appendix B: Public Health Agency of Canada Staff and National Steering Committee Members
- Appendix C: Glossary of Terms
- Appendix D: CIS-2003 Maltreatment Assessment Form
- Appendix E: CIS-Cycle II Guide Book
- Appendix F: Case Vignettes
- Appendix G: Worker Information Form
- Appendix H: Variance Estimates and Confidence Intervals
- Appendix I: Supporting Data for Additional Report Findings

Chapter 2

METHODS

The 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003) is the second national study examining the incidence of reported child abuse and neglect in Canada. The CIS-2003 captured information about children and their families as they came into contact with child welfare services over a three-month sampling period. The CIS-2003 does not include maltreated children who were not reported to child welfare services, screened-out reports, or new allegations on cases currently open at the time of case selection (see Chapter 1 for definitions of reported, non-reported, and screened-out cases).

A multi-stage sampling design was used, first to select a representative sample of 55 child welfare service areas (CWSAs) across Canada, excluding Quebec, and then to sample cases within these CWSAs. Information was collected directly from the investigating workers and is based on the workers' judgment at the time of investigation. The core CIS-2003 sample of 11,562 child maltreatment investigations was used to derive estimates of the annual rates and characteristics of investigated child maltreatment in Canada, excluding Quebec. National estimates including Quebec were derived by combining the core CIS-2003 sample with a Quebec sample of 2,638 child protection investigations tracked by the administrative information systems in eight CWSAs in Quebec.

As with any sample survey, estimates must be considered within the constraints of the survey instruments, the sampling design, and the estimation procedures used. This chapter presents the CIS-2003 methods and discusses their strengths, limitations, and impact on interpreting the CIS-2003 estimates. It also describes the CIS-2003 research network; its survey instruments, reliability and validity testing, focus group testing, the sample selection and enlistment strategies; the case selection, entry, and data verification procedures; and the statistical methods used for calculating national estimates.

STUDY ORGANIZATION

Because of the challenges inherent in trying to gather national information within a provincially/territorially organized child welfare service system, a complex study structure was required to ensure that the needs of key stakeholders were adequately met. This included the collaborative use of funds from federal and provincial sources as well as in-kind support from the participating child welfare agencies and offices, a nationally coordinated study consultation process, and a centralized project management structure.

National Consultation

Building on the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998), the PHAC was

able to secure provincial and territorial support for the second cycle of the CIS. The study design, including enlistment strategies, instruments and report formats, was developed in consultation with a National Steering Committee (see Appendix B), provincial and territorial Directors of Child Welfare and the PHAC staff. The National Steering Committee participated in revising the maltreatment assessment form and provincial staff assisted in generating the CWSA database and in the site recruitment.

The study team worked with the First Nations Child & Family Caring Society to develop a sampling strategy, enlistment protocols, and data collection procedures for Aboriginal sites.

PHAC staff were involved at all stages of the project, from instrument design to data collection and analysis, and structuring this report.

Study Timeframe

The CIS-2003 was funded to begin in February 2003. The study was conducted in three phases over two and a half years. During the preparation phase (February 2003 to September 2003), the study instruments developed for the CIS-1998 were reviewed and tested, and the study sites were selected and enlisted. During the case selection phase (September 2003 to June 2004), participating child welfare workers were trained, and survey instruments were

completed, collected, and verified. The final phase of the study (June 2004 to March 2005) involved entering the survey information into the CIS-2003 database, checking for inconsistent and missing information, conducting descriptive analysis, calculating the weighted estimates, and preparing reports.

Project Management Structure

The CIS-2003 was directed by a team of researchers affiliated with the Centre of Excellence for Child Welfare at the University of Toronto's Faculty of Social Work. The team included Nico Trocmé, Principal Investigator (McGill University); Bruce MacLaurin, Co-Investigator (University of Calgary); and Barbara Fallon and Joanne Daciuk, Project Co-managers (University of Toronto). Sites in northern and western Canada participated under the direction of Bruce MacLaurin. Sites in Ontario, Quebec, and the Atlantic provinces participated under the direction of Nico Trocmé and the project managers. Data verification was completed in the Toronto and Calgary offices; data entry, cleaning and weighting were completed in Toronto. The Toronto staff prepared this report.

In Quebec, the researchers involved were Richard Cloutier and Daniel Turcotte, Université Laval; Louise Éthier, Université du Québec à Trois-Rivières; Chantale Lavergne, (Institut de recherche sur le développement social des jeunes); and Esther Montambault, Université de Sherbrooke. Data compilation and verification for Quebec were done in the Quebec office by Denis Lacerte. Merging the Quebec data to the rest of Canada dataset was done at the Toronto office.

ETHICS PROCEDURES

The CIS-2003 protocols and procedures were reviewed and approved by the University of Toronto's Ethics Committee and the Health Canada Research Ethics Board prior to the commencement of data collection. Written permission to participate in the data collection process was obtained from the provincial and territorial Directors of Child Welfare and from the agency administrator or director. Where a participating site had an ethics review process, the study was also evaluated by the individual agency or office.

The study used a case file review methodology. The case files are the property of the delegated agency, office or regional authority, and their permission was required to access the case files. Confidentiality of case information and participants, including workers and agencies, was maintained throughout the process. No directly identifying information was collected. The Intake Face Sheet collected near-identifying information: the first three letters of the child's first name and the child's age. The tear-off portion of the Comment Sheet (the second page of the instrument) included the service case number assigned by the agency/office, the research case number assigned by the CIS-2003 study researchers, and also the first two letters of the family surname. Workers provided the address or postal code for the family's primary residence.

This information was used for verification purposes only. The near-identifying information was stored on site and destroyed at the end of the data collection period unless the agency/office chose to retain the information to allow for follow-up research.

The follow-up research could examine longer-term service outcomes for children and families in the CIS-2003 sample and would require a separate ethics review process.

The data collection instruments (that contain no directly identifying information) were scanned into an electronic database. These electronic data were stored on a locked, password-protected hard drive in a locked office and on a CD stored in a locked cabinet off-site. Only those University of Toronto research personnel with security clearance from the Government of Canada had access to this information through password-protected files. All paper data collection instruments were archived in the type of secure filing cabinets approved by the RCMP.

This report contains only national estimates of child abuse and neglect and does not identify any participating agency or office.

INSTRUMENTS

The CIS-2003 survey instruments were designed to capture standardized information from child welfare workers conducting investigations. Because investigation procedures vary considerably across Canada (see Chapter 1), a key challenge in designing the CIS-2003 survey instruments was to identify the common elements across jurisdictions that could provide standardized data. Given the time constraints of child welfare workers, the instruments also had to be as short and simple as possible.

The CIS-1998 instruments were based on the Ontario Incidence Study of Reported Child Abuse and Neglect and the U.S. National Incidence Study of Child Abuse and Neglect²⁹ to increase the likelihood

²⁹ Trocmé, N., McPhee, D., et al. (1994). *Ontario incidence study of reported child abuse and neglect*. Toronto: Institute for the Prevention of Child Abuse.

Sedlak, A.J. and Broadhurst, D.D. (1996). *Executive summary of the third national incidence study of child abuse and neglect*. Washington, D.C.: U.S. Department of Health and Human Services.

that all three studies' findings could be compared. Comparability with previous studies was therefore a key priority of the CIS-2003. The data collection instrument was a modified version of the CIS-1998 form, to minimize minor problems in its use. Modifications were based on consultation with the National Steering Committee and focus and pilot testing.

Maltreatment Assessment Form

The main data collection instrument used for the study was the Maltreatment Assessment Form, which was completed by the primary investigating child welfare worker at the end of each child welfare investigation (see Appendix D). The Maltreatment Assessment Form consisted of an Intake Face Sheet, a Household Information Sheet, and a Child Information Sheet.

Workers completed the Intake Face Sheet for all cases opened during the study period, whether or not a specific allegation of maltreatment had been made. This initial review of all child welfare case openings provided a consistent mechanism for differentiating between cases investigated for suspected maltreatment and those referred for other types of child welfare services (e.g., preventive services).

The Intake Face Sheet collected basic information about the report or referral and near identifying information about the children involved. The sheet requested information on the date of referral, referral source, number of children in the home, age and sex of children, whether maltreatment was suspected or alleged, whether the case

was screened out, the family's postal code, and the reasons investigations were not initiated. The section of the form containing partially identifying information was left at the agency/office (the case number, first two letters of the family's surname, and postal code). The remainder of the form was completed if abuse or neglect was suspected, either by the persons making the report or by the investigating worker, at any point during the investigation.³⁰

The Household Information Sheet was completed only when at least one child in the family was investigated for suspected maltreatment. The household was defined as including all the adults living at the address of the investigation. The Household Information Sheet collected detailed information on up to two caregivers. Descriptive information was requested about the contact with the caregiver, the caregiver's own history of abuse, other adults in the home, housing, caregiver functioning, case status, and referrals to other services.

The third page of the instrument, the Child Information Sheet, was completed for each child who was investigated for maltreatment.³¹ The sheet documented up to three different forms of maltreatment, and included levels of substantiation, alleged perpetrator or perpetrators, and duration of maltreatment. In addition, it collected information on child functioning, physical and emotional harm to the child attributable to the alleged maltreatment, child welfare court activity, out-of-home placement, police involvement, and the caregiver's use of spanking as a form of discipline.

The Maltreatment Assessment Form also included a section for comments, for cases not adequately described by the categories provided, or to provide additional detail.

A significant challenge for the study was to overcome the variations in the definitions of maltreatment used in different jurisdictions. Rather than anchor the definitions in specific legal or administrative definitions, the study used a single set of definitions corresponding to standard research classification schemes. All items on the case selection forms were defined in an accompanying CIS-Cycle II Guide Book (see Appendix E).

Worker Information Form

A Worker Information Form was used to collect information about the worker completing the investigation. Workers in 55 out of the 63 CIS-2003 CWSAs³² were asked to complete the forms. Responses were received from 819 workers, or 87% of workers who had participated in the study. The one-page form included information about the worker's role and position, training, education, and experience (see Appendix G).

FOCUS AND PILOT TESTING

The PHAC is committed to repeating the CIS in five-year cycles. In keeping with the goals of comparability and ease of use, the CIS-1998 data collection instrument was reviewed by a group of experts in October 2002, and several

³⁰ The CIS-Cycle II Guide Book (see Appendix E) and training sessions emphasized that workers should base their responses to these questions on their clinical expertise rather than on the information collected according to provincial or local investigation standards. The CIS-Cycle II Guide Book specifies the following: "Indicate which children were investigated because of suspected child maltreatment... Only include those cases where in your clinical opinion maltreatment was suspected at some point." (p.6)

³¹ One Child Information Sheet was attached to the Maltreatment Assessment Form, and additional Child Information Sheets were available in every office.

³² No worker information forms were gathered in Quebec as data were gathered from the common information system in eight regions.

changes were suggested. These included the response options for the caregiver and child functioning items, caregiver age, and case status. As a result of this meeting two versions of the form were developed for focus testing.

The CIS-2003 National Steering Committee completed a focus test of the two forms in March 2003. The same two versions of the forms were focus tested on child welfare workers in two agencies, one urban in Ontario, the other rural in Alberta. Focus testing ensured that modifications to the form were consistent with standard practices, were easy to read and understand, and would maintain comparability with the 1998 cycle of the study.

The two versions of the forms were further modified to reflect the focus test results and were then pilot tested with child welfare workers who volunteered to participate. The sample for the pilot testing was drawn from workers in two agencies (one each in Ontario and Alberta). The purpose of the pilot test was threefold:

- (1) to gain feedback on the instrument, in particular on the clarity of the items, the completion rates, and the relevance of the information requested;
- (2) to examine case selection procedures; and
- (3) to assess the reliability of the data collection instrument.

A total of 85 completed Maltreatment Assessment Forms were collected from the pilot test sites in Alberta and Ontario. Workers reported that completing the instrument generally took 10 minutes. Pilot test feedback confirmed that the Maltreatment Assessment Form was generally compatible with standard

practices and that the case selection procedures were compatible with the different investigation procedures.

Reliability was assessed using a convenience sample of three metropolitan child welfare agencies, which were selected because of the availability of workers, and the agencies' proximity to study team research personnel. Workers participated in the study on a voluntary basis. Two versions of the CIS-2003 data collection instrument were tested.

The test-retest reliability of the instrument was assessed by comparing case ratings on the data collection instrument at two separate points in time. The test-retest procedure was assessed as follows: workers completed the instrument for new intake investigations that involved an allegation or suspicion of child maltreatment (Time 1), then an average of 4.5 weeks later the same worker completed the instrument a second time for the same investigation (Time 2). For variables with alternate response formats on the two versions, test-retest reliability was examined for the format adopted on the final CIS Cycle-II form. Version A included 54 children from 34 families and Version B included 28 children from 23 families.

Test-retest reliability was examined for a wide range of variables measuring characteristics of suspected or alleged maltreatment, households, caregivers, children, maltreatment history, and service-related variables. Two indices of agreement were used to assess the concordance of worker ratings at two points in time: per cent agreement and the Kappa statistic. Greater weight was given to the latter index, since it adjusts for agreement that occurs by chance alone.

The vast majority of items on the CIS-2003 Maltreatment Assessment Form showed good to excellent test-retest reliability (Kappa = 0.66 to 1.00).

Among the most reliable groups of variables were referral source, form of maltreatment, maltreatment history, child age and gender, case disposition items, and indices related to emotional harm. The majority of items related to household and caregiver characteristics also showed substantial to excellent agreement.

A number of items fell slightly below the criterion adopted for acceptable reliability. The presence of unsafe and overcrowded housing, criminal activity of the primary caregiver, any child referral, perpetrator identity (Caregiver A), and several child functioning concerns had Kappa values that fell within a moderate range of agreement (0.40 to 0.60).³³

Few variables were characterized by poor reliability. Examined individually, several services to which families and children were referred and some specific acts of maltreatment were rated inconsistently over time. Caution must be exercised in using these variables individually. With the exception of the "any child referral" variable, reliability was enhanced when these items were grouped into higher order categories. This suggests, for example, that while the specific act of maltreatment may not have been accurately recalled by workers, the form of maltreatment was rated consistently over time.

Several modifications were made to the form as a result of the focus groups and pilot testing. Some items on the form were reorganized, others were collapsed, and some were added. For example, the variables "maltreated as a child" and "caregiver in a violent relationship"

³³ Landis, J.R. and Koch, G.G. (1977). The measurement of observer agreement for categorical data. *Biometrics*, 33: 159-174.

were moved into the caregiver risk factor section. The household income levels were collapsed from eight categories to five, and housing from eight categories to six. Maltreatment codes were also modified as a result of the focus group and pilot testing process. Physical abuse categories were anchored to caregiver behaviours. Sexual abuse categories were also updated, with several items made less ambiguous. The category of sex talk was added, which includes sexual communications including Internet contact and exposure to pornography.

For the Quebec portion of the study, pilot testing focused on mapping CIS-2003 and Projet Intégration Jeunesse (PIJ) variables and response categories. Results were sufficiently positive to allow for some national estimates that include Quebec; however, there was not sufficient correspondence to allow us to include the Quebec sample in the core CIS-2003 sample.

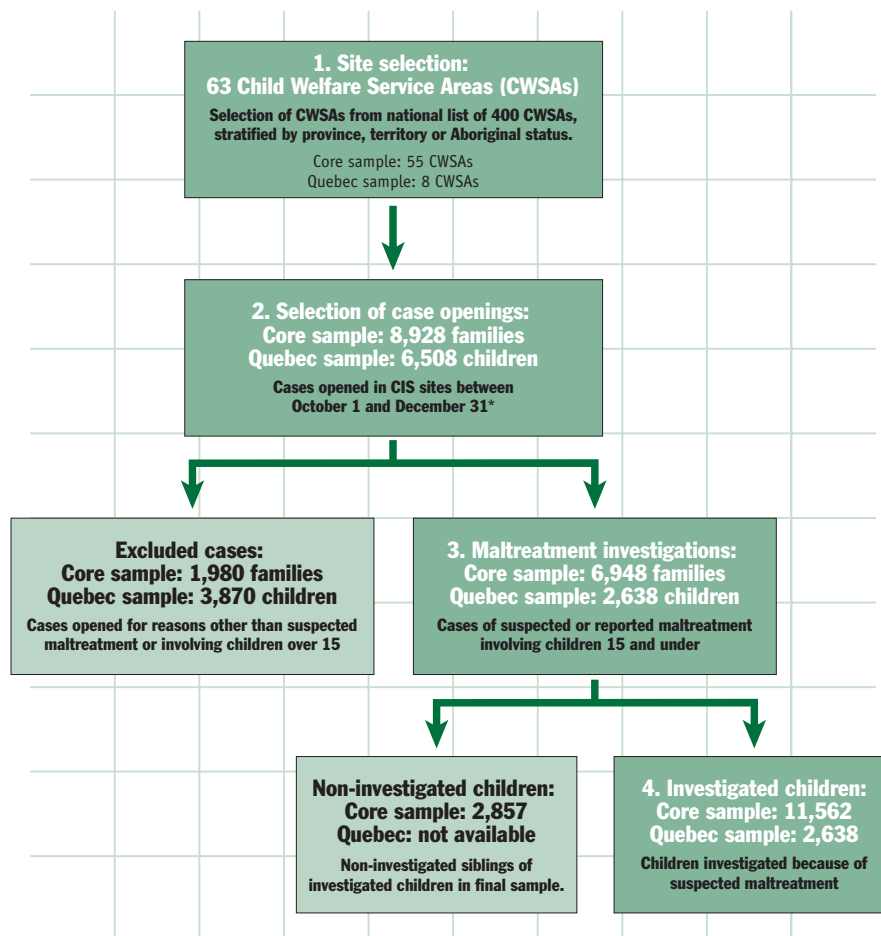
SAMPLING

A stratified cluster design was used to select maltreatment investigations for the CIS-2003. Because of variations in the organization of child welfare service systems across Canada (see Chapter 1), a four-stage sampling process was required to select a nationally representative sample of children investigated because of suspected maltreatment (see Figure 2-1).

In the first stage of the sampling process a minimum of one agency or office was selected in each province and territory. In larger provinces such as British Columbia, Alberta, and Ontario, stratification by region was used.

To ensure adequate representation, Aboriginal agencies were not included in the provincial/territorial strata, but were sampled from a separate Aboriginal Canadian stratum. A list of

FIGURE 2-1 Canadian Incidence Study of Reported Child Abuse and Neglect – 2003: Sampling Stages



* In several Aboriginal jurisdictions and in Quebec, data collection included cases opened in January 2004. This adjustment was made to accommodate late enrolment of some Aboriginal sites and to allow for a data adjustment period in Quebec's new information system.

Aboriginal agencies and offices that offered dedicated services to children of a First Nations heritage was generated by contacting the appropriate ministries in the provinces and territories, and through the First Nations Child & Family Caring Society. A letter was sent to each sampled agency from the First Nations Child & Family Caring Society and the regional investigator. Although funding was available for 10 Aboriginal agencies to participate in the study, the study team was able to recruit only 8. The limited capacity of information systems in Aboriginal agencies prevented some from participating.

To increase the probability that larger agencies in Saskatchewan, Manitoba, Newfoundland and Labrador, New Brunswick, and Nova Scotia would be included in the sample, the sites were weighted based on the average number of provincial openings. The CIS-2003 is designed to provide a national estimate of reported maltreatment and does not allow for regional or provincial comparisons; however, the Northwest Territories, Ontario, and Alberta elected to oversample with the aim of producing provincial estimates of child maltreatment.

TABLE 2-1 Child Welfare Service Area (CWSA) and Sample Size by Province and Territory, CIS-2003

Region	Child Population (0-15)*	Total Child Welfare Service Areas (CWSA)	Number of CIS CWSA	CWSA Child Population (0-15)	Annual CWSA Case Openings**	Case Openings Sampled for CIS
Atlantic Provinces	442,965	82	7	73,475	1,598	388
Quebec	1,381,525	18	8	728,260	12,182	3,393
Ontario	2,390,620	50	15	1,334,675	40,350	4,680
Prairie Provinces	1,136,450	85	12	541,427	19,577	2,441
British Columbia	760,045	76	4	104,443	3,534	980
Northern Territories	27,715	20	9	16,435	1,531	447
Aboriginal	***	69	8	***	1,476	267
Canada	6,139,320	400	63	2,798,715	78,772	12,329

* Source: Statistics Canada. Census of Canada, 2001: Age and Sex for Population, for Canada, Provinces, Territories, Census Divisions and Census Subdivisions, 2001 Census – 100% Data. Ottawa: Statistics Canada, October 22, 2002 (95F0300XCB01006). Census data quality can be found at <http://www.statcan.ca/english/census96/dqindex.html> and <http://www12.statcan.ca/english/census01/Products/Reference/dict/appendices/app002.pdf>.

** Some sites were given averages because of unavailable data. In the Atlantic provinces, two CWSAs were given provincial averages. In the Northern Territories one CWSA was given the northern average. One Aboriginal CWSA was given the national average.

*** Aboriginal child populations are included in the provincial and territorial child populations.

The primary sampling unit for the study was a study-defined child welfare service area (CWSA). CWSAs are distinct geographic areas served by one or several child welfare authorities. In Montreal, for example, two agencies serve the same metropolitan area on the basis of language, yet Montreal was counted as a single CWSA. CWSAs varied greatly in size. Some smaller rural CWSAs completed a few hundred investigations a year, while some large metropolitan agencies completed several thousand. The largest CWSA, Toronto, included 3 agencies (2 based on religion) with a total of 11 offices.

From a total of 400 CWSAs in Canada, 63 were selected: 55 for the core CIS sample excluding Quebec, and an additional 8 in Quebec (see Table 2-1 and Figure 2-2).³⁴ When 6 CWSAs declined to be involved because of their particular circumstances, 6 replacement CWSAs were randomly selected from the remainder. The CWSAs from the Nunavut and Yukon territories were sampled by convenience, selected on the basis of accessibility, expected case volume, and regional representation. The three largest metropolitan centres, Toronto, Montreal and Vancouver,³⁵

were sampled with certainty to ensure their inclusion in the study. Finally, in addition to Montreal, the seven other Quebec CWSAs were included on the basis of availability of data through the Plate-forme informationelle pour le bien-être de l'enfant (PIBE) research database.

The second sampling stage involved selecting cases opened³⁶ in each site over a three-month period. The procedures used to sample cases differed between the core CIS sample (all jurisdictions except Quebec) and the Quebec sample. In the core sample,

³⁴ A list of 331 provincial and territorial child welfare service areas (CWSAs) was drawn up on the basis of information received from each province and territory. A similar search developed a list of Aboriginal agencies providing child welfare services. A total of 69 fully mandated Aboriginal agencies were identified in 2003; 8 Aboriginal sites participated in the study.

³⁵ Because of high case volumes in one of Canada's largest child welfare agencies, workers participated in the CIS-2003 on a volunteer basis. Cases included in the study were selected randomly from their caseloads.

³⁶ In most sites all open cases were included; in very large agencies/sites (>1500 investigations annually) cases were randomly selected for inclusion in the study, or investigating workers participated for smaller periods of time. This was to ensure high participation rates.

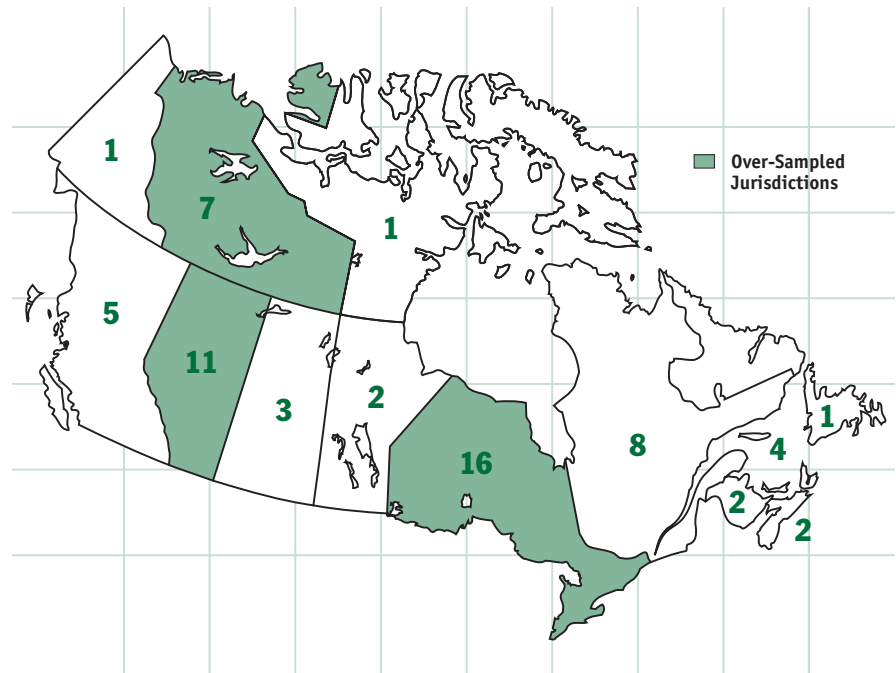
cases were selected by asking investigating workers to determine case eligibility using the Intake Face Sheet of the Maltreatment Assessment Form. In Quebec, cases were selected by applying study criteria to cases in the PIBE database.

In the core sample, cases opened between October 1, 2003 and December 31, 2003 in the study sites were selected for inclusion in the study (N=8,928).³⁷ Three months was considered the optimal period to ensure high participation rates and good compliance with study procedures. Consultation with service providers indicated that case activity from October to December is considered typical of the whole year. However, follow-up studies are needed to systematically explore the extent to which seasonal variation in the types of cases referred to child welfare services may affect estimates that are based on a three-month sampling period.³⁸

Quebec used two different data collection periods to create a three-month sample. Data were gathered from all cases opened between November 1 and December 15, 2003, and between January 15 and February 28, 2004 (N=6,508).

The third sampling stage involved selecting opened cases to identify those that met CIS-2003 definitions of investigated maltreatment (see Figure 2-1, Stage 3). Although investigating alleged maltreatment is the core mandate for most child welfare services, situations involving children at risk of maltreatment are also given service. These can include children

FIGURE 2-2 Canadian Incidence Study of Reported Child Abuse and Neglect: Number of CWSAs Selected by Province and Territory



with difficult behaviour problems, pregnant women seeking supportive counseling, or other service requests that do not involve a specific allegation of maltreatment. To maximize the uniformity in selecting cases, the Intake Face Sheet of the Maltreatment Assessment Form was completed on all opened cases in the core sample. Investigating workers then evaluated each case to determine whether maltreatment was alleged by the referral source or suspected at any point in the investigation process. Workers were asked to use the CIS-2003 definitions of maltreatment, which were generally more inclusive than definitions in many jurisdictions. For the purposes of this report these cases were further

screened to include only children aged 15 and under, to ensure that the same age cutoff was used in all jurisdictions.

In 80% of cases in the core sample (N=6,948) the selected cases involved specific concerns about suspected maltreatment involving children who were 15 or under; the remaining cases (N=1,980) involved situations with no allegations of maltreatment of children from birth to age 15, and were excluded from the core CIS-2003 sample.

In the Quebec sample, cases were excluded if they had been screened out after the initial phone interview (N=3,115), if they were being investigated only because of concerns about the child's behaviour (N=647), or if they involved children aged 16 or

³⁷ Five sites that were recruited later collected data from November 1, 2003 to January 31, 2004.

³⁸ Seasonal variations would not affect the overall estimates of the number of maltreatment investigations because such variants are adjusted for in the weighting, but they could affect the proportion of cases referred from some sources, such as schools.

over (N=108), yielding a sample of 2,638 child maltreatment investigations involving children from birth to age 15.

The final case selection stage involved identifying the specific children who had been investigated. In many jurisdictions, cases are classified into family units, while in others each investigated child is counted as a case. In jurisdictions using family-based case counts, children who had been investigated specifically because of alleged maltreatment were identified. A total of 11,562 child maltreatment investigations form the core sample for the CIS-2003, and an additional 2,638 investigations constitute the Quebec sample.

CASE SELECTION AND PROCESSING

Site Researchers were assigned to coordinate site training and case selection at each CIS-2003 agency/office (see Appendix A for a list of all CIS-2003 Site Researchers).³⁹ The case selection phase began with a training session, conducted by the Principal Investigator, Co-Investigator or Study Managers, to introduce participating child welfare workers to the CIS-2003 instruments and case selection procedures. After a review of the forms and procedures, trainees completed the Maltreatment Assessment Form for selected case vignettes (see Appendix F). The completed forms were then discussed and discrepancies in responses reviewed to ensure that items were being properly interpreted. Each worker was given a CIS Cycle II Guide Book, which included definitions for all the items and study procedures (see Appendix E).

It was recommended that workers complete the Maltreatment Assessment Form to coincide with the written assessments that they complete at the close of their investigations. The length of time between the receipt of the referral and the completion of the written assessment differs according to provincial, regional, and site practices. Given that some investigations can take many months, workers were asked to complete the Maltreatment Assessment Form at the same time that they wrote their first assessment report, regardless of whether the entire investigation was finished.

Site Researchers visited the CIS-2003 sites regularly to collect forms, respond to questions, and monitor study progress. In most instances five visits to each location were required. However, additional support was provided if needed by the workers at each site. Site Researchers collected the completed Maltreatment Assessment Forms during each site visit and reviewed them for completeness and consistency. Every effort was made to contact workers about incomplete information on key variables (e.g., child age or category of maltreatment) and inconsistencies. Site Researchers also ensured that the investigation was part of the sample. Identifying information (located on the bottom section of the Intake Face Sheet; see Appendix D) was stored on site, and only non-identifying information was sent to the central data verification locations.

DATA VERIFICATION AND DATA ENTRY

Maltreatment Assessment Forms were verified twice for completeness and consistency in responses: first on site by the Site Researchers, as described above, and then a second time at either the University of Toronto or University of Calgary. The consistency in completing forms was examined by comparing the selected maltreatment codes with the brief case narratives provided by the investigating workers.

Data from Maltreatment Assessment Forms sent to the Toronto CIS-2003 office were entered by scanner using TELEform Elite scanning software, V.8.1. Information on the Intake Face Sheet was entered manually using Microsoft Access 2000. The data were then combined into an SPSS Version 12.0 database. Inconsistent responses, missing responses, and miscodes were systematically identified. Duplicate cases were systematically identified and screened out at the child welfare site and removed.

Data entry error rates were examined by re-entering a random sample of forms. Five hundred Maltreatment Assessment Forms were re-scanned by TELEform, and 100 Face Sheets were re-entered manually to determine entry error. Error rates were 2% for TELEform entry and 2% for manual data entry. The TELEform error rate resulted from scanning errors in data fields that required written numbers rather than check boxes. Written fields in all forms were subsequently verified to correct for the scanning errors.

³⁹ Training was provided to six supervisors in the Northwest Territories who then trained workers in seven offices to complete the forms.

The Quebec data were gathered electronically from each site. A programmer at the Laval site cleaned the data to identify inconsistent responses, eliminate duplicates, map PIBE fields onto CIS-2003 fields, and select the cases that met the study criteria.

PARTICIPATION AND ITEM COMPLETION RATES

The case selection form was kept as short and simple as possible to minimize the response burden and to ensure a high completion rate. Item completion rates were over 99% on all items.⁴⁰

The participation rate was estimated by comparing actual cases opened during the case selection period (October 1 to December 31, 2003) with the number of cases for which Maltreatment Assessment Forms were completed.⁴¹ Unfortunately, at some sites the differences in tracking cases made it impossible to arrive at a count of case openings from October to December 2003 that corresponded to the cases tracked by the CIS-2003. The overall participation rate was 93% at sites where a participation rate could be estimated, ranging from a low of 62% to a high of 100%. Participation rates below 95% were discussed with the CIS-2003 liaisons for each agency to examine the possibility of skewed sampling. In all cases low participation was attributed to external events (e.g., staff holidays, staff turnover), and no evidence of systematic bias was found.

WEIGHTING

The data collected for the CIS-2003 were weighted to derive national annual incidence estimates. Two sets of weights were applied. First, results were annualized to estimate the annual volume of cases investigated by each study site. The annualization weights were derived by dividing the total number of cases opened by each site in 2003 by the number of cases sampled for the CIS-2003. For example, if 225 cases were sampled over 3 months in a site that opened 1,000 cases over the year, a weight of 4.44 (1,000/225) would be applied to all cases in the site. The average annualization weight is 4.32,⁴² reflecting that cases were collected over 3 months out of 12. While this annualization method provides an accurate estimate of overall volume, it cannot account for qualitative differences in the types of cases referred at different times of the year (see Chapter 1).

To account for the non-proportional sampling design, regional weights were applied to reflect the relative sizes of the selected sites. Each study site was assigned a weight reflecting the child population of the site as a proportion of the entire child population of the stratum or region. For instance, if a site with a child population of 25,000 were randomly sampled to represent a region, province or territory with a child population of 500,000, a regionalization weight of 20 (500,000/25,000) would be applied to cases sampled from that site. Regionalization and

annualization weights were combined so that each case was multiplied first by an annualization weight and then by a regionalization weight.

National incidence estimates were calculated by dividing the weighted estimates by the child population (aged under 1 year to 15 years). The child population figures for CIS-2003 sites are based on 2001 Census data. In most cases, this involved aggregating Census subdivisions only, although a few cases required splitting census subdivisions by aggregating enumeration areas.⁴³ Alberta was the only exception to this process; for Alberta, CWSAs were entered into a Government Information Services (GIS) file that produced a custom file for the child populations per CWSA.

DUPLICATION

The CIS-2003 estimates were reported on the basis of the number of child maltreatment investigations conducted during 2003, rather than the number of investigated children. Some investigations involved children who had been previously investigated in the same year. Although each investigation represented a new incident of maltreatment, confusion can arise if these investigations are assumed to represent an unduplicated count of children. The CIS-2003 estimates cannot be considered unduplicated because the annualization weights are based on duplicated service statistics provided by the study sites.

⁴⁰ The high item completion rate can be attributed to the cooperation and support of the workers, the design of the case selection instrument and the verification procedures. In designing the form, questions were logically and efficiently ordered. The use of check boxes minimized completion time. An “unknown” category was included for many questions to help distinguish between missed responses and unknown responses.

⁴¹ Participation rate is the proportion of cases open between October 1 and December 31, 2003, for which the Maltreatment Assessment Form was completed.

⁴² This average excludes eight larger sites where site sampling was employed. Average annualization weights for these sites was 7.45.

⁴³ Census subdivisions are the equivalent of municipalities (e.g., cities, towns, townships, villages).

The CIS-2003 had no precise method for identifying cases where children were investigated more than once during 2003, unless they were investigated more than once during the October to December study period. An outside estimate of the number of these cases can be derived by examining instances in which children had been previously investigated; 37% of maltreatment investigations involved cases that had been previously closed less than 12 months before the current investigation. Because the CIS-2003 did not document when re-opened cases had been previously opened, it was not possible to determine how many of these cases had been opened for an investigation twice within the same calendar year. The 37% re-opening rate should therefore be treated as an outside estimate, and the true rate would be lower than that.

SAMPLING ERROR ESTIMATION

Although the core CIS-2003 estimates are based on a relatively large sample of 11,562 child maltreatment investigations, sampling error is primarily driven by variability between the 55 sites outside Quebec. Sampling error estimates were calculated to reflect that the survey population had been stratified and that primary sampling units (or sites) had been selected randomly from each stratum. To calculate the variance, the stratified design allowed the research team to assume that the variability between strata was zero and that the total variance at the national level was the sum of the variance for

each stratum. In most instances, two CWSAs, the primary sampling units, were chosen from each stratum. Variance estimates were calculated using WesVar 4.2, which computes estimates and their variance estimates from survey data using replication methods. Standard error estimates were calculated at the $p < 0.05$ level.⁴⁴ For most estimates standard errors were within an acceptable range, with coefficients of variation (CVs) ranging between 8% and 16%.⁴⁵ CVs were above 16% in instances involving low-frequency events (e.g., fewer than 100 sampled cases) or in instances involving variables with unusually large variability. Estimates based on events that occurred in fewer than 5 cases are not included in this report and are recorded as a dash in the accompanying tables.

Despite the larger sample size of the CIS-2003 (the CIS-1998 reported on only 7,672 child maltreatment investigations), CVs are generally higher, indicating a higher degree of variation in child welfare practice across Canada. For example, both the maltreatment typologies of primary substantiated sexual abuse and emotional maltreatment have CVs that indicate the estimates for these variables must be interpreted with caution (see Table 2-2). Similarly, placement in foster care for substantiated maltreatment also yielded an estimate that must be interpreted with caution. There is less variability for males 0–15 years of age in substantiated maltreatment and referrals from police in substantiated maltreatment.

The error estimates do not account for any errors in determining the annual

and regional weights, nor do they account for any other non-sampling errors that may occur, such as inconsistency or inadequacies in administrative procedures from site to site. The error estimates also cannot account for any variations due to seasonal effects. The accuracy of these annual estimates depends on the extent to which the sampling period is representative of the whole year.

LIMITATIONS OF THE CIS-2003

Every effort has been made to make the CIS-2003 a robust and reliable study of reported child maltreatment in Canada. Several challenges that the research team faced have resulted in limitations to the study. These limitations, outlined in the preceding two chapters, are summarized below:

- the CIS-2003 is limited to reports investigated by child welfare services and does not include reports that were screened out, cases that were investigated only by the police, or cases that were never reported;
- most of the tables in this report do not include Quebec;
- as the study is not designed to make regional comparisons, variations in rates of investigated maltreatment across Canada could not be examined; and
- the study is based on assessments provided by the investigating child welfare workers, which could not be independently verified.

⁴⁴ This means that 95% of random samples will yield estimates that will lie within one standard error above or below the estimate. In other words, if the study were repeated 100 times, in 95 times the estimates would fall within one standard error of the estimate. For example, 95 out of 100 times the estimate for the number of children admitted to care would be between 3,114 and 6,838 (see Table 2-2).

⁴⁵ The coefficient of variation (CV) is the ratio of the standard error to its estimate. Statistics Canada considers CVs under 16 to be reliable, warns that CVs between 16 and 33.3 should be treated with caution, and recommends that CVs above 33.3 not be used.

TABLE 2-2 Standard Errors and Coefficients of Variation for Selected Variables (p < 0.05) in CIS-2003

Variable	Sample Size	Estimated Count or Incidence Rate	Standard Error	Coefficient of Variation
Primary Substantiated Sexual Abuse (Table 3-3)	153	2,935	784	26.70
Incidence of Primary Substantiated Emotional Maltreatment (Table 3-3)	850	3.23 per 1,000 children	0.57	17.55
Physical Harm in Substantiated Child Maltreatment Investigations (Table 4-1(a))	547	10,222	1,589	15.54
Placement in Other Foster Care in Substantiated Child Maltreatment Investigations (Table 5-4)	333	4,976	950	19.09
Males Birth-15 Years of Age in Substantiated Child Maltreatment Investigations (Table 6-3)	2,904	52,765	6,953	13.18
Positive Toxicology at Birth in Substantiated Child Maltreatment Investigations (Table 6-4(a))	98	1,123	327	29.14
Unsafe Housing Conditions in Substantiated Child Maltreatment Investigations (Table 7-7)	515	9,499	1,902	20.02
Referrals from Police in Substantiated Child Maltreatment Investigations (Table 8-1)	1,732	32,079	4,315	13.45

DATA PRESENTATION FORMAT

Definitions of the **study variables** are described in the corresponding chapters. For forms of maltreatment and substantiation rates, please read the introduction to Chapter 3. In reading the data tables in chapters 3 to 8, the following points should be noted:

- Data tables in Chapter 3 present estimate counts and incidence rates by level of substantiation for **all forms** of investigated maltreatment.
- Tables in Chapters 4 through 8 primarily present estimate counts for the five **primary categories of substantiated maltreatment**.
- Estimates are not presented when insufficient cases were sampled to provide a reliable estimate. In such instances one dash (–) appears in the cell.
- Because of the limited amount of information available from the Quebec sample, most tables present estimates for **Canada excluding Quebec**. Where possible, additional tables also present weighted estimates for all of Canada including Quebec.
- All estimates are **weighted annual estimates for 2003** presented either as a **count** of child maltreatment investigations (e.g., 12,300 child maltreatment investigations) or as the annual **incidence rate** (e.g., 3.1 per 1,000 children).
- The overall sample used to derive data for each table is noted at the bottom of the table. Because of **missing cases** the case count totals will vary from one table to the next. Chapter 3 tables provide the full count of estimated child maltreatment investigations.
- Estimates for total child investigations (for substantiated investigations) vary when the full sample is not used (i.e., when there are missing data).
- Column percentages total 100% for all tables, except when multiple responses were possible (e.g., referral source, child functioning).

Chapter 3

INCIDENCE OF REPORTED ABUSE AND NEGLECT

This chapter presents estimates of the number of child maltreatment investigations conducted in 2003. Most tables present estimates for Canada excluding Quebec. Supplementary tables including Quebec are provided where comparable data from Quebec were available. (Please see Chapter 2 for a discussion of data from Quebec.) Selected comparisons with the findings from the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998) (excluding Quebec) are presented in Chapter 9.

All data are presented in terms of the total number of estimated child maltreatment investigations, as well as the annual incidence rate of estimated investigations per 1,000 children aged under 1 year to 15 years.⁴⁶ These figures refer to child investigations and not to the number of investigated families. Thus, if each of several children in a family were reported as abused or neglected, each investigated child counted as a separate child investigation. For children investigated more than once in a year, each investigation is included in the estimates (see Chapter 1, Definitional Framework).⁴⁷

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 in a sample of Canadian child welfare services. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates **do not include:**

- (1) incidents that were not reported to child welfare services;
- (2) reported cases that were screened out by child welfare services before being fully investigated;
- (3) new reports on cases already open by child welfare services; or
- (4) cases that were investigated only by the police.

DEFINITION OF CLASSIFICATIONS OF MALTREATMENT

The 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003) definition of child maltreatment includes 25 forms of maltreatment

subsumed under five categories: physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence (see Appendix E). The 25 forms of maltreatment tracked by the CIS are defined in the detailed sections on the five categories of maltreatment in this chapter.

Each investigation involved a minimum of one and a maximum of three identified forms of maltreatment. In cases involving more than three forms of maltreatment, investigating workers were asked to select the three forms that best described the reason for investigation. More than one form of maltreatment was identified for 19% of investigations in which child maltreatment was substantiated (see Table 3-4). The **primary form** of maltreatment was the form that best characterized the investigated maltreatment. In cases where one form of maltreatment was substantiated and one was not, the substantiated form was automatically selected as the primary form.⁴⁸

For the purpose of this report, most tables will present only the **primary form of substantiated maltreatment**

⁴⁶ The cut-off age of 15 (children under the age of 16) was selected because the mandate to investigate varies among provinces and territories in Canada. All calculations were based on the child population estimates from 2001.

⁴⁷ Children investigated more than once during the case selection period (October to December 2003) were counted only as one investigation; however, children investigated more than once over the whole year (2003) were counted as separate cases because the child welfare service statistics used to annualize the CIS estimates did not remove duplicates (see Chapter 1, Definitional Framework).

⁴⁸ The CIS classification protocol was modified for the 2003 study to avoid confusion in cases where one form of maltreatment was substantiated and one was not. If the primary investigated form was not substantiated but a secondary form was, the substantiated form was recoded as the primary overall form (this involved 515 cases or 4% of the sample). For example, if physical abuse was unsubstantiated in a case initially classified primarily as physical abuse, but neglect was substantiated, the substantiated neglect was recoded as the primary form of maltreatment.

to allow summary comparisons of the five categories of maltreatment tracked by the CIS-2003 (physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence). In this chapter, however, Tables 3-5, 3-6, 3-7, 3-8, and 3-9 present the **primary and secondary forms** of investigated maltreatment to provide an exact estimate of the occurrence of the five categories and the 25 individual forms of maltreatment.

DEFINITION OF LEVELS OF SUBSTANTIATION

The data in this chapter are all presented by the three levels of substantiation specified by workers: substantiated, suspected, and unsubstantiated. The following definitions of substantiation were used:

- A case is considered **substantiated** if the balance of evidence indicates that abuse or neglect has occurred.
- A case is **suspected** if you do not have enough evidence to substantiate maltreatment, but you also are not sure that maltreatment can be ruled out.
- A case is **unsubstantiated** if the balance of evidence indicates that abuse or neglect has not occurred.

Unsubstantiated does not mean that a referral was inappropriate or malicious; it simply indicates that the investigating worker determined that the child had not been maltreated (see Chapter 8, Unsubstantiated and Malicious Reports).

Some jurisdictions make a distinction only between maltreatment that was

substantiated and maltreatment that was unsubstantiated, or between verified and not verified maltreatment.⁴⁹ The addition of a “suspected” level provides an important clinical distinction between cases in which there is enough conclusive evidence that maltreatment can be deemed either substantiated or unsubstantiated, and cases in which maltreatment remains suspected at the conclusion of the investigation. It should be noted, however, that the use of the suspected category leads to maltreatment being classified as substantiated or unsubstantiated in fewer cases. Comparisons with other statistics that use only two levels of substantiation should therefore be made with caution (see Chapter 1).

Family-Level Substantiation: In Table 3-2, which presents family-level data, the substantiation level is determined by the highest level of substantiation among all investigated children within a family. For example, if an allegation of maltreatment was unsubstantiated for the first child but substantiated for the second child, then maltreatment in the family was deemed substantiated (a minimum of one substantiated form of maltreatment for all children investigated).

TOTAL CHILD INVESTIGATIONS AND OVERALL RATES OF SUBSTANTIATION

Table 3-1 presents the estimated number of child investigations of reported maltreatment in all of Canada. An

estimated 235,315 child maltreatment investigations (38.33 investigations per 1,000 children) were conducted in Canada in 2003. For nearly half the investigations (49%, or an estimated 114,607 child investigations) reports of maltreatment were substantiated by the investigating worker (18.67 investigations per 1,000 children).⁵⁰

An estimated 217,319 child maltreatment investigations were conducted in Canada outside Quebec in 2003, a rate of 45.68 investigations per 1,000 children.⁵¹ In nearly half of these investigations (47% or an estimated 103,297 child investigations) maltreatment was substantiated. In an additional 13% of investigations (an estimated 28,053 child investigations, or 5.90 investigations per 1,000 children) there was insufficient evidence to substantiate maltreatment; however, maltreatment remained suspected by the investigating worker. In another 40% of investigations (an estimated 85,969 child investigations; 18.07 investigations per 1,000 children) maltreatment was unsubstantiated.

TOTAL FAMILY INVESTIGATIONS AND OVERALL RATES OF SUBSTANTIATION

Table 3-2 presents the estimated number of family investigations in Canada outside Quebec. Although the estimates presented in this report are child-based, the family-based data presented in this table provide a basis for comparing CIS-2003 data with the family-based

⁴⁹ For the purpose of CIS-2003, child welfare workers were asked to use three levels of substantiation regardless of their provincial/territorial practices. Information in Table 3-1 specific to Quebec is detailed using the two levels of substantiation that the provincial database maintains.

⁵⁰ At least one form of maltreatment was substantiated.

⁵¹ Rates of investigated maltreatment are lower when Quebec is included, in part because Quebec uses a telephone screening program that screens out approximately half of all calls before an investigation is initiated (see third sampling stage of Figure 2-1).

TABLE 3-1 Child Maltreatment Investigations, by Level of Substantiation, in Canada in 2003

	Level of Substantiation			Missing Substantiation Information	Total
	Substantiated	Suspected	Unsubstantiated		
Maltreatment Investigations in Canada, Excluding Quebec					
Child Investigations*	103,297	28,053	85,969		217,319
Incidence per 1,000 Children	21.71	5.90	18.07		45.68
Row Percentage	47%	13%	40%		100%
Total Maltreatment Investigations in Canada					
Child Investigations**	114,607	28,053	90,869	1,786	235,315
Incidence per 1,000 Children	18.67	4.57	14.80	0.29	38.33
Row Percentage	49%	12%	38%	1.0%	100%

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 11,562 child maltreatment investigations.

** Based on a sample of 14,200 child maltreatment investigations.

TABLE 3-2 Families Involved in Child Maltreatment Investigations, by Level of Substantiation, in Canada, Excluding Quebec, in 2003

Maltreatment Investigations	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Family Investigations*	63,827	17,060	49,707	130,594
Row Percentage	49%	13%	38%	100%

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 6,948 family maltreatment investigations.

child maltreatment statistics gathered in many jurisdictions. In Canada, outside Quebec, an estimated 130,594 families were investigated because of alleged maltreatment. Maltreatment was substantiated for 49% of these families, suspected for 13%, and unsubstantiated for 38%.

Not all children living in an investigated family were suspected victims of maltreatment, only those suspected to be victims before the investigation or in the course of the investigation.⁵² Investigated families had an average of 2.4 children under the age of 19; and an average of 1.7 children who were investigated in each family.

CATEGORIES OF MALTREATMENT

Table 3-3 presents the primary categories of substantiated maltreatment in Canada in 2003. Neglect was the most common form of substantiated maltreatment. Over a third (34%) of all investigations in which maltreatment was substantiated involved neglect as the primary category of maltreatment (an estimated 38,789 investigations or 6.32 investigations per 1,000 children). Exposure to domestic violence was the second most frequently substantiated category of maltreatment (29,370; 4.78 per 1,000), followed closely by physical abuse (26,692; 4.35 per 1,000). Emotional maltreatment was the primary category of substantiated maltreatment in 14% of cases (16,020; 2.61 per 1,000) while sexual abuse cases represented 3% of all substantiated maltreatment (3,736; 0.61 per 1,000).

⁵² Although some jurisdictions require all children in a family to be interviewed as part of a maltreatment investigation, workers were asked to distinguish between children who were interviewed as part of an investigation protocol and children suspected of being maltreated.

TABLE 3-3 Primary Categories of Substantiated Child Maltreatment in Canada in 2003

	Primary Category of Substantiated Maltreatment					Total
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence	
Substantiated Maltreatment in Canada, Excluding Quebec						
Substantiated Child Investigations*	25,257	2,935	30,366	15,369	29,370	103,297
Incidence per 1,000 Children	5.31	0.62	6.38	3.23	6.17	21.71
Row Percentage	24%	3%	30%	15%	28%	100%
Total Substantiated Maltreatment in Canada						
Substantiated Child Investigations**	26,692	3,736	38,789	16,020	29,370	114,607
Incidence per 1,000 Children	4.35	0.61	6.32	2.61	4.78	18.67
Row Percentage	23%	3%	34%	14%	26%	100%

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations.

** Based on a sample of 7,328 substantiated child maltreatment investigations.

The distribution of cases by primary category of maltreatment in Canada, excluding Quebec, is presented in the first set of rows of Table 3-3. Most tables in subsequent chapters of this report are presented by these five primary categories of substantiated maltreatment. There were nearly as many cases of exposure to domestic violence (29,370; 6.17 per 1,000) as cases of neglect (30,366; 6.38 per 1,000). Physical abuse was the primary substantiated maltreatment in an estimated 25,257 investigations (5.31 per 1,000), while emotional maltreatment was the primary substantiated maltreatment in 15,369 cases (3.23 per 1,000). Sexual abuse was the primary maltreatment in 2,935 cases (0.62 per 1,000). The differences in incidence estimates between all of Canada and Canada excluding Quebec reflect differences in the way reports are investigated in Quebec.

SINGLE AND MULTIPLE CATEGORIES OF MALTREATMENT

Table 3-4 presents cases of substantiated maltreatment involving multiple categories of maltreatment in Canada, excluding Quebec. Because most provincial and territorial case classification systems currently track only single forms of maltreatment, the investigating workers who completed CIS-2003 forms were likely unaccustomed to classifying cases under more than one form. The CIS-2003 may, therefore, underestimate the actual incidence of multiple maltreatment.

Single Categories of Maltreatment:

In 81% of cases of substantiated maltreatment (an estimated 83,436 child investigations) only one category of maltreatment was identified. In 18%

of investigations physical abuse was identified as the only category of maltreatment, 2% involved only sexual abuse, 25% involved only neglect, 11% involved only emotional maltreatment, and 25% involved only allegations of exposure to domestic violence.

Multiple Categories of Maltreatment:

A total of 19% of investigations (an estimated 19,787 child investigations) involved more than one category of substantiated maltreatment. The most frequently identified combinations were neglect and emotional maltreatment (3,942 investigations); physical abuse and emotional maltreatment (3,278 investigations); emotional maltreatment and exposure to domestic violence (2,979); neglect and exposure to domestic violence (2,484); and physical abuse either with exposure to domestic violence (2,274) or with

TABLE 3-4 Single and Multiple Categories of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003

	Substantiated Maltreatment		
	Count	Incidence per 1,000 Children	% of Substantiated Maltreatment
Single Form of Substantiated Maltreatment			
Physical Abuse Only	18,218	3.83	18%
Sexual Abuse Only	2,517	0.53	2%
Neglect Only	25,553	5.37	25%
Emotional Maltreatment Only	11,495	2.42	11%
Exposure to Domestic Violence Only	25,653	5.39	25%
Subtotal: Only One Form of Substantiated Maltreatment	83,436	17.54	81%
Multiple Categories of Substantiated Maltreatment			
Physical Abuse and Sexual Abuse	122	0.03	0%
Physical Abuse and Neglect	1,828	0.38	2%
Physical Abuse and Emotional Maltreatment	3,278	0.69	3%
Physical Abuse and Exposure to Domestic Violence	2,274	0.48	2%
Sexual Abuse and Neglect	350	0.07	0%
Sexual Abuse and Emotional Maltreatment	111	0.02	0%
Sexual Abuse and Exposure to Domestic Violence	–	–	0%
Neglect and Emotional Maltreatment	3,942	0.83	4%
Neglect and Exposure to Domestic Violence	2,484	0.52	2%
Emotional Maltreatment and Exposure to Domestic Violence	2,979	0.63	3%
Physical Abuse, Sexual Abuse and Neglect	–	–	0%
Physical Abuse, Sexual Abuse and Emotional Maltreatment	–	–	0%
Physical Abuse, Sexual Abuse and Exposure to Domestic Violence	–	–	0%
Physical Abuse, Neglect and Emotional Maltreatment	700	0.15	1%
Physical Abuse, Neglect and Exposure to Domestic Violence	224	0.05	0%
Physical Abuse, Emotional Maltreatment and Exposure to Domestic Violence	749	0.16	1%
Sexual Abuse, Neglect and Emotional Maltreatment	–	–	0%
Sexual Abuse, Neglect and Exposure to Domestic Violence	–	–	0%
Sexual Abuse, Emotional Maltreatment and Exposure to Domestic Violence	–	–	0%
Neglect, Emotional Maltreatment and Exposure to Domestic Violence	717	0.15	1%
Subtotal: Multiple Categories	19,787	4.16	19%
Total Substantiated Maltreatment*	103,298	21.71	100%

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child investigations. Columns may not add up to total because low frequency estimates are not reported but are included in total. Percentages may add up to 99% or 101% because of rounding.

neglect (1,828). It was relatively rare to find sexual abuse in combination with other forms of maltreatment.

PHYSICAL ABUSE

For the purposes of the CIS-2003, maltreatment was classified as physical abuse if the investigated child was suspected to have suffered, or to be at substantial risk of suffering physical harm at the hands of his or her caregiver. The physical abuse category includes five forms of abuse:

- **Shake, Push, Grab or Throw:** Includes pulling or dragging a child as well as shaking an infant.
- **Hit with Hand:** Includes slapping and spanking but not punching.
- **Punch, Kick or Bite:** Also includes hitting with other parts of the body (e.g., elbow or head).
- **Hit with Object:** Includes hitting with a stick, a belt or other object, throwing an object at a child, but does not include stabbing with a knife.
- **Other Physical Abuse:** Any other form of physical abuse including choking, strangling, stabbing, burning, shooting, poisoning, and the abusive use of restraints.

The incidence of reported physical abuse is presented in Table 3-5. An estimated 72,238 child investigations (15.18 investigations per 1,000 children) involved physical abuse as the primary, secondary, or tertiary reason for investigation, and an estimated 61,556 child investigations involved physical abuse as the primary reason for investigation (12.94 investigations per 1,000 children). Physical abuse

was substantiated as the primary, secondary or tertiary form of maltreatment in 27,436 cases (38% of physical abuse investigations).

An estimated 32,446 child investigations (6.82 investigations per 1,000 children) involved concerns about a child hit with a hand; 39% of these were substantiated (2.69 investigations per 1,000 children). An estimated 18,531 child investigations (3.89 investigations per 1,000 children) involved concerns about shaking, pushing, grabbing or throwing; 36% of these were substantiated (6,733 investigations, a rate of 1.42 per 1,000 children). Allegations of punching, kicking or biting a child were investigated in 6,153 cases; 39% of these allegations were substantiated. Another 13,052 investigations involved allegations of hitting with an object, 45% of which were substantiated. In an estimated 11,883 cases the allegation was classified as other physical abuse, with 31% of these allegations being substantiated.

SEXUAL ABUSE

The CIS-2003 tracked eight forms of sexual abuse, ranging from penetration to sexual exploitation. If several forms of sexual activity were involved, investigating workers were instructed to identify the most intrusive form.⁵³ It should be noted that the CIS-2003 identified only cases reported to child welfare services. Many cases of child sexual abuse that do not involve parents or relatives in the home are investigated only by the police; child welfare services usually become

For the purposes of the CIS-2003, maltreatment was classified as physical abuse if the investigated child was suspected to have suffered, or to be at substantial risk of suffering physical harm at the hands of his or her caregiver.

involved in extra-familial sexual abuse cases only if there are concerns about the parents' ability to protect the child.

The CIS-2003 included eight forms of sexual abuse:

- **Penetration:** penile, digital or object penetration of vagina or anus.
- **Attempted Penetration:** attempted penile, digital or object penetration of vagina or anus.
- **Oral Sex:** oral contact with genitals by either perpetrator or by the child.
- **Fondling:** touching or fondling of genitals for sexual purpose.
- **Sex Talk:** verbal or written proposition, encouragement, or suggestion of a sexual nature (included face to face, phone, written and internet contact, as well as exposing the child to pornographic material).

⁵³ Workers were asked to identify the most severe form of sexual abuse for the investigation rather than reporting multiple forms for the same incident. For instance, if a child had been a victim of fondling and attempted penetrations by the same perpetrator, this was counted as a single case of attempted penetration. When multiple forms were identified, CIS-2003 Site Researchers consulted with workers and recorded when appropriate. If this consultation was not possible, the original response was maintained.

TABLE 3-5 Primary or Secondary Forms of Physical Abuse, by Level of Substantiation, in Canada, Excluding Quebec, in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Primary or Secondary Forms of Physical Abuse				
Shake, Push, Grab or Throw				
Number of Child Investigations	6,733	3,544	8,254	18,531
Row Percentage	36%	19%	45%	100%
Incidence per 1,000 Children	1.42	0.74	1.73	3.89
Hit with Hand				
Number of Child Investigations	12,775	4,116	15,555	32,446
Row Percentage	39%	13%	48%	100%
Incidence per 1,000 Children	2.69	0.87	3.27	6.82
Punch, Kick or Bite				
Number of Child Investigations	2,419	724	3,010	6,153
Row Percentage	39%	12%	49%	100%
Incidence per 1,000 Children	0.51	0.15	0.63	1.29
Hit with Object				
Number of Child Investigations	5,930	1,798	5,324	13,052
Row Percentage	45%	14%	41%	100%
Incidence per 1,000 Children	1.25	0.38	1.12	2.74
Other Physical Abuse				
Number of Child Investigations	3,631	1,621	6,631	11,883
Row Percentage	31%	14%	56%	100%
Incidence per 1,000 Children	0.76	0.34	1.39	2.50
Total Investigations Involving Physical Abuse as Primary or Secondary Reason for Investigation*				
Number of Child Investigations**	27,436	9,871	34,932	72,238
Row Percentage	38%	14%	48%	100%
Incidence per 1,000 Children	5.77	2.07	7.34	15.18
Total Investigations Involving Physical Abuse as Primary Reason for Investigation				
Number of Child Investigations**	25,257	7,218	29,081	61,556
Row Percentage	41%	12%	47%	100%
Incidence per 1,000 Children	5.31	1.52	6.11	12.94

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* The total number of investigations involving primary or secondary or tertiary physical abuse is not equal to the sum of the specific forms of physical abuse because some cases involve multiple forms of physical abuse (see Table 3-4).

** Based on a sample of 4,090 child maltreatment investigations with information about physical abuse. Rows may add up to 99% or 101% because of rounding.

- **Voyeurism:** included activities where the alleged perpetrator observes the child for the perpetrator’s sexual gratification.
- **Exhibitionism:** included activities where the perpetrator is alleged to have exhibited himself/herself for his/her own sexual gratification.
- **Exploitation:** included situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.

As shown in Table 3-6, an estimated 15,227 child maltreatment investigations (3.20 investigations per 1,000 children) involved allegations of sexual abuse as either the primary or secondary category of maltreatment. Of this number, sexual abuse was substantiated in 21% of investigations (3,203 investigations), 15% remained suspected, and 64% were unsubstantiated. An estimated 12,682

child investigations (2.67 investigations per 1,000 children) involved sexual abuse as the primary reason for investigation.

An estimated 1,570 child investigations (0.33 investigations per 1,000 children) involved allegations of penetration; 23% of these investigations (355 investigations) were substantiated, 17% suspected, and 60% were unsubstantiated. An estimated 394 child investigations (0.08 investigations per 1,000 children) were for attempted penetration; maltreatment was substantiated in 37% of these cases. An estimated 1,655 child investigations involved allegations of oral sex; 26% of which were substantiated. An estimated 9,731 child investigations (2.05 investigations per 1,000 children) of touching or fondling of genitals, were investigated, 22% of which were substantiated. Sexual talk was investigated in 1,119 cases, 25% of which were substantiated. Voyeurism was investigated in 413 cases

and substantiated in 6% of these cases; exhibitionism was investigated in another 931 cases and substantiated in 27%. Sexual exploitation was investigated in 1,508 cases and substantiated in 19% of these cases.

NEGLECT

Child neglect includes situations in which children have suffered harm, or their safety or development has been endangered as a result of the caregiver’s failure to provide for or protect them. All provincial and territorial statutes include neglect or some reference to acts of omission, such as failure to supervise or protect, as grounds for investigating maltreatment. The CIS-2003 examined eight forms of neglect:

- **Failure to Supervise – Physical Harm:** The child suffered or was at substantial risk of suffering physical harm because of the caregiver’s

TABLE 3-6 Primary or Secondary Forms of Sexual Abuse, by Level of Substantiation, in Canada, Excluding Quebec, in 2003

Primary or Secondary Forms of Sexual Abuse	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Penetration				
Number of Child Investigations	355	269	946	1,570
Row Percentage	23%	17%	60%	100%
Incidence per 1,000 Children	0.07	0.06	0.20	0.33
Attempted Penetration				
Number of Child Investigations	144	–	170	394
Row Percentage	37%	20%	43%	100%
Incidence per 1,000 Children	0.03	0.02	0.04	0.08
Oral Sex				
Number of Child Investigations	436	457	762	1,655
Row Percentage	26%	28%	46%	100%
Incidence per 1,000 Children	0.09	0.10	0.16	0.35

(cont’d...)

TABLE 3-6 Primary or Secondary Forms of Sexual Abuse, by Level of Substantiation, in Canada, Excluding Quebec, in 2003 (cont'd)

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Fondling				
Number of Child Investigations	2,177	1,237	6,317	9,731
Row Percentage	22%	13%	65%	100%
Incidence per 1,000 Children	0.46	0.26	1.33	2.05
Sexual Talk				
Number of Child Investigations	281	223	615	1,119
Row Percentage	25%	20%	55%	100%
Incidence per 1,000 Children	0.06	0.05	0.13	0.24
Voyeurism				
Number of Child Investigations	–	140	249	413
Row Percentage	6%	34%	60%	100%
Incidence per 1,000 Children	0.01	0.03	0.05	0.09
Exhibitionism				
Number of Child Investigations	251	110	570	931
Row Percentage	27%	12%	61%	100%
Incidence per 1,000 Children	0.05	0.02	0.12	0.20
Exploitation				
Number of Child Investigations	290	330	888	1,508
Row Percentage	19%	22%	59%	100%
Incidence per 1,000 Children	0.06	0.07	0.19	0.32
Total Investigations Involving Sexual Abuse as Primary or Secondary Reason for Investigation*				
Number of Child Investigations**	3,203	2,288	9,736	15,227
Row Percentage	21%	15%	64%	100%
Incidence per 1,000 Children	0.67	0.48	2.05	3.20
Total Investigations Involving Sexual Abuse as Primary Reason for Investigation				
Number of Child Investigations**	2,935	1,702	8,045	12,682
Row Percentage	23%	13%	63%	100%
Incidence per 1,000 Children	0.62	0.36	1.69	2.67

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* The total number of investigations involving primary or secondary sexual abuse is not equal to the sum of the specific forms of sexual abuse because some cases involve multiple forms of sexual abuse (see Table 3-4).

** Based on a sample of 932 child maltreatment investigations with information about sexual abuse. Columns and rows may not add up to total because low frequency estimates are not reported but are included in total. Rows may add up to 99% or 101% because of rounding.

failure to supervise and protect the child adequately. Failure to supervise included situations in which a child was harmed or endangered as a result of a caregiver's actions (e.g., drunk driving with a child, or engaging in dangerous criminal activities with a child).

- **Failure to Supervise – Sexual**

Abuse: The child has been or was at substantial risk of being sexually molested or sexually exploited, and the caregiver knew or should have known of the possibility of sexual molestation and failed to protect the child adequately.

- **Physical Neglect:** The child has suffered or was at substantial risk of suffering physical harm caused by the caregiver(s)' failure to care and provide for the child adequately. This includes inadequate nutrition/clothing, and unhygienic or dangerous living conditions. There must be evidence or suspicion that the caregiver is at least partially responsible for the situation.

- **Medical Neglect:** The child required medical treatment to cure, prevent, or alleviate physical harm or suffering, and the child's caregiver did not provide, refused, or was unavailable or unable to consent to the treatment. This included dental services where funding was available.

- **Failure to Provide Psychological/Psychiatric Treatment:** The child was at substantial risk of suffering from emotional harm, as demonstrated by severe anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or a mental, emotional, or developmental condition that could seriously impair the child's development. The child's caregiver did not provide, or refused, or was unavailable or unable to consent to treatment to remedy or

alleviate the harm. This category includes failing to provide treatment for school-related problems such as learning and behaviour problems, as well as treatment for infant development problems such as non-organic failure to thrive. Parents awaiting service were not included in this category.

- **Permitting Criminal Behaviour:** A child has committed a criminal offence (e.g., theft, vandalism or assault) with the encouragement of the child's caregiver, or because of the caregiver's failure or inability to supervise the child adequately.
- **Abandonment:** The child's parent died or was unable to exercise custodial rights and did not make adequate provisions for care and custody, or the child was in a placement and the caregiver refused or was unable to take custody.
- **Educational Neglect:** Caregivers knowingly allowed chronic truancy (five or more days a month), or failed to enroll the child, or repeatedly kept the child at home. If the child had been experiencing mental, emotional, or developmental problems associated with school, and treatment had been offered but caregivers did not cooperate with treatment, the case was classified under failure to provide treatment as well.

Table 3-7 indicates that child neglect was the most frequently investigated category of maltreatment. An estimated 90,141 child maltreatment investigations (18.95 investigations per 1,000 children) involved neglect as either the primary or secondary reason for investigation. Neglect was substantiated in 40% of these investigations, suspected in 13%, and unsubstantiated in 48%. Neglect was the primary category of investigation in an estimated 73,210

child maltreatment cases (15.39 investigations per 1,000 children).

Table 3-7 shows that the most common form of investigated neglect was failure to supervise leading to physical harm. An estimated 39,639 child investigations (8.33 investigations per 1,000 children) involved failure to supervise, leading to physical harm or risk of physical harm. Neglect was substantiated in 37% of these investigations, suspected in 14%, and unsubstantiated in 49%. Concerns about failure to protect children from sexual abuse were identified in another estimated 6,885 child investigations (1.45 investigations per 1,000 children); neglect was substantiated in 24% of these cases.

Physical neglect was the second most frequently investigated form of neglect. An estimated 32,634 investigations of physical neglect were conducted (6.86 investigations per 1,000 children); in 40% of these investigations neglect was substantiated. Medical neglect was investigated in 6,274 cases, and failure to provide psychological or psychiatric treatment was investigated in 2,148 cases. Of these, 37% were substantiated medical neglect and 40% substantiated failure to provide psychological/psychiatric treatment. Permitting criminal behaviour as a form of neglect was investigated in an estimated 1,936 child investigations (0.41 investigations per 1,000 children), and substantiated in over half (52%) of these cases.

An estimated 9,706 child investigations (2.04 investigations per 1,000 children) involved abandonment as a primary or secondary form of investigated maltreatment; 49% of these cases were substantiated. Educational neglect was noted in an estimated 4,735 child investigations (1.00 investigations per 1,000 children), over two-thirds (67%) of which were substantiated.

TABLE 3-7 Primary or Secondary Forms of Neglect, by Level of Substantiation, in Canada, Excluding Quebec, in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Primary or Secondary Forms of Neglect				
Failure to Supervise (Physical)				
Number of Child Investigations	14,543	5,550	19,546	39,639
Row Percentage	37%	14%	49%	100%
Incidence per 1,000 Children	3.06	1.17	4.11	8.33
Failure to Supervise (Sexual)				
Number of Child Investigations	1,643	976	4,266	6,885
Row Percentage	24%	14%	62%	100%
Incidence per 1,000 Children	0.35	0.21	0.90	1.45
Physical Neglect				
Number of Child Investigations	13,098	4,365	15,171	32,634
Row Percentage	40%	13%	46%	100%
Incidence per 1,000 Children	2.75	0.92	3.19	6.86
Medical Neglect				
Number of Child Investigations	2,347	631	3,296	6,274
Row Percentage	37%	10%	53%	100%
Incidence per 1,000 Children	0.49	0.13	0.69	1.32
Failure to Provide Psych. Treatment				
Number of Child Investigations	854	282	1,012	2,148
Row Percentage	40%	13%	47%	100%
Incidence per 1,000 Children	0.18	0.06	0.21	0.45
Permitting Criminal Behaviour				
Number of Child Investigations	1,001	492	443	1,936
Row Percentage	52%	25%	23%	100%
Incidence per 1,000 Children	0.21	0.10	0.09	0.41
Abandonment				
Number of Child Investigations	4,708	780	4,218	9,706
Row Percentage	49%	8%	43%	100%
Incidence per 1,000 Children	0.99	0.16	0.89	2.04
Educational Neglect				
Number of Child Investigations	3,188	638	909	4,735
Row Percentage	67%	13%	19%	100%
Incidence per 1,000 Children	0.67	0.13	0.19	1.00

TABLE 3-7 Primary or Secondary Forms of Neglect, by Level of Substantiation, in Canada, Excluding Quebec, in 2003 (cont'd)

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Total Investigations Involving Neglect as Primary or Secondary Reason for Investigation*				
Number of Child Investigations**	35,843	11,342	42,956	90,141
Row Percentage	40%	13%	48%	100%
Incidence per 1,000 Children	7.53	2.38	9.03	18.95
Total Investigations Involving Neglect as Primary Reason for Investigation				
Number of Child Investigations**	30,366	9,015	33,829	73,210
Row Percentage	41%	12%	46%	100%
Incidence per 1,000 Children	6.38	1.89	7.11	15.39

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* The total number of investigations involving primary or secondary neglect is not equal to the sum of the specific forms of neglect because some cases involve multiple forms of neglect (see Table 3-4).

** Based on a sample of 5,653 child maltreatment investigations with information about neglect. Row percentages may add up to 99% or 101% because of rounding.

EMOTIONAL MALTREATMENT

Emotional maltreatment is a difficult category of maltreatment to document because often it does not involve a specific incident or visible injury. In addition, the effects of emotional maltreatment, although often severe, tend to become apparent over time (e.g., impaired cognitive, social, and emotional development). Provincial and territorial child welfare statutes vary considerably in the extent to which they cover emotional maltreatment. Three forms of emotional maltreatment were tracked by the CIS-2003. A fourth form, exposure to non-intimate violence, was added after the start of the study to deal with the relatively large number of such investigations.

- **Emotional Abuse:** The child has suffered or was at substantial risk of suffering from mental, emotional, or

developmental problems caused by overtly hostile, punitive treatment, or habitual or extreme verbal abuse (threatening, belittling, etc.).⁵⁴

- **Non-organic Failure to Thrive:** A child under 3 has suffered a marked retardation or cessation of growth for which no organic reasons can be identified. Failure to thrive cases where inadequate nutrition was the identified cause were classified as physical neglect. Non-organic failure to thrive is generally considered to be a form of psychological maltreatment; it has been classified as a separate category because of its particular characteristics.
- **Emotional Neglect:** The child has suffered or was at substantial risk of suffering from mental, emotional, or developmental problems caused by inadequate nurturance/affection. If treatment was offered but caregivers

were not cooperative, cases were classified under failure to provide treatment as well.

- **Exposure to Non-Intimate Violence (Between Adults Other than Caregivers):** A child has been a witness to violence occurring between adults in the child's home environment (for example the child's father and an acquaintance), excluding exposure to domestic violence.

There were an estimated 56,843 child investigations (11.95 investigations per 1,000 children) in 2003 for alleged emotional maltreatment as the primary or secondary maltreatment classification (Table 3-8). Emotional maltreatment was substantiated in 42% of these investigations, suspected in 24%, and unsubstantiated in 34%. Emotional maltreatment was the primary reason for investigation in an estimated 31,793 cases (6.68 investigations per 1,000 children).

⁵⁴ Instances in which children displayed severe emotional problems requiring treatment, and parents refused or did not cooperate with offered treatment, were classified as neglect cases under failure to provide treatment.

TABLE 3-8 Primary or Secondary Forms of Emotional Maltreatment, by Level of Substantiation, in Canada, Excluding Quebec, in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Primary or Secondary Forms of Emotional Maltreatment				
Emotional Abuse				
Number of Child Investigations	17,555	9,055	13,374	39,984
Row Percentage	44%	23%	33%	100%
Incidence per 1,000 Children	3.69	1.90	2.81	8.40
Non-organic Failure to Thrive				
Number of Child Investigations	124	–	–	276
Row Percentage	45%	32%	24%	100%
Incidence per 1,000 Children	0.03	0.02	0.01	0.06
Emotional Neglect				
Number of Child Investigations	6,094	5,139	5,818	17,051
Row Percentage	36%	30%	34%	100%
Incidence per 1,000 Children	1.28	1.08	1.22	3.58
Exposure to Non-Intimate Violence				
Number of Child Investigations	1,616	388	578	2,582
Row Percentage	63%	15%	22%	100%
Incidence per 1,000 Children	0.34	0.08	0.12	0.54
Investigations Involving Emotional Maltreatment as Primary or Secondary Reason for Investigation*				
Number of Child Investigations**	24,035	13,586	19,222	56,843
Row Percentage	42%	24%	34%	100%
Incidence per 1,000 Children	5.05	2.86	4.04	11.95
Investigations Involving Emotional Maltreatment as Primary Reason for Investigation				
Number of Child Investigations**	15,369	6,513	9,911	31,793
Row Percentage	48%	20%	31%	100%
Incidence per 1,000 Children	3.23	1.37	2.08	6.68

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* The total number of investigations involving primary or secondary emotional maltreatment is not equal to the sum of the specific forms of emotional maltreatment because some cases involve multiple forms of emotional maltreatment (see Table 3-4).

** Based on a sample of 3,248 child maltreatment investigations with information on emotional maltreatment. Columns and rows may not add up to total because low frequency estimates are not reported but are included in total. Rows may add up to 99% or 101% because of rounding.

TABLE 3-9 Primary or Secondary Forms of Exposure to Domestic Violence, by Level of Substantiation, in Canada, Excluding Quebec, in 2003

	Level of Substantiation			Total
	Substantiated	Suspected	Unsubstantiated	
Investigations Involving Exposure to Domestic Violence as Primary or Secondary Reason for Investigation				
Number of Child Investigations*	35,116	6,655	8,224	49,995
Row Percentage	70%	13%	16%	100%
Incidence per 1,000 Children	7.38	1.40	1.73	10.51
Investigations Involving Exposure to Domestic Violence as Primary Reason for Investigation				
Number of Child Investigations*	29,370	3,605	5,104	38,079
Row Percentage	77%	9%	13%	100%
Incidence per 1,000 Children	6.17	0.76	1.07	8.00

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* Based on a sample of 2,791 child maltreatment investigations with information on exposure to domestic violence. Rows may add up to 99% or 101% because of rounding.

Emotional abuse was investigated in an estimated 39,984 cases (8.40 investigations per 1,000 children), and substantiated in 44% of these investigations. Emotional neglect was the primary or secondary form of maltreatment in an estimated 17,051 child investigations (3.58 investigations per 1,000 children); maltreatment was substantiated in 36% of these investigations. An estimated 276 reports of non-organic failure to thrive were investigated, 45% of which were substantiated. Exposure to violence between adults other than caregivers was investigated in an estimated 2,582 cases; in 63% of these cases maltreatment was substantiated.

EXPOSURE TO DOMESTIC VIOLENCE

Although exposure to domestic violence is often categorized as a form of emotional maltreatment, most Canadian jurisdictions have developed policies and practices specifically for exposure to domestic violence.⁵⁵ To analyze this rapidly expanding form of maltreatment, it is given its own category in this report.

- **Exposed to Domestic Violence:** A child has been a witness to violence occurring between the caregivers (or a caregiver and his/her partner). This would include situations where the child indirectly witnessed the

violence (e.g., saw the physical injuries on his/her caregiver the next day or overheard the violence).

As Table 3-9 shows, exposure to domestic violence was investigated as the primary or secondary form of maltreatment in an estimated 49,995 cases, a rate of 10.51 investigations per 1,000 children. Exposure to domestic violence was substantiated in over two-thirds (70%) of these cases, and suspected in another 13%. Exposure to domestic violence was unsubstantiated in 16% of cases (8,224 cases). Exposure to domestic violence was the primary form of investigated maltreatment in an estimated 38,079 cases.

⁵⁵ Yukon Territory, British Columbia, Manitoba, Ontario and Quebec do not include exposure to domestic violence in their child welfare legislation. Although Ontario does not include exposure to domestic violence in the *Child and Family Services Act*, it is included in the Eligibility Spectrum under the emotional harm section.

Chapter 4

CHARACTERISTICS OF MALTREATMENT

This chapter describes the characteristics of maltreatment in terms of the nature and severity of harm, the duration of the maltreatment, and the perpetrator's relationship to the victim. The findings are presented within the five primary categories of substantiated maltreatment tracked by the 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003): physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence.

All tables in this chapter present estimates for Canada excluding Quebec (see Chapter 2 for a discussion on data from Quebec). Selected comparisons with the findings from the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998) (excluding Quebec) are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 in a sample of Canadian child welfare services. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates **do not include:**

- (1) incidents that were not reported to child welfare services;
- (2) reported cases that were screened out by child welfare services before being fully investigated;
- (3) new reports on cases already open by child welfare services; or
- (4) cases that were investigated only by the police.

PHYSICAL HARM

The CIS-2003 tracked physical harm suspected or known to be caused by the investigated maltreatment. Information on physical harm was collected using two scales, one describing severity of harm as measured by need for medical treatment, and the other describing the nature of harm.

Physical harm was identified in 10% of cases of substantiated maltreatment (Table 4-1(a)). In 7% of substantiated maltreatment investigations (an estimated 7,408 cases) harm was noted but no treatment was considered required. In an additional 3% of substantiated investigations (an estimated 2,814 cases), harm was sufficiently severe to require treatment.

■ **Physical Abuse:** Physical harm was indicated in 29% of investigations where physical abuse was the primary substantiated maltreatment; in 25% of cases a physical injury had been documented but was not severe enough to require treatment; in another 4% of cases (an estimated 1,079 child investigations) medical treatment was required. The fact that no physical harm was noted in 71% of physical abuse cases may seem surprising to some readers.

It is important to note that most jurisdictions consider that physical abuse includes caregiver behaviour that seriously endangers children, as well as behaviour that leads to documented injuries.

- **Sexual Abuse:** Physical harm was identified in 5% of investigations where sexual abuse was the primary substantiated concern; 4% of cases requiring treatment and the remaining 1% being injuries that did not require treatment.
- **Neglect:** Although physical harm was indicated in 7% of investigations where neglect was the primary substantiated maltreatment, most of these cases (5%) involved injuries that were severe enough to require medical treatment. As a result, more victims of neglect required medical treatment (an estimated 1,506 victims of neglect) than any other category of maltreatment.
- **Emotional Maltreatment:** Physical harm was identified in 1% of investigations where emotional maltreatment was the primary substantiated concern.
- **Exposure to Domestic Violence:** Physical harm was identified in 1% of cases where exposure to domestic violence was the primary form of substantiated maltreatment.

TABLE 4-1(a) Physical Harm, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Physical Harm	71%	17,852	95%	2,777	93%	28,126	99%	15,192	99%	29,129	90%	93,076
Physical Harm, No Treatment Required	25%	6,326	1%	–	2%	735	1%	156	1%	149	7%	7,408
Physical Harm, Treatment Required	4%	1,079	4%	116	5%	1,506	0%	–	0%	–	3%	2,814
Total Child Investigations*	100%	25,257	100%	2,935	100%	30,367	100%	15,370	100%	29,369	100%	103,298

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* Based on a sample of 5,660 substantiated child maltreatment investigations with information about physical harm. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

NATURE OF PHYSICAL HARM

Investigating workers were asked to document the nature of physical harm that was suspected or known to have been caused by the investigated maltreatment. This documentation was based on the information routinely collected during the maltreatment investigation. While investigation protocols require careful examination of any physical injuries and may include a medical examination, it should be noted that children are not necessarily examined by a medical practitioner. Seven possible types of injury or health conditions were documented:

- **No Physical Harm:** There was no apparent evidence of physical harm to the child as a result of maltreatment.
- **Bruises/Cuts/Scrapes:** The child suffered various physical hurts visible for at least 48 hours.
- **Burns and Scalds:** The child suffered burns and scalds visible for at least 48 hours.

- **Broken Bones:** The child suffered fractured bones.
- **Head Trauma:** The child was a victim of head trauma (note that in shaken infant cases the major trauma is to the head not to the neck).
- **Fatal:** The child died, and maltreatment was suspected during the investigation as the cause of death. Cases where maltreatment was eventually unsubstantiated were included.
- **Other Health Conditions:** The child suffered from other physical health conditions, such as complications from untreated asthma, failure to thrive or a sexually transmitted disease.

Table 4-1(b) presents seven types of physical harm reported in the CIS-2003. Physical harm was documented in 10% of cases of substantiated maltreatment involving an estimated 10,222 investigations. Physical harm primarily involved bruises, cuts, and scrapes (7% of cases of substantiated maltreatment) and other health conditions (2% of cases

of substantiated maltreatment). Less than 1% of physical harm situations involved head trauma, burns and scalds, or broken bones. Because the CIS-2003 estimates are based on a very small number of cases involving burns and scalds, broken bones and head trauma, the estimates presented in Table 4-1(b) should be interpreted with caution.

During the three-month CIS-2003 case selection period there was one substantiated investigation of a child fatality. Because these tragic events occur relatively rarely, it is not surprising that only one substantiated investigated child fatality was captured by the CIS-2003. Estimates of the rate of child fatalities cannot be derived from this single case.⁵⁶

■ **Physical Abuse:** Physical harm was most often noted in cases with substantiated physical abuse as the primary maltreatment. In 27% of these cases (an estimated 6,709 investigations) bruises, cuts, and scrapes were involved. Other health

⁵⁶ In 2003, 33 children (under age 12) were victims of homicide in Canada, which represents the lowest rate of child homicide victims in 25 years. Of these, 23 were killed by a parent. The average number of child homicides for the preceding 10 years is 49 child homicides per year. See Dauvergne, M. (2004). *Homicide in Canada, 2003* – Catalogue no. 85-002-XPE, Vol. 24, no. 8. Ottawa: Statistics Canada.

TABLE 4-1(b) Nature of Physical Harm, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Physical Harm	71%	17,852	95%	2,777	93%	28,126	99%	15,192	99%	29,129	90%	93,076
Bruises, Cuts, and Scrapes	27%	6,709	4%	111	2%	475	0%	–	1%	157	7%	7,463
Burns and Scalds	0%	–	0%	–	1%	154	0%	–	0%	–	0%	209
Broken Bones	1%	147	0%	–	0%	–	0%	–	0%	–	0%	162
Head Trauma	1%	247	0%	–	0%	–	0%	–	0%	–	0%	371
Fatality	0%	–	0%	–	0%	–	0%	–	0%	–	0%	–
Other Health Conditions	2%	615	2%	–	5%	1,554	1%	166	0%	–	2%	2,401
At Least One Type of Physical Harm	29%	7,405	5%	159	8%	2,241	1%	177	1%	240	10%	10,222
Total Child Investigations*		25,257		2,935		30,367		15,370		29,369		103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about physical harm. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Children may have experienced multiple types of harm.

conditions were reported in 2% of these cases while more severe injuries were indicated less often: broken bones and head trauma were each indicated in approximately 1% of cases with substantiated physical abuse as the primary concern.

- **Sexual Abuse:** Investigations where sexual abuse was the primary substantiated maltreatment and physical harm was reported involved bruises, cuts, and scrapes (4%) and other health conditions (2%).⁵⁷
- **Neglect:** Cases with neglect as the primary substantiated maltreatment most frequently involved other health conditions (5%). An additional 2% of cases involved bruises, cuts, and scrapes; and 1% involved burns and scalds.

- **Emotional Maltreatment:** Physical harm was rare in cases with substantiated emotional maltreatment as the primary reason for investigation; when it was documented, physical harm primarily involved a health condition (1% of cases with emotional maltreatment as the primary substantiated maltreatment).

- **Exposure to Domestic Violence:** Physical harm was rare in cases with substantiated exposure to domestic violence as the primary maltreatment. When it was documented, physical harm primarily involved bruises, cuts or scrapes (1% of cases with substantiated exposure to domestic violence as the primary concern).

MEDICAL TREATMENT FOR PHYSICAL HARM

To estimate the severity of physical harm, investigating workers were asked to indicate whether identified physical harm was severe enough to require medical treatment.

- **Medical Treatment Required for Injury:** Indicate whether medical treatment was required as a result of the injury or harm for any of the investigated forms of maltreatment.

Table 4-1(c) presents medical treatment ratings for the five CIS-2003 measures of physical harm. Bruises, cuts, and scrapes were the most common injury; 85% of these did not require medical treatment. In the case of other injuries, medical treatment

⁵⁷ Sexually transmitted diseases were the only specific type of health condition noted in the open-ended question that accompanied this category.

TABLE 4-1(c) Medical Treatment Required in Substantiated Child Maltreatment Investigations, by Nature of Physical Harm, in Canada, Excluding Quebec, in 2003

	Nature of Physical Harm									
	Bruises, Cuts, and Scrapes		Burns and Scalds		Broken Bones		Head Trauma		Other Health Conditions	
Medical Treatment Not Required	85%	6,281	39%	–	0%	–	20%	–	42%	999
Medical Treatment Required	15%	1,151	61%	128	100%	162	80%	296	58%	1,386
Total Child Investigations*	100%	7,432	100%	210	100%	162	100%	371	100%	2,385

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 547 substantiated child maltreatment investigations with information about the nature of physical harm and medical treatment. Columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

was generally required. Medical treatment was required in 61% of the cases of substantiated maltreatment that involved burns or scalds, 100% of cases involving broken bones, 80% of cases involving head trauma, and 58% of cases involving other health conditions.

EMOTIONAL HARM

Information on emotional harm was collected through a series of questions asking child welfare workers to describe emotional harm that had occurred after the maltreatment incidents. Workers were asked to indicate whether the child was showing signs of mental or emotional harm (e.g., nightmares, bed wetting or social withdrawal) following the maltreatment incident(s). These maltreatment-specific descriptions of emotional harm are not to be confused with the general child functioning ratings that are presented in Chapter 6.

Table 4-2 presents emotional harm identified during the child maltreatment investigations. To rate the severity of mental/emotional harm, workers indicated whether therapeutic intervention (treatment) was required in response to the mental or emotional distress shown by the child. Emotional harm was noted

in 20% of all cases of substantiated maltreatment involving an estimated 20,958 investigations. In 14% of cases of substantiated maltreatment symptoms were severe enough to require treatment.

- **Physical Abuse:** Emotional harm was noted in 19% of cases where physical abuse was the primary substantiated maltreatment; in 13% of cases symptoms were severe enough to require treatment.
- **Sexual Abuse:** Emotional harm was noted in 27% of investigations where sexual abuse was the primary substantiated concern and harm was sufficiently severe to require treatment. Although a relatively large proportion of sexually abused children displayed symptoms of emotional harm requiring treatment, these cases account for an estimated 781 out of the 14,835 substantiated maltreatment cases (5%) where emotional harm was believed to require therapeutic intervention. It should also be noted that the CIS-2003 tracked harm associated with observable symptoms. It is likely that many sexually abused children are harmed in ways that

were not readily apparent to the investigating worker.

- **Neglect:** Emotional harm was identified in 19% of investigations where neglect was the primary substantiated maltreatment; in 14% of cases harm was sufficiently severe to require treatment.
- **Emotional Maltreatment:** Emotional harm was identified in 35% of investigations where substantiated emotional maltreatment was the primary concern, and was sufficiently severe to require treatment in 25% of cases. While it may appear surprising to some readers that no emotional harm was documented for such a large proportion of emotionally maltreated children, it is important to understand that the determination of emotional maltreatment is based on parental behaviour and/or the child's symptoms.
- **Exposure to Domestic Violence:** Emotional harm was identified in 14% of investigations where exposure to domestic violence was the primary substantiated maltreatment; in 9% of cases harm was sufficiently severe to require treatment.

TABLE 4-2 Emotional Harm, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
No Emotional Harm	80%	20,276	73%	2,125	81%	24,477	65%	9,974	86%	25,141	80%	81,993
Signs of Mental or Emotional Harm*	6%	1,620	0%	–	5%	1,535	10%	1,498	5%	1,457	6%	6,123
Emotional Harm, Treatment Required**	13%	3,324	27%	781	14%	4,311	25%	3,782	9%	2,637	14%	14,835
Total Child Investigations	100%	25,220	100%	2,919	100%	30,323	100%	15,254	100%	29,235	100%	102,951

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,642 substantiated child maltreatment investigations with information about emotional harm. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

** Based on a sample of 1,262 substantiated child maltreatment investigations with information about emotional harm and treatment requirements.

DURATION OF MALTREATMENT

Duration of maltreatment was documented on a three-point scale:

- (1) Single incident; and
- (2) Multiple incidents for less than six months; and
- (3) Multiple incidents for more than six months

Given the length restrictions for the CIS-2003 questionnaire, it was not possible to gather additional information on the frequency of maltreatment in order to distinguish between long-term situations with infrequent maltreatment and long-term situations with frequent maltreatment. Workers could also note if the duration of the maltreatment was unknown.

Table 4-3 shows that 36% of cases of substantiated maltreatment (an estimated 36,328 child investigations) involved situations that had been ongoing for more than six months, 17% involved multiple incidents that had occurred over a period of less than

six months, and 32% of investigations involved single incidents. Duration of maltreatment could not be determined in 15% of cases.

- **Physical Abuse:** Maltreatment was indicated as a single incident in 44% of cases where physical abuse was the primary substantiated maltreatment, as multiple incidents over a period of less than six months in 16% of abuse cases, and as multiple incidents over a period longer than six months in 27% of these cases.
- **Sexual Abuse:** Maltreatment was indicated as a single incident in 38% of cases where sexual abuse was the primary substantiated maltreatment, as multiple incidents over a period of less than six months in 16% of sexual abuse cases, and as multiple incidents over a period longer than six months in 26% of these cases.
- **Neglect:** In contrast to abuse, single incidents of neglect occurred in 26% of cases where neglect was the primary substantiated maltreatment.

Neglect involving multiple incidents over a period of less than six months occurred in 23% of these cases, and multiple incidents over more than six months in 33% of cases.

- **Emotional Maltreatment:** As with neglect, emotional maltreatment investigations involved more chronic than single-incident cases. Of the cases involving emotional maltreatment as the primary category of substantiated maltreatment, 21% involved a single incident, 17% involved incidents over a period of less than six months, and 50% occurred over a period of more than six months.
- **Exposure to Domestic Violence:** One-third (33%) of cases with exposure to domestic violence as the primary substantiated maltreatment were single-incident cases, 13% involved multiple incidents over less than six months, and 39% involved multiple incidents over more than six months.

TABLE 4-3 Duration of Maltreatment, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Single Incident	44%	11,008	38%	1,119	26%	7,753	21%	3,234	33%	9,559	32%	32,673
Less Than Six Months	16%	4,121	16%	474	23%	6,907	17%	2,586	13%	3,705	17%	17,793
More Than Six Months	27%	6,757	26%	755	33%	10,020	50%	7,529	39%	11,267	36%	36,328
Unknown	13%	3,334	20%	571	18%	5,425	12%	1,867	15%	4,215	15%	15,412
Total Child Investigations*	100%	25,220	100%	2,919	100%	30,105	100%	15,216	100%	28,746	100%	102,206

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,603 substantiated child maltreatment investigations with information about duration of maltreatment. Columns may add up to 99% or 101% because of rounding.

PERPETRATOR

The perpetrator refers to the person or persons considered to have abused or neglected the child. Perpetrator information was collected either through the caregiver questions on the Household Information Sheet or through an open-ended question that was subsequently recoded into the following classifications:

- **Biological Mother/Biological Father:** The biological parent of all children in the family
- **Stepfather/Stepmother or Common Law Partner:** Partner of the child(ren)'s biological parent, but is not the biological parent of at least one child in the family.
- **Adoptive Parents/Foster Family:** Includes adoptive parents and foster family.
- **Other Relative:** Any other relative, adult or child, who had contact with the investigated child (e.g., grandparent, aunt/uncle, sibling).
- **Family Friend:** Friend of the caregiver(s) living with the child.

- **Parent's Boyfriend/Girlfriend:** Parent's partner not in a caregiving role.
- **Child's Friend (Peer):** Another child considered a friend or peer.
- **Babysitter:** An individual of any age in a babysitting role to the child.
- **Teacher:** Includes teachers but not other school personnel (e.g., caretakers)
- **Other Professional:** Includes recreation, health, and social service professionals.
- **Other Acquaintance:** An individual known to the child's family.

As shown in Table 4-4(a), most substantiated maltreatment involved allegations against parents: biological mothers (54%), biological fathers (48%), stepfathers/common-law partners (12%), and stepmothers/common-law partners (2%). It should be noted that in many instances, non-familial allegations of abuse are investigated by the police, not by a child welfare service.⁵⁸ At least one parent was a perpetrator in 82% of maltreatment

investigations (see Appendix I, Table 3). Other than parents, relatives were the most frequently identified perpetrators (6%). Only 3% of all cases of substantiated maltreatment involved non-family perpetrators, as shown in Table 4-4(a). Less than 1% involved allegations against a teacher or another professional working with the child (Table 4-4(b)).

■ **Physical Abuse:** Perpetrators in cases with physical abuse as the primary substantiated maltreatment were evenly split between mothers and fathers, with female parents being perpetrators in 53% of cases (50% biological mothers and 3% stepmothers), and male parents in 50% of cases (38% biological fathers and 12% stepfathers). This distribution is somewhat biased by the fact that 30% of physical abuse victims were living in lone female-parent families (see Table 7-1). The alleged roles of mothers and fathers in two-parent families are somewhat different, with fathers being perpetrators of 67% of substantiated physical abuse, and mothers of

⁵⁸ Trocmé, N. and Brison, R. (1998). Homicide and injuries due to assault and to abuse and neglect. In Beaulne, G. (Ed.), *For the safety of Canadian children and youth: from data to preventive measures*. Ottawa: Health Canada.

51% of substantiated physical abuse (see Appendix I, Table 4).

In 4% of cases where physical abuse was the primary substantiated concern, other relatives were considered perpetrators. The boyfriends and girlfriends of parents were the non-familial figures most frequently reported as the perpetrators in cases where physical abuse was the primary form of substantiated maltreatment.

■ **Sexual Abuse:** In contrast to physical abuse cases, non-parental figures were most often the perpetrators in cases where sexual abuse was the primary substantiated maltreatment.

Non-parental relatives represented the largest group of perpetrators (35%), followed by the children's friends and peers (15%), stepfathers (13%), biological fathers (9%), other acquaintances (9%), and the boyfriends and girlfriends of the parents (5%). Another 5% of cases where sexual abuse was the primary substantiated maltreatment involved biological mothers as perpetrators.

It is important to note that many sexual abuse allegations involving non-family members are investigated by the police alone, and child welfare services are involved only if there are concerns about the ongoing

protection of the child or if other children may be at risk of abuse.

■ **Neglect:** Biological mothers were considered to be perpetrators in 83% and biological fathers in 36% of cases where neglect was the primary substantiated maltreatment. The over-representation of biological mothers in this category should be interpreted with caution, given that 42% of cases of substantiated neglect involved lone female-parent families (see Table 7-1). Fathers/stepfathers were considered to be perpetrators in 45% of cases of substantiated neglect.

TABLE 4-4(a) Identified Perpetrator (Relatives), by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment												
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total		
Relatives													
Biological Mother	50%	12,524	5%	147	83%	25,313	63%	9,713	27%	7,904	54%	55,601	
Biological Father	38%	9,581	9%	260	36%	11,051	45%	6,985	73%	21,474	48%	49,351	
Stepfather/Common Law Partner	12%	3,142	13%	385	9%	2,633	11%	1,681	15%	4,440	12%	12,281	
Stepmother/Common Law Partner	3%	747	0%	–	1%	401	3%	456	1%	374	2%	1,978	
Foster Family/Adoptive Parents	2%	541	0%	–	1%	281	2%	254	1%	154	1%	1,230	
Other Relative	8%	2,016	35%	1,012	5%	1,417	11%	1,627	1%	360	6%	6,432	
Child Investigations With At Least One Relative Perpetrator	97%	24,453	60%	1,769	98%	29,755	98%	15,112	94%	27,544	95%	98,633	
Child Investigations With At Least One Non-Relative Perpetrator	2%	486	38%	1,110	2%	597	1%	212	4%	1,069	3%	3,474	
Total Child Investigations*	100%	25,257	100%	2,935	100%	30,366	100%	15,369	100%	29,369	100%	103,298	

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about alleged perpetrators. Columns are not additive as maltreatment may have involved more than one perpetrator. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

- **Emotional Maltreatment:** Biological fathers/stepfathers were considered perpetrators in 56% and mothers/stepmothers in 66% of investigations where substantiated emotional maltreatment was the primary substantiated maltreatment.
- **Exposure to Domestic Violence:** Biological fathers/stepfathers were considered to be responsible for

exposure to domestic violence in 88% of investigations where exposure to domestic violence was the primary substantiated maltreatment. Mothers/stepmothers were considered to have failed to protect their child(ren) from exposure to domestic violence in 28% of these cases. It should be noted that the concept of the “perpetrator” in cases of

exposure to domestic violence should be interpreted with caution. Child welfare investigations focus primarily on the question of the parent’s ability to protect a child from exposure to the violence rather than identifying the perpetrator of the violence.⁵⁹

TABLE 4-4(b) Identified Perpetrator (Non-Relatives), by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Non-Relatives												
Family Friend	0%	–	4%	114	1%	173	0%	–	0%	–	0%	428
Parent’s Boyfriend/ Girlfriend	1%	175	5%	153	1%	215	0%	–	2%	669	1%	1,274
Child’s Friend (Peer)	0%	–	15%	437	0%	–	0%	–	0%	–	1%	504
Babysitter/Babysitter’s Family	0%	–	2%	–	0%	–	0%	–	0%	–	0%	218
Day Care Provider/ Teacher/Other Professional	0%	–	0%	–	0%	–	0%	–	0%	–	0%	135
Other Acquaintance	0%	–	9%	262	0%	–	0%	–	1%	352	1%	778
Stranger/Unknown	0%	–	3%	–	0%	–	0%	–	0%	–	0%	134
Child Investigations With At Least One Non-Relative Perpetrator												
	2%	486	38%	1,110	2%	597	1%	212	4%	1,069	3%	3,474
Child Investigations With At Least One Relative Perpetrator												
	97%	24,453	60%	1,769	98%	29,755	98%	15,112	94%	27,544	95%	98,633
Total Child Investigations*	100%	25,257	100%	2,935	100%	30,366	100%	15,369	100%	29,370	100%	103,297

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about alleged perpetrators. Columns are not additive as maltreatment may have involved more than one perpetrator. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

⁵⁹ For the purposes of this report, caregivers who were identified in the Caregiver Functioning Checklist as victims of domestic violence and as perpetrators of domestic violence were not coded as perpetrators of exposure to domestic violence.

Chapter 5

SERVICE DISPOSITIONS

Six service dispositions were documented by the 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003) Maltreatment Assessment Form:

- (1) previous child welfare contact;
- (2) provision of ongoing child welfare services;
- (3) referrals to other services;
- (4) placement of children in out-of-home care;
- (5) application to child welfare court; and
- (6) police involvement and criminal charges for child maltreatment and for domestic violence.

The data presented in this chapter should be interpreted with care because they track events that occurred during the initial child welfare investigation only. Additional referrals for services, admissions to out-of-home care, court applications, and criminal charges are likely to occur for cases kept open after the initial investigation. It should also be noted that investigation intervention statistics presented in this chapter apply only to child welfare cases open because of alleged maltreatment. Children referred to child welfare services for reasons other than child maltreatment (e.g., behavioural or emotional problems; see Chapter 2) may have been admitted to care or may have been

subject to child welfare court proceedings, but were not tracked by the CIS-2003.

All tables in this chapter present estimates for Canada excluding Quebec (see Chapter 2 for a discussion of data from Quebec). Selected comparisons with the findings from the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998) are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 by a sample of Canadian child welfare services. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates **do not include:**

- (1) incidents that were not reported to child welfare services;
- (2) reported cases that were screened out by child welfare services before being fully investigated;
- (3) new reports on cases already open by child welfare services; or
- (4) cases that were investigated only by the police.

The tables in this chapter present information for each specific child welfare intervention, by number of child investigations and by the primary form of substantiated maltreatment.

PREVIOUS INVESTIGATIONS AND TIME SINCE MOST RECENT OPENING

Previous Investigations

Tables 5-1(a) and (b) show the following case information: the numbers of previous child welfare contacts, and the amount of time since the most recent child welfare contact. The data are presented by primary category of substantiated maltreatment.

In 37% of investigations in which maltreatment was substantiated (involving an estimated 38,500 children), there were no previous case openings; 21% of investigations had more than three previous case openings.

- **Physical Abuse:** In 54% of cases where physical abuse was the primary substantiated maltreatment (an estimated 13,573 investigations), the family had a previous case opening.
- **Sexual Abuse:** Cases where sexual abuse was the primary substantiated maltreatment had the lowest rate of previous case openings (48%, involving an estimated 1,402 children).
- **Neglect:** Investigations where neglect was the primary substantiated maltreatment had the highest rate of previous case opening: 73% (an estimated 22,208 child investigations).

■ **Emotional Maltreatment:** In cases where emotional maltreatment was the primary substantiated maltreatment, 63% of cases involved children whose families had at least one previous case opening (an estimated 9,772 investigations).

■ **Exposure to Domestic Violence:** Where exposure to domestic violence was the primary substantiated concern, 56% of cases (an estimated 16,495 investigations) involved children whose family had at least one previous case opening.

Time Since Most Recent Opening

For cases with a previous child welfare service history, Table 5-1(b) illustrates the amount of time that had elapsed since the family last had a case open. Although 37% of cases of substantiated

TABLE 5-1(a) Previous Case Openings, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Previous Openings	44%	11,181	48%	1,406	26%	7,796	36%	5,552	43%	12,565	37%	38,500
One Previous Opening	19%	4,714	20%	582	18%	5,595	21%	3,226	24%	7,126	21%	21,243
2-3 Previous Openings	18%	4,601	13%	388	23%	7,009	21%	3,286	18%	5,149	20%	20,433
More than 3 Previous Openings	17%	4,258	15%	432	32%	9,604	21%	3,260	14%	4,220	21%	21,774
Unknown Record	2%	483	4%	127	1%	362	0%	–	1%	311	1%	1,312
Total Investigations*	100%	25,237	100%	2,935	100%	30,366	100%	15,353	100%	29,371	100%	103,262

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,658 substantiated child maltreatment investigations with information about previous child welfare contacts. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

TABLE 5-1(b) Time Since Case was Last Closed, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Previous Contact	44%	11,181	48%	1,406	26%	7,796	36%	5,552	43%	12,565	37%	38,500
Time Since Most Recent Closing												
Less than 3 Months	7%	1,812	5%	149	14%	4,370	16%	2,380	9%	2,685	11%	11,396
3-6 Months	11%	2,699	6%	163	18%	5,327	14%	2,070	12%	3,537	13%	13,796
7-12 Months	13%	3,361	6%	185	18%	5,465	13%	1,925	10%	2,927	14%	13,863
13-24 Months	8%	1,970	11%	321	11%	3,294	10%	1,477	10%	2,805	10%	9,867
More than 24 Months	15%	3,714	19%	569	12%	3,587	12%	1,806	15%	4,507	14%	14,183
Unknown	2%	483	4%	127	1%	362	0%	–	1%	311	1%	1,312
Total Child Investigations*	100%	25,220	100%	2,920	100%	30,201	100%	15,239	100%	29,337	100%	102,917

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,658 substantiated child maltreatment investigations with information about previous case opening(s). Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

maltreatment had no previous case history, 38% had previous cases that had been closed less than 12 months before the CIS-2003 investigation, while another 24% had previous cases that had been closed for more than 12 months.

- **Physical Abuse:** In child maltreatment investigations where physical abuse was the primary substantiated maltreatment, 31% had previous cases that had been closed less than 12 months before the CIS-2003 investigation.
- **Sexual Abuse:** In contrast, 17% of investigations where sexual abuse was the primary substantiated maltreatment had previous cases that had been closed less than 12 months before the current investigation.
- **Neglect:** Half the investigations where neglect was the primary substantiated maltreatment had previous cases that had been closed less than 12 months before.
- **Emotional Maltreatment:** In investigations where emotional maltreatment was the primary substantiated maltreatment, 43% had previous cases that had been closed within the previous 12 months.
- **Exposure to Domestic Violence:** In investigations where exposure to domestic violence was the primary

substantiated maltreatment, 31% had previous cases that had been closed within the past 12 months.

ONGOING CHILD WELFARE SERVICES

Investigating workers were asked whether the investigated case would remain open for ongoing child welfare services after the initial investigation (see Table 5-2). Workers completed these questions using the information available at that time or upon completing the intake investigation. An estimated 45,885 (44%) of cases of substantiated child maltreatment were identified as remaining open for ongoing services; an estimated 57,320 (56%) were to be closed.

- **Physical Abuse:** An estimated 34% (8,470) of all cases where physical abuse was the primary substantiated maltreatment remained open for ongoing child welfare services, while the remaining two-thirds (16,787) were closed following the initial investigation.
- **Sexual Abuse:** Of cases that indicated sexual abuse as the primary substantiated maltreatment, 25% (an estimated 729 investigations) remained open for ongoing services, while the remaining 2,199 cases

were closed at the completion of the investigation.

- **Neglect:** In cases where neglect was identified as the primary substantiated maltreatment, 57% (an estimated 17,354 investigations) remained open for ongoing child welfare service—the highest percentage of the five primary categories of substantiated maltreatment.
- **Emotional Maltreatment:** Of cases where emotional maltreatment was the primary substantiated maltreatment, 52% (an estimated 7,927 investigations) remained open for ongoing services.
- **Exposure to Domestic Violence:** Of cases that identified exposure to domestic violence as the primary substantiated maltreatment, 39% (an estimated 11,405) remained open following the end of the initial investigation.

REFERRALS TO SUPPORT SERVICES (CHILD AND FAMILY)

The CIS-2003 tracked referrals made to programs offering services beyond “ongoing child welfare services.” Workers were asked to indicate all applicable referral classifications identified for the family or child.

TABLE 5-2 Ongoing Child Welfare Services, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Case to Be Closed	66%	16,787	75%	2,199	43%	12,979	48%	7,442	61%	17,913	56%	57,320
Case to Stay Open	34%	8,470	25%	729	57%	17,354	52%	7,927	39%	11,405	44%	45,885
Total Child Investigations*	100%	25,257	100%	2,928	100%	30,333	100%	15,369	100%	29,318	100%	103,205

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,654 substantiated child maltreatment investigations with information about case status. Columns may add up to 99% or 101% because of rounding.

This included referrals made internally to a specialized program provided by a child welfare agency/office, and referrals made externally to other agencies or services. A referral selection indicated that a formal referral had been made, not that the child or family had actually started to receive services.

Sixteen referral categories were tracked:

- **Parent Support Program:** Any group program designed to offer support or education (e.g., Parents Anonymous, parenting instruction course, Parent Support Association).
- **In-home Parenting Support:** Home based support services designed to support families, reduce the risk of out-of-home placement, or reunify children in care with their family.
- **Other Family/Parent Counseling:** Includes programs for family therapy/counseling or couple counseling (e.g., family service bureau, mental health centre).
- **Drug/Alcohol Counseling:** Addiction programs (any substance) for caregiver(s) or children.
- **Welfare/Social Assistance:** Referral for social assistance to address financial concerns of the household.
- **Food Bank:** Referral to any food bank.
- **Shelter Services:** Regarding family violence or homelessness.
- **Domestic Violence Services:** Referral for services/counseling regarding domestic violence, abusive relationships, or the effects of witnessing violence.
- **Psychiatric/Psychological Services:** Child or parent referral to psychological or psychiatric services (trauma, high-risk behaviour, or intervention).

- **Special Education Referral:** Any specialized school program to meet a child’s educational, emotional, or behavioural needs.
- **Recreational Program:** Referral to a community recreational program (e.g., organized sports leagues, community recreation, Boys and Girls Club).
- **Victim Support Program:** Referral to a victim support program (e.g., sexual abuse disclosure group).
- **Medical/Dental Services:** Any specialized service to address the child’s immediate medical or dental health needs.
- **Child/Day Care:** Any paid child/day care services, including staff-run and in-home services.
- **Cultural Services:** Services to help children or families strengthen their cultural heritage.
- **Other Child/Family Referral:** Any other child or family-focused referral.

Table 5-3 details the breakdown of other service referrals and the primary form of substantiated maltreatment.

At least one referral was made in 64% of cases of substantiated maltreatment, an estimated 65,930 investigations.

The most common type of referral was for family/parent counseling (30%), followed by domestic violence services (17%), in-home parenting support (15%), parent support groups (15%), and drug and alcohol counseling (15%).

- **Physical Abuse:** Of all cases with physical abuse as the primary substantiated maltreatment, 58% had at least one referral (an estimated 14,752 cases). The most frequent referrals for these cases were: other family or parent counseling (32%),

parent support groups (19%), in-home parenting support (14%), and psychiatric/psychological services (9%).

- **Sexual Abuse:** A minimum of one referral was made in 64% of all cases with sexual abuse as the primary substantiated maltreatment (an estimated 1,882 cases). In these cases the referral pattern was different from other forms of maltreatment; most frequently referred were to other family or parent counseling (49%), victim support services (19%), and psychiatric or psychological referrals (16%).
- **Neglect:** At least one service referral was made in 62% of all cases with neglect as the primary substantiated maltreatment (an estimated 18,768 cases). The most common referral categories were other family or parent counseling (23%), in home parenting (22%), drug and alcohol counseling (20%), parent support groups (15%), psychiatric or psychological counseling (12%), and food banks (10%).
- **Emotional Maltreatment:** A minimum of one service referral was made in 67% of all cases with emotional maltreatment as the primary substantiated maltreatment (an estimated 10,245 cases). The most common referrals were other family or parent counseling (34%), in-home parenting support (19%), parent support groups (18%), drug and alcohol counseling (18%), and psychological or psychiatric services (16%).

■ Exposure to Domestic Violence:

At least one referral was made in 69% of all cases with domestic violence as the primary substantiated maltreatment (an estimated 20,283 cases). The most common referrals

were to domestic violence services (39%), other family or parent counseling (33%), drug and alcohol counseling (18%), victim support services (12%), and parent support groups (11%).

OUT-OF-HOME PLACEMENT

The CIS-2003 tracked admissions to out-of-home care that occurred at any time during the investigation. If there

TABLE 5-3 Referrals to Support Services, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Parent Support Group	19%	4,830	10%	291	15%	4,419	18%	2,822	11%	3,113	15%	15,475
In Home Parenting Support	14%	3,537	4%	130	22%	6,743	19%	2,952	6%	1,835	15%	15,197
Other Family/Parent Counseling	32%	7,993	49%	1,425	23%	6,852	34%	5,205	33%	9,755	30%	31,230
Drug/Alcohol Counseling	6%	1,436	2%	–	20%	5,934	18%	2,717	18%	5,240	15%	15,395
Welfare/Social Assistance	3%	719	1%	–	8%	2,427	6%	923	3%	987	5%	5,100
Food Bank	2%	577	1%	–	10%	3,011	4%	642	3%	935	5%	5,185
Shelter Services	3%	712	1%	–	4%	1,262	5%	760	7%	2,009	5%	4,767
Domestic Violence Services	7%	1,893	2%	–	6%	1,957	15%	2,253	39%	11,492	17%	17,649
Psychiatric/Psychological Services	9%	2,179	16%	477	12%	3,788	16%	2,404	9%	2,708	11%	11,556
Special Education Referral	1%	296	0%	–	1%	398	0%	–	1%	203	1%	959
Recreational Program	2%	441	0%	–	3%	933	2%	377	2%	454	2%	2,219
Victim Support Program	3%	794	19%	563	3%	935	3%	504	12%	3,464	6%	6,260
Medical/Dental Services	4%	872	3%	–	7%	2,177	3%	410	4%	1,099	4%	4,638
Child Care/Daycare	3%	738	0%	–	6%	1,814	6%	925	4%	1,151	4%	4,628
Cultural Services	3%	648	4%	104	3%	872	4%	652	3%	985	3%	3,261
Other Referral	10%	2,516	13%	374	11%	3,212	7%	1,038	6%	1,679	9%	8,819
At Least One Referral Noted	58%	14,752	64%	1,882	62%	18,768	67%	10,245	69%	20,283	64%	65,930
No Family or Child Referral	42%	10,505	36%	1,053	38%	11,598	33%	5,124	31%	9,087	36%	37,367
Total Substantiated Investigations*	100%	25,257	100%	2,935	100%	30,366	100%	15,369	100%	29,370	100%	103,297

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 3,662 substantiated child maltreatment investigations with information about referrals. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

Column totals for Table 5-3 exceed the total number of children receiving at least one referral because several different referrals can be made for a child or his/her family.

were multiple placements, workers were asked to indicate the setting where the child had spent the most time. The following placement classifications were used:

- **No Placement Required:** No placement was required following the investigation.
- **Placement Is Being Considered:** At this point of the investigation an out-of-home placement is still being considered.
- **Informal Kinship Care:** An informal placement has been arranged within the family support network (kinship care, extended family, traditional care); the child welfare authority does not have temporary custody.
- **Kinship Foster Care:** A formal placement has been arranged within the family support network (kinship care, extended family, customary care); the child welfare authority has temporary or full custody and is paying for the placement.

- **Other Family Foster Care:** Includes any family based care, including foster homes, specialized treatment foster homes, and assessment homes.
- **Group Home Placement:** An out-of-home placement required in a structured group living setting.
- **Residential/Secure Treatment:** Placement required in a therapeutic residential treatment centre to address the needs of the child.

As shown in Table 5-4, in 8% of all cases of substantiated maltreatment (an estimated 8,260 cases) a child was placed in formal child welfare care (kinship foster care, other family foster care, a group home, or residential/secure treatment) during the initial investigation. An additional 5% of cases of substantiated maltreatment resulted in children being placed in informal kinship care, while placement was considered in an additional 4% of cases of substantiated child maltreatment. In total, 13% of children

experienced a change of residence during or at the conclusion of the initial investigation.

- **Physical Abuse:** Placement in child welfare care (kinship foster care, other family foster care, a group home, or residential/secure treatment) occurred in 7% of investigations where physical abuse was the primary substantiated maltreatment. Of these, other family foster care was noted most frequently (4%). In an additional 5% of physical abuse cases children were placed in informal kinship care.
- **Sexual Abuse:** For cases where sexual abuse was identified as the primary substantiated maltreatment, 6% of investigations led to a child being placed in child welfare care (kinship foster care, other family foster care, a group home, or residential/secure treatment). No children in this category were placed in informal kinship care placements.

TABLE 5-4 Out-of-Home Placement, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Placement Required	84%	21,132	90%	2,644	72%	21,869	81%	12,463	94%	27,625	83%	85,733
Placement Considered	4%	1,097	3%	–	5%	1,602	5%	698	2%	498	4%	3,982
Informal Kinship Care	5%	1,167	0%	–	9%	2,813	5%	794	2%	475	5%	5,249
Child Welfare Placement:												
Kinship Foster Care	1%	165	1%	–	3%	792	2%	230	0%	–	1%	1,275
Other Family Foster Care	4%	1,112	1%	–	8%	2,386	6%	868	2%	569	5%	4,975
Group Home	2%	434	2%	–	2%	596	1%	201	0%	113	1%	1,409
Residential/Secure Treatment	0%	111	2%	–	1%	307	1%	103	0%	–	1%	601
Total Child Investigations*	100%	25,218	99%	2,935	100%	30,365	101%	15,357	100%	29,349	100%	103,224

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,655 substantiated child maltreatment investigations with information about placement. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

■ **Neglect:** Child victims of neglect experienced the greatest rate of placement, with an estimated 23% of substantiated child investigations resulting in children being moved to a placement outside of their home. A child welfare placement (kinship foster care, other family foster care, a group home, or residential/secure treatment) occurred for 14% of all investigations that indicated neglect as the primary substantiated maltreatment, primarily in other family foster care (8%). A child placement in informal kinship care occurred for an additional 9% of cases, while placement was considered for an additional 5%.

■ **Emotional Maltreatment:** Placement in child welfare care (kinship foster care, other family foster care, a group home, or residential/secure treatment) occurred in 10% of cases that identified emotional maltreatment as the primary substantiated maltreatment. An additional 5% of these investigations led to children being placed in informal kinship care, while placement was considered for an additional 5% of cases.

■ **Exposure to Domestic Violence:** Children exposed to domestic violence experienced the lowest rates of placement. Only 2% of investigations where exposure to domestic violence was the primary substantiated maltreatment resulted in child welfare placement (other family foster care). Placement in informal care occurred in an additional 2% of these cases, and was considered in another 2% of cases.

CHILD WELFARE COURT INVOLVEMENT

Application to child welfare court can be made for an order of supervision (child remaining in the home), temporary wardship (for a set time period), or permanent wardship. The CIS-2003 tracked the number of applications made or being considered during the initial investigation, but did not track the types of applications. Workers were also asked to report on whether they had made a referral to mediation or an alternative response. Because applications may have been made at a point following the CIS-2003 study period, the CIS-2003 court involvement figures should be treated as underestimates of the true rate of court involvement. Court status was tracked for three possible worker responses:

- **No Application Considered:** Court involvement was not considered.
- **Application Considered:** The child welfare worker was considering whether or not to submit an application to child welfare court.
- **Application Made:** An application to child welfare court was submitted.

In addition, the CIS-2003 tracked referrals to mediation or alternative response models. These options are not available in all Canadian jurisdictions.

As shown in Table 5-5, 7% of all cases of substantiated child maltreatment (an estimated 7,261 cases) resulted in an application to child welfare court, either during or at the completion of the initial investigation. Applications were considered in an additional 6% of cases. A referral to mediation or an alternative response was made in 4% of all cases of substantiated maltreatment.

■ **Physical Abuse:** Applications to child welfare court were made in 5% of cases where physical abuse was the primary substantiated maltreatment (an estimated 1,350 investigations), and applications were considered for an additional 5%. Referrals to mediation or an alternative response were made in 4% of investigations where substantiated physical abuse was the primary maltreatment.

■ **Sexual Abuse:** Applications to child welfare court were made in 6% of investigations where sexual abuse was the primary substantiated maltreatment, and were considered in an additional 4% of these investigations. Referrals to mediation or an alternative response were made in 1% of investigations where sexual abuse was the primary substantiated maltreatment.

■ **Neglect:** Applications to child welfare court were made in 12% of investigations where neglect was the primary substantiated maltreatment, and were considered in an additional 9%. Referrals to either mediation or an alternative response were made for 4% of investigations with neglect as the primary maltreatment.

■ **Emotional Maltreatment:** An application to child welfare court was made in 8% and considered in an additional 9% of investigations where emotional maltreatment was identified as the primary substantiated maltreatment. A referral to mediation or an alternative response was made in 5% of cases with emotional maltreatment as the primary substantiated maltreatment.

TABLE 5-5: Applications to Child Welfare Court and Mediation/Alternative Response, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

Child Welfare Court*	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Court Considered	89%	22,560	90%	2,640	79%	23,929	83%	12,751	94%	27,464	87%	89,344
Application Considered	5%	1,348	4%	107	9%	2,722	9%	1,384	4%	1,095	6%	6,656
Application Made	5%	1,350	6%	188	12%	3,716	8%	1,216	3%	791	7%	7,261
Total Child Investigations	100%	25,258	100%	2,935	100%	30,367	100%	15,351	100%	29,350	100%	103,261
Mediation/Alternative Response**												
No Mediation/Alternative Response	96%	22,576	99%	2,728	96%	27,403	95%	13,441	96%	25,805	96%	91,953
Referral to Mediation/Alternative Response	4%	940	1%	–	4%	1,154	5%	651	4%	956	4%	3,735
Total Child Investigations	100%	23,516	100%	2,762	100%	28,557	100%	14,092	100%	26,761	100%	95,688

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,658 substantiated child maltreatment investigations with information about Child Welfare Court.

** Based on a sample of 5,302 substantiated child maltreatment investigations with information about Mediation/Alternative Response. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

Exposure to Domestic Violence: An application to child welfare court was made in 3% of investigations where exposure to domestic violence was the primary substantiated maltreatment, and applications were considered in an additional 4%. Referrals to mediation or an alternative response were made in 4% of investigations where exposure to domestic violence was the primary substantiated maltreatment.

POLICE INVOLVEMENT AND CRIMINAL CHARGES

In many jurisdictions in Canada there are detailed protocols between child welfare and police services, resulting in rising levels of co-operation in cases of

physical and sexual abuse, and cases of domestic violence. Most jurisdictions require police to report adult domestic violence cases to the child welfare authorities if children are living in the family. The CIS-2003 captured information about police involvement in adult domestic violence cases and in all other child maltreatment investigations.

As with the other interventions in investigations described in this chapter, the CIS-2003 tracked events that occurred only during the initial child welfare investigation; it is therefore possible that police decided to lay charges or became involved in some cases after the CIS-2003 information forms had been completed. It should also be noted that the police investigate

many reports of non-familial child maltreatment that do not involve child welfare services.⁶⁰

As illustrated in Table 5-6, 19% of substantiated child maltreatment investigations involved a police investigation in addition to a child welfare investigation (an estimated 19,426 investigations). Criminal charges were laid in 5% of substantiated child maltreatment investigations and were considered for an additional 2%.

Physical Abuse: A police investigation for child maltreatment occurred in 29% of cases where physical abuse was identified as the primary substantiated maltreatment (an estimated 7,166 investigations).

⁶⁰ See, for example, Trocmé, N. and Brison, R. (1998). Homicide and injuries due to assault and to abuse and neglect. In Beaulne, G. (Ed.). *For the safety of Canadian children and youth: from data to prevention measures*. Ottawa: Health Canada.

Charges were laid for 8% of these and considered for an additional 6% at the end of the initial child welfare investigation. The police investigated but did not lay charges in an additional 15% of cases that indicated physical abuse as the primary substantiated maltreatment.

■ **Sexual Abuse:** Out of all cases that indicated sexual abuse as the primary substantiated maltreatment, 63% involved a police investigation for child maltreatment (an estimated 1,848 investigations). Charges were laid for 39%, and charges were considered for an additional 11%. The police investigated but did not lay charges in 13% of these cases.

■ **Neglect:** Of all cases with neglect as the primary substantiated maltreatment, 17% included a police investigation (an estimated 5,349 cases). Charges were laid in 3% of cases, and charges were considered in 1%. The police investigated but did not lay charges in 13% of cases that indicated neglect as the primary substantiated maltreatment.

■ **Emotional Maltreatment:** A police investigation for child maltreatment was conducted in 14% of investigations where emotional maltreatment was identified as the primary substantiated concern. Charges were laid in 2% of cases, and in a further

12% the police investigated but did not consider laying or lay charges.

■ **Exposure to Domestic Violence:** Of all cases that identified exposure to domestic violence as the primary concern, 9% resulted in a police investigation for maltreatment (an estimated 2,806 investigations). Charges were laid in 2% of these cases, while police investigated but did not lay charges in a further 7% of cases. It is important to note that many cases of exposure to domestic violence included police investigations specific to the domestic violence, but not to the question of child exposure to the violence as a form of maltreatment.

TABLE 5-6 Police Investigations and Charges Laid, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Police Investigation	72%	18,077	37%	1,087	82%	25,018	85%	13,099	90%	26,564	81%	83,845
Police Investigation, No Charges Laid	15%	3,811	13%	390	13%	3,979	12%	1,898	7%	2,122	12%	12,200
Police Investigation, Charges Considered	6%	1,395	11%	326	1%	344	0%	–	0%	130	2%	2,263
Police Investigation, Charges Laid	8%	1,960	39%	1,132	3%	1,026	2%	291	2%	554	5%	4,963
Total Child Investigations*	100%	25,243	100%	2,935	100%	30,367	100%	15,356	100%	29,370	100%	103,271

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,658 substantiated child maltreatment investigations with information about police investigations and police charges. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

Chapter 6

CHILD CHARACTERISTICS

This chapter describes children investigated for reported maltreatment by age, sex, functioning, and Aboriginal status in the five primary categories of maltreatment (physical abuse, sexual abuse, neglect, emotional maltreatment, and exposure to domestic violence).

Most tables present estimates for Canada excluding Quebec. Supplementary tables including Quebec are provided where comparable data from Quebec were available (please see Chapter 2 for a discussion of data from Quebec). Selected comparisons with the findings from the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998) (excluding Quebec) are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 in a sample of Canadian child welfare agencies. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates **do not include:**

- (1) incidents that were not reported to child welfare services;
- (2) reported cases that were screened out by child welfare services before being fully investigated;

- (3) new reports on cases already open by child welfare services; or
- (4) cases that were investigated only by the police.

AGE AND SEX OF INVESTIGATED CHILDREN

Table 6-1 presents the age and sex of investigated children and the incidence of substantiated maltreatment by age and sex. The incidence of substantiated maltreatment was nearly identical for males (21.64 per 1,000 males) and females (21.79 per 1,000 females). As with investigations, there was some variation by age and sex, with incidence rates being highest for infants (27.32 substantiated cases per 1,000 female infants and 29.07 per 1,000 infant males). Rates of maltreatment were similar for boys and girls up to 7 years old; however, there were more males among 8 to 11 year olds, and more females in the adolescent group (12 to 15 year olds). For age and sex information for substantiated child maltreatment in all of Canada in 2003, please see Appendix I: Table 6.

Table 6-2 presents estimates from the 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003) for investigations involving adolescents over 15 years of age (see Chapter 1, Table 1-2). There were an estimated 6,922 investigations involving

youth over 15 years of age in the four provinces and one territory with legislation that protects children aged 16, 17 and 18.⁶¹ The incidence of investigation ranged from no investigations among 18-year-old males to 38.80 investigations per 1,000 children among 16-year-old females. Females were involved in investigations more often than their male peers (28.43 investigations per 1,000 children versus 20.13 investigations per 1,000 children). Cases involving female subjects were more often substantiated than those involving males (70% versus 62%).

Table 6-3 presents the age and sex of children by the primary substantiated categories of maltreatment.

■ **Physical Abuse:** In cases where physical abuse was the primary substantiated maltreatment (an estimated 25,256), 54% involved males and 46% involved females (an estimated 11,561). The larger number of males is particularly noteworthy among 8 to 11 year olds; for this age group, an estimated 5,531 cases of substantiated maltreatment involved males, compared with an estimated 3,137 involving females. By adolescence this comparison is reversed: 54% of cases of substantiated maltreatment involved females aged 12 to 15 years, and 46% involved males.

⁶¹ The provinces and territory with mandates to protect children beyond the age of 15 are Quebec, Manitoba, Alberta, British Columbia and the Yukon.

TABLE 6-1 Child Age and Sex in Investigated and Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003

		Investigated Maltreatment*		Substantiated Maltreatment**	
		Number of Investigations	Incidence per 1,000 Children	Number of Substantiated Cases	Incidence per 1,000 Children
Birth-15 Years	All Children	217,322	45.68	103,298	21.71
	Females	104,246	44.95	50,533	21.79
	Males	113,076	46.37	52,765	21.64
Birth-3 Years	Females	23,303	45.78	11,219	22.04
	Males	25,058	47.05	11,590	21.76
< 1 Year	Females	6,431	53.23	3,301	27.32
	Males	7,600	59.90	3,688	29.07
1 Year	Females	5,014	39.19	2,295	17.94
	Males	4,749	35.50	2,343	17.51
2 Years	Females	6,175	48.07	3,039	23.66
	Males	6,378	47.40	2,636	19.59
3 Years	Females	5,683	43.12	2,584	19.61
	Males	6,331	46.10	2,923	21.28
4-7 Years	Females	25,697	45.00	12,242	21.44
	Males	29,392	48.78	12,810	21.26
4 Years	Females	6,111	45.03	2,570	18.94
	Males	7,346	51.29	3,029	21.15
5 Years	Females	7,105	49.56	3,645	25.42
	Males	7,145	47.54	3,293	21.91
6 Years	Females	6,516	44.81	3,329	22.89
	Males	7,443	48.24	3,098	20.08
7 Years	Females	5,965	40.71	2,698	18.41
	Males	7,458	48.19	3,390	21.90
8-11 Years	Females	26,984	43.52	13,020	21.00
	Males	33,751	51.77	16,499	25.31
8 Years	Females	7,551	50.29	3,641	24.25
	Males	8,718	55.21	4,528	28.67
9 Years	Females	7,240	46.82	3,517	22.74
	Males	8,619	53.36	4,293	26.58
10 Years	Females	6,021	38.54	2,924	18.71
	Males	8,578	51.91	3,827	23.16
11 years	Females	6,172	38.81	2,938	18.47
	Males	7,836	46.85	3,851	23.02
12-15 Years	Females	28,262	45.65	14,052	22.70
	Males	24,875	38.18	11,866	18.21
12 Years	Females	5,986	38.65	3,045	19.66
	Males	6,833	42.07	3,071	18.91
13 Years	Females	7,484	49.19	3,654	24.01
	Males	7,082	44.30	3,453	21.60
14 Years	Females	7,473	48.24	3,511	22.66
	Males	5,953	36.63	2,802	17.24
15 Years	Females	7,319	46.59	3,842	24.46
	Males	5,007	30.02	2,540	15.23

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on 11,562 child maltreatment investigations.

** Based on 5,660 substantiated child maltreatment investigations.

TABLE 6-2 Child Age and Sex for Children Over 15 in Provinces/Territories with Protection Mandates for Children Over 15, by Incidence of Investigated Child Maltreatment, and by Level of Substantiation, in Canada in 2003

	Total Investigations*	Incidence per 1,000 Children	Level of Substantiation			Total
			Substantiated	Suspected	Unsubstantiated	
Total Children > 15 Years	6,922	24.16	66%	9%	24%	100%
Females > 15 Years	3,956	28.43	70%	11%	19%	100%
Males > 15 Years	2,966	20.13	62%	7%	32%	100%
16 Years of Age	4,018	34.42	64%	9%	27%	100%
Females 16 Years	2,196	38.80	67%	9%	24%	100%
Males 16 years	1,822	30.29	60%	10%	29%	100%
17 Years of Age	2,800	24.15	68%	10%	22%	100%
Females 17 Years	1,656	29.36	71%	15%	14%	100%
Males 17 Years	1,144	19.21	64%	1%	35%	100%
18 Years of Age	104	1.93	97%	3%	0%	100%
Females 18 Years	104	3.98	97%	3%	0%	100%
Males 18 Years		–	0%	0%	0%	0%

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 345 child maltreatment investigations, excluding child maltreatment investigations involving Aboriginal children. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Rows may add up to 99% or 101% because of rounding. This included Alberta, Manitoba, Quebec and Yukon Territory with legislation for children ages 16 and 17, and British Columbia for children ages 16, 17 and 18.

■ **Sexual Abuse:** In cases where sexual abuse was indicated as the primary substantiated maltreatment, 63% (an estimated 1,859) involved female children, and 37% (an estimated 1,075) involved males. The proportion of males to females varies considerably by age group. There were approximately the same number of male and female victims under 8 years of age, with slightly more males in the 4 to 7 age group and slightly more females in the group up to 3 years of age. Females, however, constituted 62% of the victims aged 8 to 11 years and 79% of the adolescent victims.

■ **Neglect:** In cases with neglect as the primary substantiated maltreatment, 52% (an estimated 15,736) involved male children, and 48% (an estimated 14,630) involved females. The proportion of males is higher for children up to 3 years of age (58%) and 8 to 11 years of age (55%), while more females are in the groups aged 4 to 7 (54%) and 12 to 15 (52%).

■ **Emotional Maltreatment:** In cases where emotional maltreatment was identified as the primary substantiated maltreatment, 54% (an estimated 8,262) involved female children, and 46% involved males

(an estimated 7,107). There are more males in the 8 to 11 age group (53%), but more females in the groups aged up to 3 years (56%), 4 to 7 years (56%), and 12 to 15 years (57%).

■ **Exposure to Domestic Violence:** In cases where exposure to domestic violence was the primary substantiated maltreatment, 52% involved males (an estimated 15,151), and 48% involved females (an estimated 14,219). There were approximately equal numbers of males and females in all age groups except in the group aged 4 to 7, where 55% were males and 45% were females.

TABLE 6-3 Age and Sex of Investigated Children, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment							Total				
	Physical Abuse	Sexual Abuse	Neglect	Emotional Maltreatment	Exposure to Domestic Violence							
Birth-3 Years	2,255	215	7,480	3,524	9,334		22,808					
Female	57%	1,293	53%	115	42%	3,167	56%	1,974	50%	4,670	49%	11,219
Male	43%	962	47%	100	58%	4,313	44%	1,550	50%	4,664	51%	11,589
4-7 Years	5,235	740	7,289	3,547	8,241		25,052					
Female	43%	2,257	47%	345	54%	3,950	56%	1,975	45%	3,715	49%	12,242
Male	57%	2,978	53%	395	46%	3,339	44%	1,572	55%	4,526	51%	12,810
8-11 Years	8,668	962	8,230	4,171	7,488		29,519					
Female	36%	3,137	62%	595	45%	3,662	47%	1,977	49%	3,648	44%	13,019
Male	64%	5,531	38%	367	55%	4,568	53%	2,194	51%	3,840	56%	16,500
12-15 Years	9,098	1,017	7,367	4,127	4,307		25,916					
Female	54%	4,874	79%	804	52%	3,851	57%	2,336	51%	2,186	54%	14,051
Male	46%	4,224	21%	213	48%	3,516	43%	1,791	49%	2,121	46%	11,865
Total	25,256	2,934	30,366	15,369	29,370		103,295					
Female	46%	11,561	63%	1,859	48%	14,630	54%	8,262	48%	14,219	49%	50,531
Male	54%	13,695	37%	1,075	52%	15,736	46%	7,107	52%	15,151	51%	52,764

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about child age and sex. Columns may add up to 99% or 101% because of rounding.

CHILD FUNCTIONING

Child functioning was documented using a checklist of problems that child welfare workers were likely to discover through their investigations. The child functioning checklist (see Appendix D, Maltreatment Assessment Form) was developed in consultation with child welfare workers and researchers to reflect the types of concerns that could be identified during an investigation.

The checklist is not a validated measurement instrument for which population norms have been established;⁶² it documents only those problems that child welfare workers became aware of during their investigations and therefore undercounts the occurrence of child functioning problems.⁶³ Nevertheless, it provides an illustration of the types of concerns identified during child maltreatment investigations.

Investigating workers were asked to indicate problems that had been confirmed by a formal diagnosis and/or directly observed, and suspected problems that could not be fully verified during the investigations.⁶⁴ The six-month period before the investigation was used as a reference point for noting the concern, where applicable. Child functioning classifications that reflect physical, emotional, cognitive, and

⁶² Several child functioning measures with established norms exist; however, these are not consistently used in child welfare settings and could not be feasibly used in the context of the CIS.

⁶³ Although child welfare workers assess the safety of children, they do not routinely conduct a detailed assessment of child functioning. Items on the checklist included only issues that workers happened to become aware of during their investigations. A more systematic assessment would therefore likely lead to the identification of more issues than those noted by workers during the CIS.

⁶⁴ This report refers to both confirmed and suspected problems as “indicated.”

behavioural issues were included on a checklist, which included the following categories:

- **Depression or Anxiety:** Feelings of depression or anxiety that persist for most of every day for two weeks or longer, and interfere with the child's ability to manage at home and at school.
- **Attention Deficit Disorder (ADD)/ Attention Deficit Hyperactivity Disorder (ADHD):** Distractibility; impulsivity; hyperactivity. These behaviours are very noticeable, occur over a long period of time in many situations, and are troublesome to others.
- **Negative Peer Involvement:** Child has been involved in high risk peer activities such as gang activities, graffiti or vandalism.
- **Alcohol Abuse:** Child has problematic consumption of alcohol (consider age, frequency, and severity).
- **Drug/Solvent Abuse:** Child has used prescription drugs, illegal drugs, or solvents.
- **Self-harming Behaviour:** Child has engaged in high risk or life threatening behaviour such as suicide attempts, physical mutilation, or cutting.
- **Violence Towards Others:** Child has displayed aggression and violence toward other children or adults.
- **Running (One Incident):** Child has run away from home (or other residence) on one occasion, for at least one overnight period.
- **Running (Multiple Incidents):** Child has run away from home (or other residence) on more than one occasion for at least one overnight period.
- **Inappropriate Sexual Behaviour:** Child has been involved in inappropriate sexual behaviour.
- **Other Emotional or Behavioural Problem:** Child has significant emotional or behavioural problems other than those described above.
- **Learning Disability:** Child has identified learning deficits in one or more areas of mental functioning (e.g., language usage, numbers, speech, reading, word comprehension).
- **Specialized Education Services:** Child has been involved in special education program for learning disability, special needs, or behaviour problems.
- **Irregular School Attendance:** Child has shown irregular attendance and truancy (more than 5 days/month).
- **Developmental Delay:** Child has delayed intellectual development. Typically it is diagnosed when a child does not reach his/her developmental milestones at expected times. It includes speech and language development, fine and gross motor skills and/or personal and social skills.
- **Physical Disability:** Child has a long-lasting condition that substantially limits one or more basic physical activities, such as walking, climbing stairs, reaching, lifting, or carrying. This includes sensory disability conditions, such as blindness, deafness or a severe vision or hearing impairment that noticeably affects activities of daily living.
- **Substance Abuse-related Birth Defect:** Child has a diagnosis or indication of birth defect(s) related to substance abuse by the biological parent (e.g., Fetal Alcohol Syndrome (FAS)/Fetal Alcohol Effect (FAE), cocaine addiction, or solvent abuse).
- **Positive Toxicology at Birth:** The child, at birth, tests positive for the presence of drugs or alcohol.
- **Other Health Condition:** Child has ongoing physical health condition (e.g., chronic disease, and frequent hospitalization).
- **Psychiatric Disorder:** Child has diagnosis of psychiatric disorder by a psychiatrist (e.g., conduct disorder, anxiety disorder).
- **Youth Criminal Justice Act Involvement:** Child has been involved in charges, incarceration, or alternative measures with the youth justice system.
- **Other:** Any other conditions related to child functioning.

Child functioning was documented using a checklist of problems that child welfare workers were likely to discover through their investigations. The child functioning checklist was developed in consultation with child welfare workers and researchers to reflect the types of concerns that could be identified during an investigation.

Tables 6-4(a) and 6-4(b) reflect problems associated with physical, emotional, and/or cognitive health, or with behaviour-specific concerns. In 50% of investigations in which maltreatment was substantiated (an estimated 51,390), at least one child functioning issue was indicated by the investigating worker.

Table 6-4(a) presents child functioning characteristics that affect the physical, emotional, and cognitive health of children by the primary category of substantiated maltreatment. In 34%

of substantiated maltreatment investigations (an estimated 34,876) at least one child functioning issue was reported regarding the physical, emotional, and/or cognitive health of the child. Depression or anxiety was most frequently reported (reported in 17% of investigations in which maltreatment was substantiated), followed by learning disability (15% of investigations); 12% of all cases of substantiated maltreatment involved children placed in special education programs, and 10% involved children with a developmental

delay. Self-harming behaviours, psychiatric disorders, and other health conditions were each noted in 4% of cases of substantiated maltreatment.

The behavioural functioning classifications are presented in Table 6-4(b) by primary category of substantiated maltreatment. In 40% of the investigations (an estimated 41,564) at least one behavioural functioning issue was reported. Most frequently reported was “other emotional or behavioural problem” (27% of cases of substantiated maltreatment), followed by irregular

TABLE 6-4(a) Child Functioning (Physical, Emotional, and Cognitive) by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Physical, Emotional, and Cognitive Health												
Developmental Delay	11%	2,794	4%	105	15%	4,589	11%	1,640	4%	1,273	10%	10,401
Learning Disability	18%	4,533	9%	260	20%	6,191	19%	2,967	6%	1,709	15%	15,660
Physical Disability	3%	676	0%	–	3%	782	2%	228	1%	362	2%	2,056
Substance Abuse-Related Birth Defect	1%	331	2%	–	5%	1,585	5%	737	1%	165	3%	2,876
Other Health Condition	3%	751	2%	–	7%	2,035	6%	888	3%	738	4%	4,474
Specialized Education Services	15%	3,822	6%	179	15%	4,678	13%	1,915	5%	1,489	12%	12,083
Depression or Anxiety	18%	4,448	28%	828	16%	4,709	28%	4,233	13%	3,749	17%	17,967
Self-harming Behaviour	5%	1,274	7%	199	5%	1,603	8%	1,164	1%	299	4%	4,539
Psychiatric Disorder	5%	1,285	3%	100	5%	1,441	5%	821	1%	299	4%	3,946
Positive Toxicology at Birth	1%	121	1%	–	2%	604	2%	292	0%	–	1%	1,122
Any Physical, Emotional or Cognitive Health Issue	38%	9,546	35%	1,021	38%	11,629	43%	6,644	21%	6,036	34%	34,876
Total Child Investigations*		25,257		2,936		30,367		15,369		29,369		103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about Child Functioning. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total.

school attendance (13%), negative peer involvement (13%), ADD/ADHD (13%), and violence toward others (11%). It is important to note that these ratings are based on the initial intake investigations and do not capture behaviours that may become concerns after that time.

■ **Physical Abuse:** In cases where physical abuse was identified as the primary substantiated maltreatment, the most common child functioning issues were other emotional or behavioural problem (36%), negative peer involvement (19%),

ADD/ADHD (19%), violence toward others (19%), depression or anxiety (18%), and learning disability (18%). Physical, emotional, or cognitive health issues were reported in 38% of these physical abuse investigations, involving an estimated 9,546 child investigations, and behavioural issues were indicated in 52% of investigations (an estimated 13,026).

■ **Sexual Abuse:** In cases where sexual abuse was the primary substantiated maltreatment, the most common child functioning issues were “other

emotional or behavioural problems” (32%), inappropriate sexual behaviour (30%), depression or anxiety (28%), irregular school attendance (16%), negative peer involvement (15%), and running away from home (8%). Overall, physical, emotional, or cognitive health issues were reported in 35% of investigations in which sexual abuse was substantiated (an estimated 1,021 child investigations), and behavioural issues were indicated in 45% (an estimated 1,329).

TABLE 6-4(b) Child Functioning (Behavioural) by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence				
Behavioural Functioning													
Negative Peer Involvement	19%	4,797	15%	434	18%	5,424	14%	2,143	3%	908	13%	13,706	
Alcohol Abuse	4%	1,051	4%	101	7%	2,218	4%	548	0%	114	4%	4,032	
ADD/ADHD	19%	4,669	6%	176	14%	4,177	15%	2,312	6%	1,794	13%	13,128	
Drug/Solvent Abuse	4%	1,082	4%	122	9%	2,614	4%	661	1%	141	5%	4,620	
Violence Towards Others	19%	4,763	8%	218	12%	3,633	12%	1,894	4%	1,213	11%	11,721	
Running Away	8%	1,944	8%	223	9%	2,671	6%	951	1%	223	6%	6,012	
Irregular School Attendance	10%	2,525	16%	471	24%	7,272	15%	2,282	4%	1,104	13%	13,654	
Inappropriate Sexual Behaviour	5%	1,352	30%	869	6%	1,927	3%	469	0%	384	5%	5,001	
Youth Criminal Justice Act Involvement	2%	612	2%	–	5%	1,362	2%	247	0%	–	2%	2,310	
Other Behavioural or Emotional Problems	36%	9,082	32%	926	24%	7,400	36%	5,511	17%	4,843	27%	27,762	
Any Behavioural Issue	52%	13,026	45%	1,329	44%	13,238	49%	7,469	22%	6,502	40%	41,564	
Any Child Functioning Issue	60%	15,141	55%	1,612	54%	16,395	58%	8,917	32%	9,325	50%	51,390	
Total Child Investigations*		25,257		2,936		30,367		15,369		29,369		103,298	

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about Child Functioning. Total of any child functioning issue is less than the sum of any physical, emotional or cognitive health issues plus any behavioural issue because of multiple responses for Child Functioning categories. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total.

■ **Neglect:** In cases where neglect was identified as the primary substantiated maltreatment, the most common child functioning issues were irregular school attendance (24%), other emotional or behavioural problem (24%), learning disability (20%), negative peer involvement (18%), and depression or anxiety (16%). Overall, physical, emotional, or cognitive health issues were reported in 38% of these cases, involving an estimated 11,629 investigations. Behavioural issues were indicated in 44% of investigations (an estimated 13,238).

■ **Emotional Maltreatment:** In cases where emotional maltreatment was indicated as the primary substantiated maltreatment, the most common child functioning concerns were other emotional or behavioural problem (36%), depression or anxiety (28%), learning disability (19%), irregular school attendance (15%), and ADD/ADHD (15%). Physical, emotional, or cognitive health issues were reported in 43% of cases (an estimated 6,644 child investigations), and behavioural issues were indicated in 49% (an estimated 7,469) of these investigations.

■ **Exposure to Domestic Violence:** In cases indicating exposure to domestic violence as the primary substantiated maltreatment, the most commonly indicated child functioning issues were other emotional or behavioural problem (17%), depression or anxiety (13%), ADD/ADHD (6%), learning disability (6%), and specialized education

services (5%). Physical, emotional, or cognitive health issues were reported in 21% of exposure to domestic violence investigations (an estimated 6,036 child investigations), and behavioural issues were indicated in 22% (an estimated 6,502).

ABORIGINAL HERITAGE OF INVESTIGATED CHILDREN

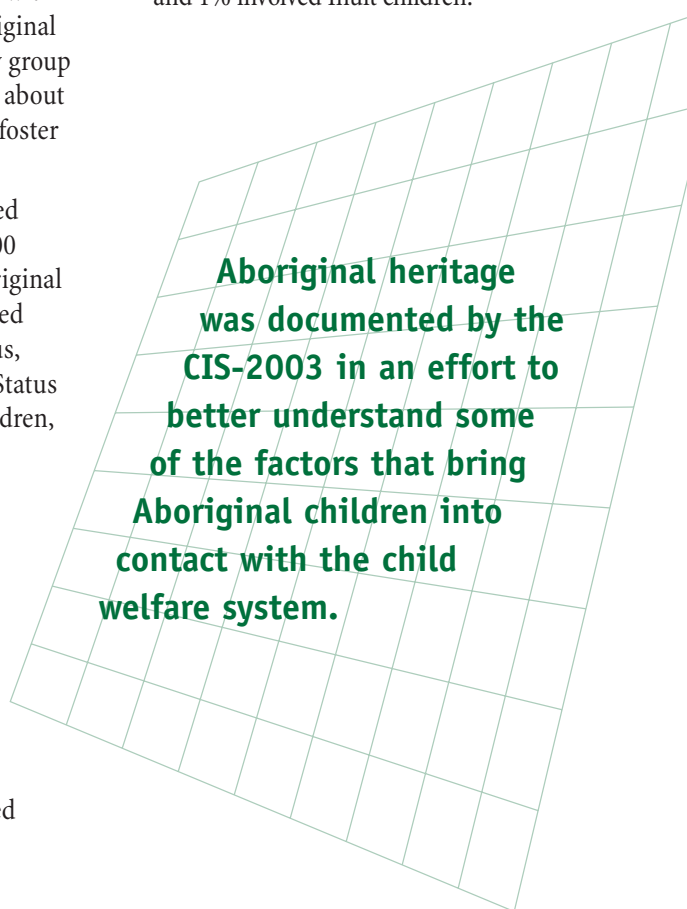
Aboriginal heritage was documented by the CIS-2003 in an effort to better understand some of the factors that bring Aboriginal children into contact with the child welfare system.⁶⁵ Aboriginal children were identified as a key group to examine because of concerns about their over-representation in the foster care system.⁶⁶

Of the total cases of substantiated maltreatment, 15% (about 15,000 cases) involved children of Aboriginal heritage (Table 6-5): 10% involved children with First Nations status, 2% involved First Nations Non-Status children, 2% involved Metis children, and 1% involved Inuit children.

■ **Physical Abuse:** Of cases where physical abuse was the primary substantiated maltreatment, 6% involved children of Aboriginal heritage; 4% involved children with First Nations Status, 1% involved First Nations Non-Status children, and an additional 1% involved Metis children.

■ **Sexual Abuse:** In cases that indicated sexual abuse as the primary substantiated maltreatment, 9% involved children of Aboriginal heritage; 7% involved children with First Nations Status, 1% involved Metis children, and an additional 1% involved Inuit children.

■ **Neglect:** In cases where neglect was the primary substantiated maltreatment, 27% involved children of Aboriginal heritage; 20% involved children with First Nations Status, 3% involved First Nations Non-Status children, 3% involved Metis children, and 1% involved Inuit children.



Aboriginal heritage was documented by the CIS-2003 in an effort to better understand some of the factors that bring Aboriginal children into contact with the child welfare system.

⁶⁵ The CIS-2003 collected information about eight other ethno-cultural groups, but the number of cases sampled for most groups was too low to allow for inclusion in this report.

⁶⁶ See Armitage, A. (1993). Family and child welfare in first nation communities. In: Wharf, B., (Ed). *Rethinking child welfare in Canada*. Toronto: McClelland & Stewart, 131-170.

McKenzie, B., Seidl, E., et al. (1995). Child welfare standards in First Nations. In: Hudson, J. and Galaway B. (Eds). *Child welfare in Canada: research and policy implications*. Toronto: Thompson Educational Press, 54-65.

TABLE 6-5 Aboriginal Heritage of Investigated Children by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Not Aboriginal	94%	23,687	91%	2,681	73%	22,121	89%	13,632	89%	26,095	85%	88,216
First Nations, Status	4%	1,082	7%	200	20%	5,909	6%	1,027	6%	1,878	10%	10,096
First Nations, Non-Status	1%	180	0%	-	3%	923	3%	405	2%	497	2%	2,016
Metis	1%	136	1%	-	3%	947	1%	182	1%	512	2%	1,796
Inuit	0%	-	1%	-	1%	355	0%	-	1%	220	1%	769
Other	0%	-	0%	-	0%	111	0%	-	1%	168	0%	395
Total Child Investigations*	100%	25,257	100%	2,935	100%	30,366	100%	15,360	100%	29,370	100%	103,288

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about Aboriginal status of investigated child. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Column percentages may add up to 99% or 101% because of rounding.

■ **Emotional Maltreatment:** In cases that indicated emotional maltreatment as the primary substantiated maltreatment, 10% involved children of Aboriginal heritage; 6% involved children with First Nations Status, 3% involved First Nations Non-Status children, and 1% involved Metis children.

■ **Exposure to Domestic Violence:** In cases where exposure to domestic violence was the primary substantiated maltreatment, 11% involved children of Aboriginal heritage. These cases involved children with First Nations Status (6%), First Nations Non-Status children (2%), Metis children (1%), Inuit children (1%), and children with other Aboriginal status (1%).

SERVICE DISPOSITIONS FOR ABORIGINAL AND NON-ABORIGINAL CHILDREN

Data comparing service dispositions for Aboriginal and non-Aboriginal children are presented in Table 6-6. Aboriginal children experience higher rates of ongoing service, child welfare court intervention, and placement than non-Aboriginal children.

Ongoing Services: In cases of substantiated child maltreatment involving Aboriginal children, 63% of children received ongoing services (an estimated 9,677 children) compared with 41% of non-Aboriginal children involved in cases of substantiated maltreatment.

Child Welfare Court Application: Child welfare court applications were made in 12% of cases of substantiated

child maltreatment involving Aboriginal children (an estimated 1,830 cases), but only in 6% of cases involving non-Aboriginal children. In all, 20% of cases of substantiated maltreatment involving Aboriginal children either were considered for child welfare court or were the subject of a court application.

Placement: Aboriginal children experienced higher rates of informal and formal child welfare placement at the conclusion of substantiated maltreatment investigations. Informal kinship care placements resulted from 11% of investigations involving Aboriginal children and 4% of those involving non-Aboriginal children. Child welfare placements resulted from 6% of investigations involving non-Aboriginal children, and 17% of cases involving Aboriginal children.

TABLE 6-6 Service Dispositions for Aboriginal and Non-Aboriginal Children in Substantiated Child Maltreatment Investigations, in Canada, Excluding Quebec, in 2003

	Aboriginal		Non-Aboriginal		Total	
	%	Number of Child Investigations	%	Number of Child Investigations		
Case to Stay Open for Ongoing Services	63%	9,677	41%	36,208	44%	45,885
Child Welfare Court						
Court Application Considered	8%	1,208	6%	5,446	6%	6,654
Court Application Made	12%	1,830	6%	5,430	7%	7,260
Placement						
No Placement	67%	10,267	86%	75,466	83%	85,733
Placement Considered	4%	660	4%	3,323	4%	3,983
Informal Kinship Care	11%	1,751	4%	3,498	5%	5,249
Child Welfare Placement	17%	2,595	6%	5,668	8%	8,263
Total Child Investigations*		15,272		88,025		103,297

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about Aboriginal status of investigated child.

Chapter 7

HOUSEHOLD CHARACTERISTICS

This chapter provides an overview of the characteristics of the households of investigated children tracked by the 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003). Household characteristics include household composition, ages of mothers and fathers, sibling information, housing information, source of household income, parental functioning, and family stressors. For the purpose of the CIS-2003, a household was defined as the primary residence of the child when the investigation was initiated. The findings are presented by the primary form of substantiated maltreatment.

All tables in this chapter present estimates for Canada excluding Quebec (please see Chapter 2 for discussion of data from Quebec). Selected comparisons with the findings from the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998) (excluding Quebec) are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 in a sample of Canadian child welfare services. The

sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates **do not include:**

- (1) incidents that were not reported to child welfare services;
- (2) reported cases that were screened out by child welfare services before being fully investigated;
- (3) new reports on cases already open by child welfare services; or
- (4) cases that were investigated only by the police.

PARENTS AND CAREGIVERS IN THE HOME

The CIS-2003 gathered information on up to two of the child's parents or caregivers.⁶⁷ For each listed caregiver, investigating workers were asked to choose the category that best described the relationship between the caregiver and the children in the home. If a caregiver was a biological parent to one child and a step-parent to another, workers were asked to use "step-parent" to describe that caregiver.⁶⁸ If recent

household changes had occurred, investigating workers were asked to describe the situation at the time of the referral.

Table 7-1 describes the parents and other caregivers of investigated children by primary form of substantiated maltreatment. Of all cases of substantiated maltreatment, 32% involved children who lived with both biological parents, and 16% involved children who lived in a two-parent blended family in which one caregiver was a step-parent, a common law partner, or an adoptive parent who was not the biological parent of at least one child in the family. An additional 4% involved a biological parent living with another adult (e.g., child's grandparent, aunt, uncle) who also acted as a caregiver to the child. A total of 43% of cases of substantiated maltreatment involved children who lived in a family led by a lone parent (39% by a female parent and 4% by a male parent), and 5% involved households with other compositions. In comparison, the 2001 census showed that 78% of families with children under the age of 17 were led by two parents and 18% were led by lone female parents.⁶⁹

⁶⁷ The two caregiver limit was required to accommodate the restricted length of the Household Information Sheet. The caregiver information usually corresponded to the parents and/or step-parents living in the home; if there was only one caregiver living in the home and a second living outside the home, information was gathered on both of these, but is not reported here.

⁶⁸ This compromise was needed because the Household Information Sheet gathered information on all children in the family. Had the CIS-2003 gathered child specific caregiver information, a significantly longer form would have been required. Child specific information on the caregiver child relationship is available for caregivers who were investigated as alleged perpetrators (see Chapter 4).

⁶⁹ Canada. Statistics Canada. *Census of Canada, 2001: Age groups of children at home and family structure for census families in private households for Census Divisions and subdivisions* [computer file]. Ottawa: Ont.: Statistics Canada [producer and distributor], October 22, 2002 (95F0313XCB01064).

TABLE 7-1 Household Structure, by Primary Category of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Two Parent-Biological	35%	8,770	34%	1,010	28%	8,484	26%	3,983	36%	10,710	32%	32,957
Two Parent-Blended/Step	20%	4,965	13%	376	14%	4,301	15%	2,307	15%	4,296	16%	16,245
Biological Parent and Other	3%	874	2%	–	5%	1,533	4%	583	2%	461	4%	3,493
Lone Mother	30%	7,597	40%	1,175	42%	12,724	42%	6,540	43%	12,716	39%	40,752
Lone Father	4%	1,118	4%	122	5%	1,524	6%	878	3%	776	4%	4,418
Other	8%	1,931	7%	211	6%	1,801	7%	1,079	1%	411	5%	5,433
Total Child Investigations*	100%	25,255	100%	2,936	100%	30,367	100%	15,370	100%	29,370	100%	103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about household structure. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

■ **Physical Abuse:** In investigations where physical abuse was the primary form of substantiated maltreatment, 55% involved children in two-parent households (35% in households with two biological parents and 20% in two-parent blended households), 30% involved children in lone female-parent households, and 4% involved children in lone male-parent households.

■ **Sexual Abuse:** In investigations where sexual abuse was the primary form of substantiated maltreatment, 47% involved children in two-parent households (34% in households with two biological parents and 13% in two-parent blended households), 40% involved children in lone female-parent households, and 4% involved children in lone male-parent households.

■ **Neglect:** In investigations where neglect was the primary form of substantiated maltreatment, 47% involved lone parent households⁷⁰ (42% lone female-parent households and 5% lone male-parent households), 28% involved children from households with two biological parents, and 14% involved two-parent blended families. It should be noted that lone parent families are at higher risk of living in poverty, and that poverty, rather than family structure, could place these families at such high risk of being reported for alleged maltreatment.

■ **Emotional Maltreatment:** In investigations where emotional maltreatment was the primary form of substantiated maltreatment,

41% involved children in two-parent households (26% in households with two biological parents and 15% in two-parent blended families), 42% involved children in lone female-parent households, and 6% involved children in lone male-parent households.

■ **Exposure to Domestic Violence:** In investigations where exposure to domestic violence was the primary form of substantiated maltreatment, 51% involved children living in two-parent households (36% with two biological parents and 15% in two-parent blended households), and 43% involved children living in lone female-parent households.

⁷⁰ See Source of Income section in this chapter. Also see the following:

Chamberland, C., Bouchard, C., et al. (1986). Conduites abusives envers les enfants: Réalités canadiennes et américaines. *Canadian Journal of Behavioural Science*, 8(4):391-412.

Drake, B., and Pandey, S. (1996). Understanding the relationship between neighbourhood poverty and specific types of child maltreatment. *Child Abuse & Neglect*, 20(11): 1003-18.

Garbarino, J., and Sherman, D. (1980). High-risk neighbourhoods and high-risk families: The human ecology of child maltreatment. *Child Development*, 51(1):188-98.

Mayer, M. (1995). *Contextes écologiques d'incidence de trois types de mauvais traitements à l'égard des enfants signalés dans la région de Montréal*. Montreal: Université de Montréal, Sciences humaines appliquées.

AGE OF PRIMARY CAREGIVER(S)

Investigating workers were asked to indicate the age of up to two caregivers for each household. Ten age groups were listed on the Household Information Sheet, enabling workers to estimate the

ages of the caregivers (see Appendix D, CIS Maltreatment Assessment Form). Table 7-2(a) shows the age distribution of female caregivers (for an estimated 95,015 cases of substantiated maltreatment) and Table 7-2(b) the age distribution of male caregivers (for an estimated 56,103 cases of substantiated

maltreatment). The categories of female caregivers and male caregivers include biological parents, common law partners, step-parents, foster parents, and adoptive parents. Of the cases of substantiated maltreatment involving children living with female caregivers, almost two-thirds (64%) involved

TABLE 7-2(a) Age of Female Caregivers* by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Less than 19	1%	111	0%	–	1%	431	1%	–	1%	310	1%	951
19-21	1%	339	0%	–	4%	1,011	6%	889	5%	1,539	4%	3,787
22-25	6%	1,429	11%	306	14%	3,763	9%	1,194	12%	3,357	11%	10,049
26-30	16%	3,763	22%	602	21%	5,781	17%	2,299	25%	7,059	20%	19,504
31-40	53%	12,369	49%	1,332	45%	12,098	47%	6,347	46%	13,136	48%	45,282
Over 40	23%	5,312	18%	474	15%	3,972	20%	2,744	11%	2,940	16%	15,442
Total Child Investigations**	100%	23,323	100%	2,723	100%	27,056	100%	13,572	100%	28,341	100%	95,015

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Includes biological mothers, stepmothers, female common-law partners, adoptive mothers and foster mothers living with the child.

** Based on a sample of 5,202 substantiated child maltreatment investigations with information about mother's age. Columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

TABLE 7-2(b) Age of Male Caregivers* by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Less than 19	0%	–	0%	–	1%	122	0%	–	0%	–	0%	204
19-21	0%	–	0%	–	1%	124	1%	–	2%	285	1%	496
22-25	4%	558	4%	–	9%	1,412	5%	364	6%	1,003	6%	3,398
26-30	10%	1,584	7%	108	15%	2,273	12%	951	14%	2,196	13%	7,112
31-40	53%	8,481	46%	717	45%	6,864	47%	3,587	56%	8,852	51%	28,501
Over 40	33%	5,222	43%	671	29%	4,301	35%	2,710	22%	3,488	29%	16,392
Total Child Investigations**	100%	15,906	100%	1,557	100%	15,096	100%	7,705	100%	15,839	100%	56,103

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Includes biological fathers, stepfathers, male common-law partners, adoptive fathers and foster fathers living with the child.

** Based on a sample of 3,041 child maltreatment investigations with information about father's age. Columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

children who lived with female caregivers over 30 years of age, and 16% involved children who lived with a female caregiver under 25 years of age. In 80% of substantiated cases involving children living with male caregivers, the male caregiver was over 30 years of age. In 7% of these cases the male caregiver was 25 years of age or younger.

■ **Physical Abuse:** In a total of 76% of cases where physical abuse was the primary substantiated maltreatment and the child was living with a female caregiver, female caregivers were over 30 years of age; 8% involved female caregivers age 25 or under. In investigations where physical abuse was the primary substantiated maltreatment and the children lived with their male caregivers, 86% of male caregivers were over 30, and 4% were 25 years old or less.

■ **Sexual Abuse:** In investigations where sexual abuse was the primary substantiated maltreatment and the children lived with their female caregivers, 67% of female caregivers were over 30, and 11% were age 25 or under. In investigations where sexual abuse was the primary

substantiated maltreatment and children lived with their male caregivers, 89% of male caregivers were over 30.

■ **Neglect:** In a total of 19% of cases where neglect was the primary substantiated maltreatment and children lived with female caregivers, the female caregivers were aged 25 years or younger; 60% involved children living with female caregivers over 30. In investigations where children lived with their male caregivers, 11% of male caregivers were age 25 or under, and 74% were over 30.

■ **Emotional Maltreatment:** In 16% of cases where emotional maltreatment was the primary substantiated maltreatment and children lived with female caregivers, the female caregivers were age 25 or younger; in 67% the children lived with female caregivers over 30. In investigations where emotional maltreatment was the primary substantiated concern and male caregivers were involved, 6% were age 25 or under and 82% were over 30.

■ **Exposure to Domestic Violence:**

In 57% of cases where exposure to domestic violence was the primary substantiated maltreatment and children lived with their female caregivers, the female caregivers were over 30; in 18% of these cases the female caregivers were 25 or younger. In cases where exposure to domestic violence was the primary substantiated maltreatment and children lived with male caregivers, 78% of male caregivers were over 30, and 8% were aged 25 or under.

NUMBER OF SIBLINGS IN THE HOUSEHOLD

Investigating workers were asked to provide non identifying information on all children 19 years of age and under who were living in the home at the time of the investigation. As shown in Table 7-3, 24% of cases of substantiated maltreatment involved a child without siblings 19 years of age or under living at home, 37% involved a child with one sibling, 23% involved a child with two siblings, and 16% involved a child with three or more siblings.

TABLE 7-3 Siblings of Children in Child Maltreatment Investigations, by Primary Category of Substantiated Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Sibling	26%	6,516	40%	1,179	24%	7,317	24%	3,691	20%	5,934	24%	24,637
One Sibling	39%	9,785	35%	1,042	34%	10,447	39%	6,044	38%	11,125	37%	38,443
Two Siblings	22%	5,665	16%	467	21%	6,279	26%	3,922	27%	7,829	23%	24,162
Three Siblings	10%	2,616	2%	-	14%	4,220	9%	1,380	10%	2,860	11%	11,121
Four or More Siblings	3%	674	7%	204	7%	2,103	2%	333	5%	1,621	5%	4,935
Total Child Investigations*	100%	25,256	100%	2,937	100%	30,366	100%	15,370	100%	29,369	100%	103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about number of siblings. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Rows may add up to 99% or 101% because of rounding.

- **Physical Abuse:** In 26% of cases where physical abuse was the primary form of substantiated maltreatment, the child had no siblings 19 years of age or under living in the home, in 39% the child had one sibling, in 22% the child had two siblings, and 13% the child had three or more siblings.
- **Sexual Abuse:** In 40% of investigations where sexual abuse was the primary form of substantiated maltreatment, the child had no siblings 19 years of age or under living in the home, in 35% of investigations the child had one sibling, in 16% the child had two siblings, and in 9% the child had three or more siblings.
- **Neglect:** In 24% of investigations where neglect was the primary form of substantiated maltreatment, the child had no siblings 19 years of age or under living in the home, in 34% of investigations the child had one sibling, in 21% of investigations the

child had two siblings, and in 21% of investigations the child had three or more siblings.

- **Emotional Maltreatment:** In 24% of investigations where emotional maltreatment was the primary form of substantiated maltreatment, the child had no siblings 19 years of age or under living in the home, in 39% of investigations the child had one sibling, in 26% of investigations the child had two siblings, and 11% of investigations the child had three or more siblings.
- **Exposure to Domestic Violence:** In 20% of investigations where exposure to domestic violence was the primary substantiated maltreatment, the child had no siblings 19 years of age or under living in the home, in 38% of investigations the child had one sibling, in 27% of investigations the child had two siblings, and in 15% of investigations the child had three or more siblings.

NUMBER OF SIBLINGS INVESTIGATED

Investigating workers were asked to indicate all children in the household who had been investigated. In 67% of cases of substantiated maltreatment, the child had at least one sibling who was also investigated, in 9% of cases the child had siblings who were not investigated, and in 24% the child had no siblings (see Table 7-4).

- **Physical Abuse:** Where physical abuse was the primary substantiated maltreatment, 59% of investigated children had at least one sibling who was also the subject of investigation, 15% had siblings who were not investigated, and 26% had no siblings.
- **Sexual Abuse:** Where sexual abuse was the primary substantiated maltreatment, 37% of investigated children had at least one sibling who was also investigated, 23% had

TABLE 7-4 Investigated Siblings, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
No Sibling	26%	6,516	40%	1,179	24%	7,317	24%	3,691	20%	5,934	24%	24,637
One Sibling, Not Investigated	10%	2,455	12%	343	4%	1,152	6%	954	3%	798	5%	5,702
One Sibling, Investigated	29%	7,330	24%	699	31%	9,296	33%	5,090	35%	10,327	32%	32,742
Two or More Siblings, None Investigated	5%	1,361	11%	326	6%	1,819	3%	386	1%	328	4%	4,220
Two or More Siblings, At Least One Other Investigated	30%	7,595	13%	389	35%	10,783	34%	5,249	41%	11,982	35%	35,998
Total Child Investigations*	100%	25,257	100%	2,936	100%	30,367	100%	15,370	100%	29,369	100%	103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about Investigated Siblings. Columns may add up to 99% or 101% because of rounding.

siblings who were not investigated, and 40% had no siblings.

- **Neglect:** Where neglect was the primary substantiated maltreatment, 66% of investigated children had at least one sibling who was also the subject of investigation, 10% had siblings who were not investigated, and 24% had no siblings.
- **Emotional Maltreatment:** Where emotional maltreatment was the primary substantiated maltreatment, 67% of children had at least one sibling who was also the subject of investigation, 9% had siblings who were not investigated, and 24% had no siblings.
- **Exposure to Domestic Violence:** Where exposure to domestic violence was the primary substantiated maltreatment, 76% of children had at least one sibling who was also the subject of investigation, 4% had siblings who were not investigated, and 20% had no siblings.

SOURCE OF INCOME

Investigating workers were asked to choose the income source that best described the household income, using five possible classifications:

- **Full-time Employment:** A caregiver is employed in a permanent, full-time position.
- **Part-time/Seasonal Employment/Multiple Jobs:** Family income is derived primarily from part-time employment (less than 30 hours/week), full-time or part-time positions for temporary periods of the year, or several part-time or temporary jobs. Neither caregiver is employed in a permanent, full-time position.
- **Employment Insurance (EI)/Social Assistance/Other Benefits:** Family income is derived primarily from employment insurance, social assistance or other benefits (e.g., long term disability, pension, or child support).
- **Unknown:** Source of income was not known.

- **No source:** There is no reliable source of income for the family. Income may be earned through illicit activities. Caregiver(s) may work at temporary jobs, but these are not predictable and cannot be relied on for financial budgeting.

Table 7-5 shows source of household income for children who were victims of substantiated maltreatment as tracked by the CIS-2003. In 57% of these cases primary income was from full-time employment, 24% involved benefits/EI/social assistance as their primary source of income, and 12% had income from part-time/seasonal employment or multiple jobs. The source of household income was unknown for 6% of investigated children, and for 1% no reliable income source was reported.

- **Physical Abuse:** In investigations where physical abuse was the primary substantiated maltreatment, 67% involved children from families with full-time employment, 15% involved families receiving

TABLE 7-5 Source of Household Income, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Full-time Employment	67%	17,029	66%	1,933	41%	12,451	62%	9,601	60%	17,722	57%	58,736
Part-time/Multiple Jobs/ Seasonal Employment	11%	2,809	5%	144	16%	4,801	11%	1,622	12%	3,457	12%	12,833
Benefits/EI/ Social Assistance	15%	3,666	17%	493	34%	10,318	23%	3,475	24%	6,952	24%	24,904
Unknown	6%	1,573	12%	365	7%	2,280	3%	502	4%	1,219	6%	5,939
No Source of Income	1%	165	0%	–	2%	516	1%	168	0%	–	1%	868
Total Child Investigations*	100%	25,242	100%	2,935	100%	30,366	100%	15,368	100%	29,369	100%	103,280

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,659 substantiated child maltreatment investigations with information about household income. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

benefits/EI/social assistance, and 11% involved families relying on part-time/seasonal employment or multiple jobs.

- **Sexual Abuse:** Full-time employment was reported as the primary source of income in 66% of investigations where sexual abuse was the primary substantiated maltreatment, and benefits/EI/social assistance was the primary income source in 17% of cases. The income source was unknown in 12% of these investigations.
- **Neglect:** In contrast to abuse cases, 41% of investigations where neglect was the primary substantiated maltreatment involved families with full-time employment as their primary source of income. Another 34% involved families that were receiving benefits/EI/social assistance, and an additional 16% involved families relying on part-time/seasonal employment or multiple jobs.
- **Emotional Maltreatment:** Full-time employment was reported as the primary source of income in 62% of investigations where emotional maltreatment was the primary substantiated maltreatment, benefits/EI/social assistance in 23%, and part-time/seasonal employment/multiple jobs in 11%.
- **Exposure to Domestic Violence:** Full-time employment was reported as the primary source of income in 60% of investigations where exposure to domestic violence was the primary substantiated maltreatment, benefits/EI/social assistance in 24%, and part-time/seasonal employment/multiple jobs in 12%.

HOUSING

Investigating workers were asked to select the housing category that best described the investigated child's household situation. The types of housing included:

- **Own Home:** A purchased house, condominium, or townhouse.
- **Rental Accommodation:** A private rental house, townhouse, or apartment.
- **Public Housing:** A rental unit in a public housing complex (i.e., rent-subsidized, government owned housing); a house, townhouse, or apartment on a military base; or band housing.
- **Shelter/Hotel:** A homeless or family shelter, SRO hotel (single room occupancy), or motel accommodation.
- **Unknown:** Housing accommodation was unknown.
- **Other:** Any other form of shelter.

In addition to housing type, investigating workers were asked to indicate whether the investigated child lived in unsafe housing conditions that put him/her at risk of injury or impairment (e.g., broken windows, insufficient heat, parents and children sharing single room). Workers also noted the number of family moves in the 12 months before the investigation.

At the time of the study, 56% of all cases of substantiated maltreatment involved children living in rental accommodations (43% private rentals and 13% public housing), 32% involved children living in purchased homes, 3% involved children living in other

accommodations, and 1% involved children living in shelters or hotels. In 8% of investigations, workers did not have enough information to describe the housing type (Table 7-6). According to the 2001 Census, 74% of families with never-married children living at home owned their home, 25% rented their home, and 1% lived in band housing.⁷¹

Housing conditions were described as safe in 85% of cases of substantiated maltreatment and unsafe in 9% (Table 7-7). In 6% of these cases housing conditions were unknown.

In 49% of investigations families had not moved in the previous 12 months, whereas 28% had moved at least once (Table 7-8). For 23% of investigations, workers did not know whether the family had recently moved.

■ **Physical Abuse:** In investigations where physical abuse was the primary form of substantiated maltreatment, 37% involved children who were living in purchased homes, 41% involved children living in private rentals, and 7% involved children living in public housing complexes (Table 7-6).

In 2% of investigations the children were living in unsafe housing conditions (Table 7-7). In 55% of investigations children had not moved in the previous 12 months, and in 21% children had moved at least once in the previous 12 months (Table 7-8).

■ **Sexual Abuse:** In 42% of investigations where sexual abuse was the primary form of substantiated maltreatment, children were living in purchased homes (Table 7-6).

⁷¹ Statistics Canada. (2002). *Census of Canada 2001: Household type and structural type of dwelling for census families*. Ottawa: Statistics Canada (97F00006XCB01007).

TABLE 7-6 Housing Type, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Own Home	37%	9,484	42%	1,230	19%	5,721	38%	5,807	37%	10,773	32%	33,015
Rental Accomodation	41%	10,260	34%	995	52%	15,976	39%	6,004	39%	11,449	43%	44,684
Public Housing	7%	1,733	13%	385	16%	4,882	12%	1,876	14%	4,129	13%	13,005
Shelter/Hotel	1%	193	0%	–	1%	399	2%	346	1%	367	1%	1,305
Other	3%	707	2%	–	3%	924	3%	467	3%	901	3%	3,060
Unknown	11%	2,880	9%	263	8%	2,464	6%	870	6%	1,751	8%	8,228
Total Child Investigations*	100%	25,257	100%	2,934	100%	30,366	100%	15,370	100%	29,370	100%	103,297

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about housing type. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

TABLE 7-7 Housing Conditions, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Safe Conditions	90%	22,828	88%	2,592	70%	21,365	90%	13,888	91%	26,800	85%	87,473
Unsafe Conditions	2%	422	1%	–	22%	6,682	4%	597	6%	1,761	9%	9,499
Unknown	8%	2,007	11%	307	8%	2,313	6%	884	3%	808	6%	6,319
Total Child Investigations*	100%	25,257	100%	2,936	100%	30,360	100%	15,369	100%	29,369	100%	103,291

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,659 substantiated child maltreatment investigations with information about housing conditions. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

In 1% of investigations children were living in unsafe housing conditions (Table 7-7). In 61% of investigations children had not moved in the previous 12 months, and in 18% children had moved at least once (Table 7-8).

■ **Neglect:** In 19% of investigations where neglect was the primary form of substantiated maltreatment, children lived in purchased homes, in 52% they were living in private market rentals, and in 16% public housing complexes (Table 7-6).

In 22% of investigations where neglect was the primary substantiated maltreatment children were living in unsafe housing conditions (Table 7-7). In 41% children had not moved in the previous 12 months, and in 35% children had moved at least once (Table 7-8).

■ **Emotional Maltreatment:** Where emotional maltreatment was the primary form of substantiated maltreatment 38% of children were living in purchased homes, 39% were living in private market

rentals, and 12% were living in public housing complexes (Table 7-6). In 4% of these investigations children were living in unsafe housing conditions (Table 7-7). In 53% of cases children had not moved in the previous 12 months, and in 29% they had moved at least once (Table 7-8).

■ **Exposure to Domestic Violence:** Where exposure to domestic violence was the primary form of substantiated maltreatment, 37% of children were living in purchased homes, 39% were living in private market

TABLE 7-8 Family Moves within the Last Twelve Months, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
No Moves in Last Twelve Months	55%	13,618	61%	1,796	41%	12,433	53%	8,107	50%	14,745	49%	50,699
One Move	14%	3,470	14%	406	17%	5,189	20%	3,071	18%	5,152	17%	17,288
Two or More Moves	7%	1,685	4%	102	18%	5,527	9%	1,464	9%	2,709	11%	11,487
Unknown	24%	6,099	21%	621	24%	7,089	18%	2,728	23%	6,764	23%	23,301
Total Child Investigations*	100%	24,872	100%	2,925	100%	30,238	100%	15,370	100%	29,370	100%	102,775

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,655 substantiated child maltreatment investigations with information about family moves. Columns may add up to 99% or 101% because of rounding.

rentals, and 14% were living in public housing complexes (Table 7-6). In 6% of investigations children were living in unsafe housing conditions (Table 7-7). Half the investigations involved children who had not moved in the previous 12 months, and 27% involved children who had moved at least once (Table 7-8).

CAREGIVER FUNCTIONING AND FAMILY STRESSORS

Investigating workers examined concerns related to caregiver functioning and family stressors using a checklist of 10 items for each caregiver. Where applicable, workers identified caregiver functioning issues that had occurred in the previous six months.⁷² The checklist included:

- **Alcohol Abuse:** The use of alcohol poses a problem for the household.
- **Drug/Solvent Abuse:** At least one caregiver abuses prescription drugs, illegal drugs, or solvents.
- **Criminal Activity:** At least one caregiver is absent due to incarceration, or is involved in criminal activity (e.g., drug dealing, theft or prostitution). This did not include a criminal history for domestic violence.
- **Cognitive Impairment:** The cognitive ability of at least one caregiver is known to or suspected to have an impact on the quality of care giving provided in the household.
- **Mental Health Issues:** At least one caregiver is known or suspected to have mental health problems.
- **Physical Health Issues:** At least one caregiver is known or suspected to have a chronic illness, frequent hospitalizations, or a physical disability.
- **Few Social Supports:** At least one caregiver is known or suspected to be socially isolated or lacking in social supports.
- **Maltreated as a Child:** Either caregiver is known or suspected to have suffered maltreatment as a child.
- **Victim of Domestic Violence:** During the past six months the caregiver was a victim of domestic violence, including physical, sexual, or verbal assault.
- **Perpetrator of Domestic Violence:** During the past six months the caregiver was a perpetrator of domestic violence.
- **Other:** Any other issue/concern describing caregiver functioning.

Table 7-9(a) presents caregiver functioning issues that were noted by investigating workers for female

⁷² Most items were rated on a 4-point scale that rated caregiver functioning issues as “confirmed”, “suspected”, “no” or “unknown.” A caregiver functioning issue or family stressor was classified as confirmed if a problem had been diagnosed, observed by the investigating worker or another worker, or disclosed by the caregiver. An issue was classified as suspected if investigating workers’ suspicions were sufficient to include the concern in their written assessment of the family or in a transfer summary to a colleague. For this report, the categories of confirmed and suspected have been combined. Ratings will be compared in subsequent analyses.

TABLE 7-9(a) Female Caregiver Functioning, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Alcohol Abuse	9%	2,150	6%	158	29%	8,179	21%	3,030	15%	4,214	18%	17,731
Drug/Solvent Abuse	6%	1,378	2%	–	26%	7,380	17%	2,409	8%	2,341	14%	13,572
Criminal Activity	3%	773	1%	–	13%	3,662	10%	1,478	6%	1,644	8%	7,576
Cognitive Impairment	6%	1,498	3%	–	17%	4,939	12%	1,638	6%	1,829	10%	9,995
Mental Health Issues	20%	4,713	14%	379	33%	9,534	41%	5,742	21%	5,875	27%	26,243
Physical Health Issues	7%	1,731	5%	129	14%	3,917	15%	2,164	8%	2,358	10%	10,299
Few Social Supports	31%	7,414	22%	623	51%	14,679	41%	5,855	39%	11,044	40%	39,615
Maltreated as a Child	20%	4,878	21%	597	33%	9,332	31%	4,403	18%	5,187	25%	24,397
Victim of Domestic Violence	34%	8,054	22%	610	35%	9,882	53%	7,484	86%	24,454	51%	50,484
Other Concerns	3%	679	5%	145	3%	934	6%	806	2%	674	3%	3,238
Investigations Where at Least One Female Caregiver Functioning Issue was Noted	59%	14,235	48%	1,338	80%	22,948	83%	11,759	95%	27,103	79%	77,383
At Least one Female Caregiver in the Home		24,016		2,787		28,601		14,171		28,531		98,106
Total Child Investigations*		25,257		2,935		30,367		15,370		29,370		103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 4,398 substantiated child maltreatment investigations with information about female caregiver functioning. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column totals for Table 7-9(a) are more than the total number of children for whom at least one caregiver functioning issue was noted because there can be several different stressors noted for each caregiver.

caregivers, and Table 7-9(b) presents functioning issues noted for male caregivers.⁷³ At least one functioning issue for female caregivers was identified in 79% of cases of substantiated maltreatment (an estimated 77,383 investigations). Most frequently noted was the concern that female caregivers were victims of domestic violence (51%), followed by the lack of social supports (40%), mental health issues (27%), and maltreatment as a child (25%). At least one functioning concern

was noted for male caregivers in 72% of investigations in which maltreatment was substantiated (42,197 investigations). The issues most frequently noted for male caregivers were few social supports (33%), alcohol abuse (30%), mental health issues (18%), maltreatment as a child (18%), and drug or solvent abuse (17%).

■ **Physical Abuse:** In cases where physical abuse was the primary form of substantiated maltreatment, at

least one caregiver functioning issue was identified in 59% of investigations involving female caregivers. The two most frequently noted issues for female caregivers were that the caregiver had been a victim of domestic violence (34%) or lacked social supports (31%). A childhood history of maltreatment and mental health issues were each noted in 20% of cases, and involvement in criminal activity was noted in 3% of cases.

⁷³ The tables on female caregiver functioning and male caregiver functioning include only caregivers in the home where the child maltreatment investigation occurred.

TABLE 7-9(b) Male Caregiver Functioning, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Alcohol Abuse	17%	2,800	17%	268	32%	5,073	29%	2,396	42%	6,761	30%	17,298
Drug/Solvent Abuse	7%	1,218	6%	–	25%	3,869	21%	1,780	19%	3,075	17%	10,039
Criminal Activity	6%	1,039	12%	195	20%	3,110	18%	1,493	22%	3,573	16%	9,410
Cognitive Impairment	3%	509	2%	–	16%	2,591	5%	448	4%	699	7%	4,283
Mental Health Issues	14%	2,308	5%	–	22%	3,480	21%	1,719	18%	2,949	18%	10,531
Physical Health Issues	7%	1,130	7%	108	11%	1,801	10%	875	5%	785	8%	4,699
Few Social Supports	28%	4,686	13%	217	44%	6,859	35%	2,957	28%	4,564	33%	19,283
Maltreated as a Child	17%	2,786	12%	200	21%	3,286	23%	1,911	13%	2,120	18%	10,303
Victim of Domestic Violence	4%	642	1%	–	8%	1,263	8%	699	32%	5,228	13%	7,856
Other Concerns	4%	706	3%	–	2%	355	2%	164	2%	274	3%	1,545
Investigations Where at Least One Male Caregiver Functioning Issue was Noted	56%	9,212	36%	582	72%	11,310	74%	6,156	93%	14,937	72%	42,197
At Least One Male Caregiver in the Home		16,534		1,623		15,723		8,370		16,148		58,398
Total Child Investigations*		25,257		2,936		30,366		15,370		29,370		103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 2,324 substantiated child maltreatment investigations with information about male caregiver functioning. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Column totals for Table 7-9(b) are more than the total number of children for whom at least one caregiver functioning issue was noted because there can be several different stressors noted for each caregiver.

At least one functioning issue for male caregivers was identified in 56% of investigations where physical abuse was the primary substantiated maltreatment: workers noted few social supports for male caregivers in 28% of these investigations, alcohol abuse in 17%, maltreatment as a child in 17%, and mental health issues in 14%.

■ **Sexual Abuse:** In investigations where sexual abuse was the primary form of substantiated maltreatment, 48% involved at least one functioning issue for female caregivers. The

three most frequently noted issues were few social supports (22%), victim of domestic violence (22%), and maltreatment as a child (21%).

In 36% of investigations where sexual abuse was the primary form of substantiated maltreatment, at least one male caregiver functioning issue was noted. In 17% of investigations alcohol abuse was noted, and in 13% few social supports. Criminal activity by a male caregiver and maltreatment as a child were each noted in 12% of cases.

■ **Neglect:** In investigations where neglect was the primary form of substantiated maltreatment, 80% involved at least one functioning issue for the female caregiver. Workers noted few social supports in 51% of investigations, and that the female caregiver was a victim of domestic violence in 35%; there was a mental health issue in 33% of investigations, and a childhood history of maltreatment in 33%. Alcohol abuse and drug abuse by a female caregiver were each noted in more than a quarter of these investigations (29% and 26%, respectively).

In 72% of investigations where neglect was the primary form of substantiated maltreatment at least one functioning issue for male caregivers was noted: in 44%, few social supports; in 32%, alcohol abuse; and in 25%, drug or solvent abuse.

■ **Emotional Maltreatment:** In investigations where emotional maltreatment was the primary form of substantiated maltreatment, 83% involved at least one female caregiver functioning issue: in 53% of investigations, the concern was that the female caregiver was a victim of domestic violence; in 41%, that she had few social supports; and in 41%, that she had mental health issues.

In 74% of investigations where emotional maltreatment was the primary form of substantiated maltreatment, at least one functioning issue was noted for male caregivers: that the caregiver had few social supports was noted in 35% of cases, alcohol abuse was noted in 29%, and a history of childhood maltreatment was noted in 23%. Mental health issues and drug/solvent abuse were each noted in 21% of these cases.

■ **Exposure to Domestic Violence:** In 95% of investigations where exposure to domestic violence was

the primary form of substantiated maltreatment, at least one functioning issue was noted for female caregivers: 86% of investigations indicated that female caregivers were victims of domestic violence; 39% that the caregiver had few social supports, and 21% that the caregiver was experiencing mental health issues.

In 93% of investigations where exposure to domestic violence was the primary form of substantiated maltreatment, at least one functioning issue was noted for male caregivers. Alcohol abuse was noted in 42% of investigations, and that the caregiver had been a victim of domestic violence in 32% of investigations. The caregiver's lack of social supports was noted in 28% of investigations, and his involvement in criminal activity in 22%.

CUSTODY/ACCESS DISPUTES

Table 7-10 presents data on ongoing child custody/access disputes at the time of the child maltreatment investigations. For a worker to indicate that there was an ongoing dispute there had to have been a court application made or pending. In cases of substantiated maltreatment, 86% did not involve a

custody or access dispute, 11% did involve a custody or access dispute, and in 3% the status of the custody/access dispute was unknown.

■ **Physical Abuse:** In investigations where physical abuse was the primary substantiated maltreatment, 87% did not involve a custody/access dispute, and 11% did.

■ **Sexual Abuse:** In investigations where sexual abuse was the primary form of substantiated maltreatment, 96% did not involve a custody/access dispute, and 3% did.

■ **Neglect:** In 89% of investigations where neglect was the primary form of substantiated maltreatment, a custody/access dispute was not involved, and in 7% a dispute was involved.

■ **Emotional Maltreatment:** In investigations where emotional maltreatment was the primary form of substantiated maltreatment, 83% did not involve a custody/access dispute; 15% of these investigations did.

■ **Exposure to Domestic Violence:** In investigations where exposure to domestic violence was the primary form of substantiated maltreatment, 83% did not involve a custody/access dispute, but 14% of these investigations did.

TABLE 7-10 Custody Disputes, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
No Custody Dispute	87%	21,990	96%	2,819	89%	26,926	83%	12,799	83%	24,437	86%	88,971
Custody Dispute	11%	2,670	3%	–	7%	2,068	15%	2,268	14%	4,129	11%	11,228
Unknown	2%	597	1%	–	4%	1,372	2%	302	3%	804	3%	3,098
Total Child Investigations*	100%	25,257	100%	2,935	100%	30,366	100%	15,369	100%	29,370	100%	103,297

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information on custody disputes. Rows and columns may not add up to total because low frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

Chapter 8

REFERRAL AND AGENCY CHARACTERISTICS

This chapter describes referral and agency characteristics, including referral sources, malicious and unsubstantiated referrals, agency size and structure, and investigating workers' professional training and years of experience. As with the previous chapters, the tables are presented by the estimated number of child maltreatment investigations in Canada in 2003, by primary category of substantiated maltreatment.

All tables in this chapter present estimates for Canada excluding Quebec (please see Chapter 2 for discussion of data from Quebec). Selected comparisons with the findings from the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-1998) (excluding Quebec) are presented in Chapter 9.

The estimates presented in this chapter are weighted estimates derived from child maltreatment investigations conducted in 2003 in a sample of Canadian child welfare services. The sampling design and weighting procedures specific to the study should be considered before inferences are drawn from these estimates. The estimates **do not include:**

- (1) incidents that were not reported to child welfare services;
- (2) reported cases that were screened out by child welfare services before being fully investigated;
- (3) new reports on cases already open by child welfare services; or

- (4) cases that were investigated only by the police.

SOURCE OF REFERRAL

Table 8-1 presents the different categories of non-professionals and professionals who referred cases of substantiated maltreatment. Each independent contact by the child welfare agency or office regarding a child or family was counted as a separate referral. The person who actually contacted the child welfare agency/office was identified as the referral source. For example, if a child disclosed an incident of abuse to a schoolteacher who then made a report to child welfare services, the school was counted as a referral source. However, if both the schoolteacher and the child's parent called, both would be counted as referral sources. The Maltreatment Assessment Form included 18 coded referral source categories and an open "other" category. Referral sources were collapsed into 12 categories, which are listed in Table 8-1.

Non-Professional Referral Sources:

- **Parent:** This includes parents involved as a caregiver to the reported child, as well as non-custodial parents.
- **Child:** A self-referral by any child listed on the Intake Face Sheet of the CIS-2003 Maltreatment Assessment Form.

- **Relative:** Any relative of the child in question. Workers were asked to code "other" for situations in which a child was living with a foster parent and a relative of the foster parent reported maltreatment.
- **Neighbour/Friend:** This category includes any neighbour or friend of the children or his/her family.
- **Anonymous:** A caller who is not identified.
- **Other Referral Source:** Any other source of referral.

Professional Referral Sources:

- **Community Agencies:** This includes social assistance worker (involved with the household), crisis service/shelter worker (includes any shelter or crisis services worker) for domestic violence or homelessness, community recreation centre staff (refers to any person from a recreation or community activity programs), day care centre staff (refers to a childcare or day care provider), and community agency staff.
- **Health Professional:** This includes hospital referrals that originate from a hospital made by either a doctor, nurse or social worker, public health nurse (nurses involved in services such as family support, family visitation programs and community medical outreach), and physician (any family physician with a single or ongoing contact with the child and/or family).

TABLE 8-1 All Referral Sources (Non-Professional, and Professional), by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
Non-Professional Referral Sources												
Parent	10%	2512	26%	769	12%	3,493	15%	2,352	6%	1,799	11%	10,925
Child (Self)	5%	1,169	3%	–	2%	672	2%	248	0%	119	2%	2,288
Relative	2%	378	4%	107	6%	1,848	6%	950	3%	843	4%	4,126
Neighbour/Friend	4%	908	9%	274	6%	1,877	3%	523	2%	607	4%	4,189
Other Referral Sources	4%	873	2%	–	9%	2,589	5%	685	4%	1,021	5%	5,225
Anonymous	1%	170	4%	103	7%	2,212	2%	271	1%	305	3%	3,061
Any Non-Professional Referral Source	19%	4,879	39%	1,147	26%	7,811	26%	4,009	12%	3,368	21%	21,214
Professional Referral Sources												
Police	10%	2,610	22%	651	19%	5,841	26%	3,957	65%	19,020	31%	32,079
School Personnel	45%	11,418	19%	559	18%	5,458	17%	2,587	6%	1,792	21%	21,814
Health Professional	6%	1,532	7%	205	10%	2,876	11%	1,659	4%	1,019	7%	7,291
Mental Health Professional	4%	1,056	3%	–	2%	654	4%	654	1%	246	3%	2,684
Other Child Welfare Service	3%	667	4%	126	6%	1,870	4%	655	4%	1,304	5%	4,622
Community Agency	11%	2,889	9%	251	9%	2,821	9%	1,432	8%	2,242	9%	9,635
Any Professional Referral Source	79%	19,995	62%	1,833	63%	19,176	71%	10,836	86%	25,359	75%	77,199
Total Child Investigations*		25,257		2,936		30,366		15,369		29,370		103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about referral source. Totals are not additive as up to three referral sources could be documented for each investigation. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total.

- **School:** Any school personnel (teacher, principal, teacher's aide, etc.)
- **Mental Health Professional/ Agency:** Includes family service agencies, mental health centres (other than hospital psychiatric wards), and private mental health practitioners (psychologists, social workers, other therapists) working outside of a school/hospital/child welfare/Youth Justice Act setting.
- **Other Child Welfare Services:** Includes referrals from mandated child welfare service providers from other jurisdictions or provinces.
- **Police:** Any police force, including municipal forces, provincial/territorial forces, and the RCMP.

Over 75% of referrals of substantiated maltreatment (an estimated 77,199 investigations) were made by professionals through their contact with children. The largest number of referrals came from the police, who referred an estimated 32,079 cases of substantiated maltreatment (31% of all cases of substantiated maltreatment). School personnel referred 21% of cases of substantiated maltreatment, and community agencies referred another 9%. Non-professional community sources referred 21%,⁷⁴ parents referred 11% (an estimated 10,925 cases of substantiated maltreatment), relatives accounted for 4%, neighbors/family friends for an additional 4%, and children themselves for 2%.

- **Physical Abuse:** School personnel referred 45% of all investigations where physical abuse was the primary form of substantiated maltreatment, community agencies referred 11%, and parents and police each referred 10%.
- **Sexual Abuse:** Parents made the largest number of referrals for all

investigations where sexual abuse was the primary form of substantiated maltreatment, referring 26% (an estimated 769 investigations). Police (22%) and school personnel (19%) accounted for most of the remaining referrals.

- **Neglect:** Unlike physical and sexual abuse investigations, no single source referred a large number of investigations where neglect was the primary form of substantiated maltreatment. Police referred 19% of these investigations, school personnel referred 18%, and parents referred 12%.
- **Emotional Maltreatment:** Police referrals, totaling 26% (an estimated 3,957 investigations), accounted for the largest number of referrals for investigations where emotional maltreatment was the primary form of substantiated maltreatment. School personnel referred 17% of these investigations and parents referred 15%.
- **Exposure to Domestic Violence:** Police referrals accounted for 65% of investigations where exposure to domestic violence was the primary substantiated maltreatment. The large number of police referrals reflects the fact that police are often the first to intervene in domestic violence cases.

UNSUBSTANTIATED AND MALICIOUS REPORTS

Every provincial and territorial child welfare statute requires that professionals and members of the public report suspected maltreatment. To ensure that investigations are carried out by trained child welfare professionals in a thorough yet minimally intrusive manner, those making the reports are not required to

verify their suspicions prior to reporting. After investigation, 40% of cases tracked by the CIS-2003 were found to be unsubstantiated (see Table 3-1). Although most of these referrals were made in good faith, in some instances the allegations appeared to have been made with malicious intent by persons who knew the allegations were false. Investigating workers classified such referrals as “malicious.”

Table 8-2(a) illustrates unsubstantiated and malicious reports for investigated children, by primary category of maltreatment and by level of substantiation, and Table 8-2(b) provides a breakdown of malicious referrals, by source of referral and by level of substantiation. Most unsubstantiated reports were considered to have been made in good faith, but 5% of all allegations of maltreatment (an estimated 10,744 investigations) were judged intentionally false. In another 7% of cases, the investigating worker was unable to determine whether an unsubstantiated report had been made in good faith.

Primary Categories of Maltreatment: Most reports deemed malicious involved allegations of neglect (7% of neglect reports) and physical abuse (7% of abuse reports). A total of 4% of sexual abuse allegations and 3% of emotional maltreatment allegations were considered malicious. Only 1% of allegations of exposure to domestic violence were deemed malicious.

Source of Referral: Table 8-2(b) shows unsubstantiated and malicious referrals for investigated children by referral source. Two sources, parents and neighbours/friends, were considered responsible for more than half of all malicious referrals; an estimated 5,479 children were subjected to unnecessary maltreatment investigations as a result

⁷⁴ Because Table 8-1 documents up to three sources of referral per investigation, categories will add up to more than 100%.

TABLE 8-2(a) Unsubstantiated and Malicious Reports of Child Maltreatment, by Primary Category of Investigated Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Substantiated Reports	41%	25,257	24%	2,935	42%	30,366	49%	15,369	77%	29,370	48%	103,297
Suspected Reports	12%	7,218	14%	1,702	12%	9,015	21%	6,513	10%	3,605	13%	28,053
Unsubstantiated Non-Malicious Reports	33%	20,234	50%	6,244	29%	20,909	22%	7,136	11%	4,103	27%	58,626
Unsubstantiated Malicious Reports	7%	4,016	4%	541	7%	4,959	3%	993	1%	235	5%	10,744
Unsubstantiated Reports, Malicious Intent Unknown	7%	4,433	8%	1,046	10%	7,219	5%	1,656	2%	765	7%	15,119
Total Child Investigations*	100%	61,158	100%	12,468	100%	72,468	100%	31,667	100%	38,078	100%	215,839

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 11,518 child maltreatment investigations. Columns may add up to 99% or 101% because of rounding.

TABLE 8-2(b) Unsubstantiated and Malicious Reports of Child Maltreatment, by Referral Source Category, in Canada, Excluding Quebec, in 2003

	Referral Source Category											
	Parent		Child		Neighbour/Friend		Professional or Service		Other		Anonymous	
Substantiated Reports	44%	10,925	57%	2,288	28%	4,189	53%	77,199	50%	5,226	29%	3,061
Suspected Reports	16%	4,056	21%	829	16%	2,485	12%	16,979	12%	1,226	13%	1,380
Unsubstantiated Non-Malicious Reports	20%	5,021	15%	600	16%	2,397	31%	44,673	23%	2,433	16%	1,700
Unsubstantiated Malicious Reports	11%	2,725	3%	122	18%	2,754	2%	2,134	8%	850	17%	1,838
Unsubstantiated Reports, Malicious Intent Unknown	9%	2,287	4%	177	22%	3,386	3%	4,154	8%	838	25%	2,709
Total Child Investigations*	100%	25,014	100%	4,016	100%	15,211	100%	145,139	100%	10,573	100%	10,688

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 11,562 child maltreatment investigations with information about malicious intent and referral source. Columns may add up to 99% or 101% because of rounding.

of referrals from these two sources. Although reports from professionals were rarely judged to have been intentionally false (2%, or an estimated 2,134 investigations), these reports nonetheless accounted for the third-largest group of unsubstantiated malicious referrals (20% of malicious referrals). Anonymous reports constituted the next largest group of malicious referrals, involving an estimated 1,838 child maltreatment investigations.

AGENCY/OFFICE SIZE

The CIS-2003 sampled investigations from 55 sites across Canada.⁷⁵ As noted in Chapter 2, the administrative structure of child welfare services varies considerably across the country. In some provinces and territories, child welfare services are organized into a few large administrative units that cover several municipalities, whereas other provinces and territories have

much smaller administrative units that correspond to a single municipal boundary. The following two tables describe the types of child maltreatment investigations by agency/office size and level of urbanization.

Agency/office size is categorized by the number of case openings in 2003:

- **Small Agencies/Offices:** Fewer than 350 case openings per year.
- **Medium Agencies/Offices:** Between 350 and 949 annual case openings.
- **Large Agencies/Offices:** Between 950 and 2,000 annual case openings.
- **Very Large Agencies/Offices:** More than 2,000 case openings per year.

Size classification applies to the agency/office rather than to the site. One site included several agencies/offices covering the same geographical area,⁷⁶ yielding a total of 58 agencies/offices.⁷⁷ In total, the CIS-2003 agencies/offices include 10 very large offices that process

over 2,000 investigations per year, 7 large agencies/offices, 11 medium-sized agencies/offices, and 30 small agencies/offices.

Table 8-3 presents child maltreatment investigations by the size of the agencies/offices where the investigations were conducted. An estimated 44,527 cases of substantiated maltreatment (43% were conducted by very large agencies/offices, 22% were conducted by large agencies/offices, 24% by medium agencies/offices, and 11% by small agencies/offices.

■ **Physical Abuse:** Very large agencies/offices conducted 47% of investigations where physical abuse was the primary form of substantiated maltreatment, medium agencies/offices conducted 24%, large agencies conducted 18%, and small agencies/offices conducted 11%.

TABLE 8-3 Relative Size of Child Welfare Agency/Office Involved in Child Investigations, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Small (< 350 cases/year)	11%	2,716	7%	202	14%	4,405	6%	959	12%	3,384	11%	11,666
Medium (350-949 cases/year)	24%	6,105	18%	515	22%	6,737	33%	5,052	20%	5,916	24%	24,325
Large (950-2,000 cases/year)	18%	4,532	31%	915	24%	7,174	18%	2,720	25%	7,438	22%	22,779
Very Large (>2,000 cases/year)	47%	11,904	44%	1,303	40%	12,050	43%	6,639	43%	12,631	43%	44,527
Total Child Investigations*	100%	25,257	100%	2,935	100%	30,366	100%	15,370	100%	29,369	100%	103,297

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about size of agency/office where the investigation originated. Columns may add up to 99% or 101% because of rounding.

⁷⁵ This number does not include the Quebec sites.

⁷⁶ These sites serve specific faith communities.

⁷⁷ This number does not include the Quebec sites.

■ **Sexual Abuse:** Very large agencies/offices conducted 44% of investigations where sexual abuse was the primary form of substantiated maltreatment. An additional 31% were conducted by large agencies/offices, 18% by medium agencies/offices, and 7% by small agencies/offices.

■ **Neglect:** Of the investigations where neglect was the primary form of substantiated maltreatment, 40% were investigated by very large agencies/offices, 24% by large agencies/offices, 22% by medium agencies/offices, and 14% by small agencies/offices.

■ **Emotional Maltreatment:** Very large agencies/offices conducted 43% of investigations where emotional maltreatment was the primary form of substantiated maltreatment, 18% were conducted by large agencies/offices, and 6% by small agencies/offices. Medium agencies/offices conducted 33% of these investigations.

■ **Exposure to Domestic Violence:** Of cases where exposure to domestic violence was the primary form of substantiated maltreatment, 43%

were investigated by very large agencies/offices, 25% by large agencies/offices, 20% by medium agencies/offices, and 12% by small agencies/offices.

URBAN AND RURAL SERVICE AREA

The 55 CIS-2003 child welfare service areas were sampled to provide a representative sample of both urban and rural areas across Canada, outside of Quebec. The CIS-2003 sites were categorized into three service area classifications:

- **Large Metropolitan Service Area:** Providing child welfare services to densely populated urban settings, including suburban sites within a metropolitan site.
- **Mixed Urban/Rural Service Area:** Providing child welfare services to sites with a wide population density range.
- **Primarily Rural Service Area:** Providing child welfare services primarily to sparsely populated areas.

Table 8-4 presents child investigations by child welfare services, based on population density. Large metropolitan

service areas investigated 62% of all cases of substantiated maltreatment (an estimated 64,197 investigations). Mixed urban/rural service areas conducted 31%, and primarily rural service areas conducted 7%.

■ **Physical Abuse:** Large metropolitan service areas conducted 68% of investigations where physical abuse was the primary form of substantiated maltreatment, and mixed urban/rural service areas conducted 26%. Rural service areas conducted 6% of these investigations.

■ **Sexual Abuse:** Large metropolitan service areas conducted 54% of investigations where sexual abuse was the primary form of substantiated maltreatment, and mixed urban/rural service areas conducted 29%. Rural service areas conducted 17% of these investigations.

■ **Neglect:** Rural service areas conducted 7% of investigations where neglect was the primary form of substantiated maltreatment. Large metropolitan service areas conducted 55% of these investigations, and mixed urban/rural service areas conducted 38%.

TABLE 8-4 Urban/Rural Location of Child Welfare Agency/Office, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Large Metropolitan Service Area	68%	17,283	54%	1,583	55%	16,747	63%	9,728	64%	18,856	62%	64,197
Mixed Urban and Rural Service Area	26%	6,607	29%	865	38%	11,369	33%	5,108	28%	8,312	31%	32,261
Primarily Rural Service Area	6%	1,368	17%	487	7%	2,251	4%	533	8%	2,202	7%	6,841
Total Child Investigations*	100%	25,258	100%	2,935	100%	30,367	100%	15,369	100%	29,370	100%	103,298

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 5,660 substantiated child maltreatment investigations with information about the location of the agency/office where the investigation originated. Columns may add up to 99% or 101% because of rounding.

- **Emotional Maltreatment:** Rural service areas conducted 4% of investigations where emotional maltreatment was the primary form of substantiated maltreatment. Large metropolitan service areas conducted 63% of these investigations, and mixed urban/rural service areas conducted 33%.
- **Exposure to Domestic Violence:** Large metropolitan service areas conducted 64% of investigations where exposure to domestic violence was the primary form of substantiated maltreatment, and mixed urban/rural service areas conducted 28%. Rural service areas conducted 8% of these investigations.

WORKER POSITION, EXPERIENCE, AND EDUCATION

Child maltreatment investigations tracked by the CIS-2003 involved 936 child welfare workers. Workers in 55 out of the 63 CIS sites⁷⁸ were asked to

complete professional background information forms. Responses were received from 819 workers (87%). The information collected included the workers' positions at the agencies, educational experience, and years of experience as child welfare workers.

Table 8-5 shows the position of workers investigating reported maltreatment by primary category of substantiated maltreatment. Of all cases of substantiated maltreatment, 78% were conducted by intake workers with specialized investigation caseloads, and 18% by generalists. Generalists usually have a mixed caseload of investigations and cases for which they provide ongoing services such as counseling, case management, and supervision. Workers in other positions, such as supervisors and night-duty workers, conducted 4% of investigations.

- **Physical Abuse:** Intake specialists investigated 81% of cases in which physical abuse was the primary form of substantiated maltreatment, generalists 16%, and other workers 3%.

- **Sexual Abuse:** Intake workers conducted 83% of investigations where sexual abuse was the primary form of substantiated maltreatment (2,268 substantiated investigations), generalists conducted 13% (340 of these investigations), and other workers 4%.

- **Neglect:** Intake workers investigated 76% of cases in which neglect was the primary form of substantiated maltreatment; generalists conducted 19%, and other workers 5%.

- **Emotional Maltreatment:** Intake workers conducted the majority (71%) of investigations where emotional maltreatment was the primary substantiated maltreatment; generalists conducted 23%, and other workers 6%.

- **Exposure to Domestic Violence:** Intake workers conducted the majority (82%) of investigations where exposure to domestic violence was the primary substantiated maltreatment; generalists conducted 15%, and other workers 3%.

TABLE 8-5 Job Position of Investigating Worker, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
Intake and Investigation Specialists	81%	17,582	83%	2,268	76%	19,506	71%	9,383	82%	20,077	78%	68,816
Generalists with Mixed Intake and Ongoing Service Caseloads	16%	3,537	13%	340	19%	4,919	23%	3,018	15%	3,797	18%	15,611
Other	3%	736	4%	107	5%	1,278	6%	824	3%	732	4%	3,677
Total Child Investigations*	100%	21,855	100%	2,715	100%	25,703	100%	13,225	100%	24,606	100%	88,104

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 4,810 substantiated child maltreatment investigations with information about investigating worker's job position. Columns may add up to 99% or 101% because of rounding.

⁷⁸ Eight sites did not require the investigating workers to complete Worker Information Forms.

YEARS OF EXPERIENCE

Table 8-6 presents child maltreatment investigations by the investigators' years of child welfare experience. The data show that 43% of cases of substantiated maltreatment (or an estimated 37,415 investigations) were conducted by workers with more than 4 years of child welfare experience, and 26% by workers with more than 6 years of experience. Workers with between 1 and 4 years of experience conducted 54%, and workers with less than 1 year of child welfare experience conducted only 3%.

- **Physical Abuse:** Workers with more than 4 years of experience conducted 43% of investigations in which physical abuse was the primary form of substantiated maltreatment, workers with 1 to 4 years of experience conducted 54%, and those with fewer than 12 months of experience conducted 3%.
- **Sexual Abuse:** Workers with more than 4 years of experience conducted 45% of investigations in which sexual abuse was the primary form of substantiated maltreatment. Workers

with 1 to 4 years of child welfare experience conducted 51% of these investigations, and workers with fewer than 12 months child welfare experience conducted 4%.

- **Neglect:** In 47% of investigations where neglect was the primary form of substantiated maltreatment, workers with more than 4 years of experience were involved, and in 4% of cases workers with fewer than 12 months of experience were involved.
- **Emotional Maltreatment:** Workers with more than 4 years of experience conducted 42% of investigations where emotional maltreatment was the primary form of substantiated maltreatment, and those with fewer than 12 months of experience conducted only 2% of these investigations.
- **Exposure to Domestic Violence:** Workers with more than 4 years of experience conducted 39% of investigations where exposure to domestic violence was the primary substantiated maltreatment, workers with between 1 and 4 years of child welfare experience conducted 59%

of these investigations, and those with fewer than 12 months of experience conducted 2%.

EDUCATIONAL BACKGROUND

Table 8-7 presents substantiated child maltreatment investigations in terms of investigators' highest completed professional degrees. Most cases of substantiated maltreatment (60%) were investigated by workers with Bachelor of Social Work (BSW) degrees, 9% by workers with Master of Social Work (MSW) degrees, 3% by workers with Master of Science (MSc) degrees, 21% by workers with Bachelor of Arts or Bachelor of Science (BA or BSc) degrees, and 7% by workers with college diplomas or certificates.

- **Physical Abuse:** Workers with BSW degrees conducted 64% of investigations where the primary form of substantiated maltreatment was physical abuse, workers with BA or BSc degrees conducted 19%, and those with MSW degrees conducted 10%.

TABLE 8-6 Years of Child Welfare Experience for Investigating Workers, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment											
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence		Total	
<1 Year of Experience	3%	637	4%	109	4%	1,032	2%	253	2%	518	3%	2,549
1 to 2 Years' Experience	24%	5,058	15%	386	25%	6,497	23%	2,801	28%	6,832	25%	21,574
3 to 4 Years' Experience	30%	6,345	36%	946	24%	6,366	33%	4,009	31%	7,733	29%	25,399
5 to 6 Years' Experience	19%	4,126	16%	419	16%	4,160	14%	1,770	18%	4,472	17%	14,947
> 6 Years' Experience	24%	5,160	29%	767	31%	7,949	28%	3,512	21%	5,080	26%	22,468
Total Child Investigations*	100%	21,326	100%	2,627	100%	26,004	100%	12,345	100%	24,635	100%	86,937

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 4,770 substantiated child maltreatment investigations with information about workers' years of child welfare experience. Columns may add up to 99% or 101% because of rounding.

■ **Sexual Abuse:** Workers with social work degrees (BSW or MSW) conducted 62% of investigations where the primary form of substantiated maltreatment was sexual abuse. Workers with BA or BSc degrees conducted 24% of these investigations, and workers with college diplomas or certificates conducted 11%.

■ **Neglect:** Workers with BSW or MSW degrees conducted almost

two-thirds (63%) of investigations where neglect was the primary form of substantiated maltreatment.

■ **Emotional Maltreatment:** Workers with BSW or MSW degrees conducted 69% of investigations where emotional maltreatment was the primary form of substantiated maltreatment, workers with BSc or BA degrees conducted 24%, and workers with college diplomas or certificates conducted 5%.

■ **Exposure to Domestic Violence:** Workers with BSW or MSW degrees conducted almost three-quarters (72%) of investigations where the primary form of substantiated maltreatment was exposure to domestic violence. Workers with BA or BSc degrees conducted 20% and workers with college diplomas or certificates conducted 6%.

TABLE 8-7 Highest Completed Education Level of Investigating Worker, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003

	Primary Category of Substantiated Maltreatment										Total	
	Physical Abuse		Sexual Abuse		Neglect		Emotional Maltreatment		Exposure to Domestic Violence			
MSW	10%	2,179	5%	123	6%	1,667	11%	1,442	9%	2,341	9%	7,752
BSW	64%	14,298	57%	1,546	57%	15,193	58%	7,721	63%	15,894	60%	54,652
MSc	2%	452	3%	–	4%	960	2%	308	2%	535	3%	2,325
BA/BSc	19%	4,237	24%	657	23%	6,202	24%	3,255	20%	5,043	21%	19,394
College Diploma or Certificate	5%	1,205	11%	300	10%	2,720	5%	596	6%	1,370	7%	6,191
Total Child Investigations*	100%	22,371	100%	2,696	100%	26,742	100%	13,322	100%	25,183	100%	90,314

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 4,901 substantiated child maltreatment investigations with information about workers' highest educational level. Rows and columns may not add up to total because low-frequency estimates are not reported but are included in total. Columns may add up to 99% or 101% because of rounding.

Chapter 9

CIS-1998 AND CIS-2003

This report provides a comprehensive statistical profile of children and families who came into contact with child welfare services in Canada in 2003. This final chapter examines the findings of the 2003 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003) against those of the 1998 study (CIS-1998).⁷⁹

CIS-1998 AND CIS-2003

Tables 9-1 to 9-7 describe some of the changes in the rates of investigated and substantiated maltreatment that occurred across Canada between the CIS-1998 and the CIS-2003. These results should be interpreted with caution since a number of factors are not controlled for in this preliminary analysis. Changes in rates of investigated or substantiated maltreatment can be attributed to a number of factors, including:

- (1) changes in public and professional awareness of the problem;
- (2) changes in legislation or in case-management practices;
- (3) changes in the CIS study procedures and definitions;⁸⁰ and
- (4) changes in the actual rate of maltreatment.

In other words, an increase in the rate of reported child maltreatment does not necessarily indicate that more children are being abused or neglected; it can indicate that awareness and reporting have increased. As the “Iceberg Figure” depicts in Chapter 1 (Figure 1-1), an increase in reported maltreatment might simply indicate that a larger portion of the iceberg is visible above water.

Increase in Substantiated Maltreatment

Table 9-1 describes the increase in child maltreatment investigations from 1998 to 2003 across all of Canada and in Canada excluding Quebec. Across the whole country the estimated rate of investigations increased 78%, from a rate of 21.52 per 1,000 children to 38.33 per 1,000. During the same period the estimated number of investigations grew from 135,573 to 235,315. Excluding Quebec, the increase was even more pronounced, with the incidence of investigations growing by 86%, from 24.55 to 45.68 per 1,000 children.

The rate of substantiated maltreatment in the core CIS sample, Canada outside of Quebec, increased by 125%, from 9.64 cases of substantiated

maltreatment per 1,000 children in 1998 to 21.71 in 2003. Subsequent tables examine changes in core CIS samples in Canada, excluding Quebec.

The increase in cases of substantiated maltreatment appears to be partly attributable to a shift in the way investigating workers classify cases, with a much smaller proportion of cases being classified as suspected (13% in 2003 compared with 24% in 1998, in Canada outside of Quebec).⁸¹ It is difficult to determine the extent to which these changes are the result of changes in child welfare policies and practices, or changes in the types of cases being referred.

The increase in cases of substantiated maltreatment appears to be partly attributable to a shift in the way investigating workers classify cases, with a much smaller proportion of cases being classified as suspected.

⁷⁹ The CIS-1998 data presented in this chapter may not correspond to data in *CIS-1998 Final Report* as the 1998 data in this chapter do not include Quebec data.

⁸⁰ These changes are described in Chapter 2. Study procedures, in particular sample selection and weighting, were kept consistent in both studies. Some changes were made to the specific forms of maltreatment tracked by the study, but the major categories did not change.

⁸¹ The change is similar for statistics including Quebec.

TABLE 9-1 Child Maltreatment Investigations by Level of Substantiation, in Canada, in 1998 and 2003

	Child Maltreatment Investigations						Significance Level
	1998*			2003**			
	Number of Investigations	Incidence per 1,000 Children	Substantiation Rate	Number of Investigations	Incidence per 1,000 Children	Substantiation Rate	
Canada, Including Quebec							
Substantiated	58,201	9.24	43%	114,607	18.67	49%	p<.001
Suspected	30,334	4.81	22%	28,053	4.57	12%	ns
Unsubstantiated	47,039	7.46	35%	90,869	14.80	38%	p<.01
Missing Substantiation Information				1,786	0.29	1%	
Total	135,573	21.52	100%	235,315	38.33	100%	p<.01
Canada, Excluding Quebec (Core CIS sample)							
Substantiated	46,574	9.64	39%	103,297	21.71	47%	p<.001
Suspected	28,718	5.95	24%	28,053	5.90	13%	ns
Unsubstantiated	43,260	8.96	36%	85,969	18.07	40%	p<.01
Total	118,552	24.55	100%	217,319	45.68	100%	p<.01

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on samples of 7,672 and 5,359 child maltreatment investigations. Column percentages may add up to 99% or 101% because of rounding.

** Based on a sample of 14,200 and 11,562 child maltreatment investigations.

More Children Investigated in Each Family

Table 9-2 describes the relationship between the number of investigated families and the number of investigated children in 1998 and 2003 in Canada, excluding Quebec. From 1998 to 2003 the number of families⁸² investigated increased by 56%, from an estimated 83,976 to 130,594, whereas the number of investigated children increased by

83%, from an estimated 118,552 to an estimated 217,319.

Like most public health statistics, the CIS is designed to track the incidence of investigated maltreatment by child, not by family. Many jurisdictions, however, process investigations at the family level. The dramatic increase in the rates of maltreatment cases that are investigated and maltreatment cases that are substantiated appears in part to be the

result of a shift in investigation practices. The average number of investigated children per family has increased from 1.41 to 1.66 (Table 9-2). This increase could be attributable to a greater understanding of the impact of maltreatment, to changes in the types of maltreatment investigated, or to changes in administrative procedures. More analysis is required to better understand the factors underlying this development.

⁸² Note that this table does not include an incidence rate of investigations per 1,000 families with children, because the CIS-2003 was not designed to track incidence rates at this level.

TABLE 9-2 Investigated Families Compared to Investigated Children, in Canada, Excluding Quebec, in 1998 and 2003

	1998*	2003**	Significance Level
	Number of Investigations	Number of Investigations	
Investigated Families	83,976	130,594	p<.05
Investigated Children	118,552	217,319	p<.01
Average Number of Investigated Children per Family	1.41	1.66	

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 3,800 family maltreatment investigations in 1998.

** Based on a sample of 6,948 family maltreatment investigations in 2003.

Variations by Category of Maltreatment

Table 9-3 indicates some factors underlying the increase in the rate of substantiated maltreatment. The increase is driven primarily by increases in two categories of substantiated maltreatment: exposure to domestic violence and emotional maltreatment. The rate of exposure to domestic violence increased by 259%, from 1.72 to 6.17 cases of substantiated maltreatment per 1,000, and the rate of emotional

maltreatment increased by 276%, from 0.86 to 3.23 cases of substantiated maltreatment per 1,000 children. In 1998 these two forms of maltreatment accounted for 27% of cases of substantiated maltreatment; by 2003 they accounted for 43%. These increases reflect a change in awareness, and in some cases a change in legislation, regarding the impact of emotional maltreatment and exposure to domestic violence.

From 1998 to 2003, rates of physical abuse and neglect increased much less; cases of substantiated physical abuse increased by 107%, from 2.56 cases per 1,000 to 5.31, and neglect increased by 78%, from 3.58 to 6.38 per 1,000. In contrast to all other forms of maltreatment, cases of substantiated sexual abuse decreased by nearly a third (30%), dropping from 0.89 substantiated cases per 1,000 children to 0.62. However, this decrease was not statistically significant.

Rates of Substantiated Maltreatment by Age Group

Table 9-4 examines the increase in substantiated maltreatment by victim age group. The largest increase in substantiated child maltreatment occurred in the category of children under one year of age. In 1998, 6.37 per 1,000 children (1,791 investigations) were victims of maltreatment; in 2003 the incidence of substantiated maltreatment increased to 28.22 per 1,000 children (6,989 investigations), more than four times the rate of victimization identified in 1998. The rate of increase was also more pronounced for 8 to 11 year olds.

TABLE 9-3 Substantiated Child Maltreatment Investigations by Primary Category of Maltreatment, in Canada, Excluding Quebec, in 1998 and 2003

	1998*			2003**			Significance Level
	Number of Investigations	Incidence per 1,000 Children	% of Substantiated Investigations	Number of Investigations	Incidence per 1,000 Children	% of Substantiated Investigations	
Physical Abuse	12,353	2.56	27%	25,257	5.31	24%	p<.01
Sexual Abuse	4,322	0.89	9%	2,935	0.62	3%	ns
Neglect	17,292	3.58	37%	30,366	6.38	29%	p<.01
Emotional Maltreatment	4,137	0.86	9%	15,369	3.23	15%	p<.001
Exposure to Domestic Violence	8,284	1.72	18%	29,370	6.17	28%	p<.001
Total***	46,574	9.64	100%	103,297	21.71	100%	p<.001

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 2,046 substantiated investigations with information on maltreatment category. Columns may add up to 99% or 101% because of rounding.

** Based on a sample of 5,660 substantiated investigations.

*** Rows add up to less than total because of missing data in 1998.

TABLE 9-4 Child Age in Substantiated Child Maltreatment Investigations, in Canada, Excluding Quebec, in 1998 and 2003

Child Age Group	1998*			2003**			Significance Level
	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Investigations	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Investigations	
< 1 year	1,791	6.37	4%	6,989	28.22	7%	p<.001
1-3 years	8,020	9.16	17%	15,820	19.93	15%	p<.001
4-7 years	12,304	9.96	26%	25,052	21.35	24%	p<.001
8-11 years	11,686	9.54	25%	29,520	23.21	29%	p<.001
12-15 years	12,728	10.48	27%	25,917	20.40	25%	p<.01
Total Maltreatment Investigations***	46,574	9.64	100%	103,298	21.71	100%	

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 2,048 substantiated investigations. Columns may add up to 99% or 101% because of rounding.

** Based on a sample of 5,660 substantiated investigations.

*** Rows add up to less than total because of missing data in 1998.

In 1998, the incidence of substantiated maltreatment for this age group was 9.54 per 1,000 children (11,686 investigations). The incidence rate more than doubled in 2003, increasing to 23.21 per 1,000 children (29,520 investigations). Although the increase was less dramatic in the other age groups, on average the rate of substantiated maltreatment nevertheless nearly doubled for all other age groups.

Lower Proportion of Cases Involving Harm

Table 9-5 compares rates of physical harm, emotional harm, and duration of maltreatment in 1998 and 2003. Although there was an increase in the incidence of physical harm, from 1.76 harmed victims per 1,000 children in 1998 to 2.15 in 2003, this increase is not statistically significant. There was, however, a significant difference in the incidence of emotional harm, which increased from 3.04 emotionally harmed victims per 1,000 children in 1998 to 4.41 in 2003. These represent increases

of 22% and 45%, respectively, far less than the overall 125% increase in substantiated cases of maltreatment. As a result, the proportion of victims of maltreatment who displayed signs of harm decreased from 18% to 10% for physical harm, and from 32% to 20% for emotional harm. In other words, the increase in maltreatment rates documented by the CIS appears to have been driven primarily by cases where children were not visibly harmed.

In terms of the duration of maltreatment, the increase in maltreatment rates was most attributable to the increase in single-incident cases. Rates of single-incident cases increased 153%, from 2.72 substantiated single-incident cases per 1,000 children to 6.87. Multiple incident rates, over both the short term and the long term, also increased significantly, by 127% and 103%, respectively. Although single-incident cases increased most, multiple incident cases occurring over more than 6 months continued to account for the largest proportion of cases (36%).

Child Welfare Interventions

Table 9-6 presents comparisons between 1998 and 2003 rates of ongoing service provision, out-of-home placement, and child welfare court application in Canada, excluding Quebec.

In 1998 ongoing child welfare service was provided in 24,906 cases of substantiated child maltreatment, a rate of 5.16 per 1,000 children. In 2003, ongoing child welfare service was provided to nearly twice as many children, with ongoing services provided in 45,885 cases of substantiated maltreatment, a rate of 9.64 per 1,000 children. However, since the increase in the total number of cases of substantiated maltreatment was even greater, the proportion of substantiated cases kept open for ongoing services dropped from 53% in 1998 to 44% in 2003.

In contrast, the number of children who had been previously investigated kept pace with the overall increase in substantiated maltreatment. From 1998 to 2003 the incidence of substantiated

TABLE 9-5 Case Characteristics of Substantiated Child Maltreatment Investigations, in Canada, Excluding Quebec, in 1998 and 2003

	1998*			2003**			Significance Level
	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Cases	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Cases	
Any Physical Harm	8,519	1.76	18%	10,222	2.15	10%	ns
Any Emotional Harm	14,704	3.04	32%	20,958	4.41	20%	p<.01
Duration of Maltreatment							
Single Incident	13,154	2.72	28%	32,673	6.87	32%	p<.001
Multiple Incidents - < 6 Months	7,950	1.65	17%	17,793	3.74	17%	p<.001
Multiple Incidents - > 6 Months	18,210	3.77	39%	36,328	7.64	36%	p<.001
Duration Unknown	6,965	1.44	15%	15,413	3.24	15%	p<.01
Total Substantiated Maltreatment Investigations	46,574	9.64	100%	103,297	21.71	100%	

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 2,050 substantiated investigations.

** Based on a sample of 5,660 substantiated investigations. The sum of column entries may exceed the total substantiated investigations because there may be more than one applicable category per investigation.

TABLE 9-6 Child Welfare Interventions in Substantiated Child Maltreatment Investigations, in Canada, Excluding Quebec, in 1998 and 2003

Child Welfare Interventions	1998*			2003**			Significance Level
	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Investigations	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Investigations	
Child Previously Investigated	23,470	4.86	50%	54,001	11.35	52%	p<.001
Case to Stay Open for Ongoing Services	24,906	5.16	53%	45,885	9.64	44%	p<.01
Child Welfare Placement	5,307	1.10	11%	8,260	1.74	8%	ns
Child Welfare Court Application	4,399	0.91	9%	7,261	1.53	7%	ns
Total Substantiated Investigations	46,574	9.64	100%	103,297	21.71	100%	

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 2,050 substantiated investigations.

** Based on a sample of 5,660 substantiated investigations. The sum of column entries may exceed the total substantiated investigations because there may be more than one applicable category per investigation.

maltreatment involving previously investigated children increased by 134%, from 4.86 per 1,000 to 11.35 per 1,000 children.

In 1998, 5,307 cases of substantiated maltreatment (1.10 per 1,000 children) resulted in child welfare placements, and in 2003, 8,263 cases of substantiated maltreatment (1.74 per 1,000 children) included child welfare placements. The rate of increase in placements was, however, less pronounced than the overall increase in cases of substantiated maltreatment, and was statistically insignificant. As a result, the proportion of maltreated children who experienced some type of placement during the investigation decreased from 11% in 1998 to 8% in 2003.

A similar development is apparent in the involvement of child welfare courts. The number of investigations involving child welfare court applications increased from 4,399 in 1998 to 7,261 in 2003, an increase that was not statistically significant. The proportion

of cases of substantiated maltreatment that were brought to court decreased from 9% to 7%.

More Reports from Professionals

Table 9-7 details the increase in the number of cases of substantiated maltreatment reported by professionals. Case referral rates by professionals for substantiated maltreatment increased by 165%, from 29,089 (6.02 per 1,000 children) in 1998 to 77,199 (16.23 per 1,000 children) in 2003. The proportion of cases of substantiated maltreatment referred by professionals also increased, from 62% to 75%. From 1998 to 2003 the rate of referrals increased from non-professionals and decreased from anonymous or other sources, although these changes are not statistically significant. As a result, the overall increase in substantiated maltreatment was driven by the referrals from professionals, which account for 85% of the total increase in reports of maltreatment.

More Victimized Children or More Reports?

In interpreting the increase in cases of substantiated maltreatment from 1998 to 2003, one question to consider is whether the increase indicates that more children are being abused and neglected, or that child welfare services have become more effective in detecting cases of maltreatment. Because the CIS is limited to reported cases of maltreatment, it is impossible to rule out the possibility that the increase is driven by higher rates of victimization. The available evidence, however, indicates that the increase reflects more effective reporting and investigation practices, as shown by more systematic identification of victimized siblings, increased rates of substantiation, greater awareness of emotional maltreatment and exposure to domestic violence, and more reports from professionals. The lower proportion of cases involving emotional or physical harm, and the lower proportion of children requiring

TABLE 9-7 Referral Sources in Substantiated Child Maltreatment Investigations, in Canada, Excluding Quebec, in 1998 and 2003

Referral Source	1998*			2003**			Significance Level
	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Cases	Number of Child Investigations	Incidence per 1,000 Children	% of Substantiated Cases	
Any Non-Professional Referral Source	16,042	3.32	34%	21,214	4.46	21%	ns
Any Professional Referral Source	29,089	6.02	62%	77,199	16.23	75%	p<.001
Any Anonymous Source	3,788	0.78	8%	3,061	0.64	3%	ns
Total Substantiated Investigations	46,574	9.64	100%	103,298	21.71	100%	

Canadian Incidence Study of Reported Child Abuse and Neglect – 2003

* Based on a sample of 2,050 substantiated investigations.

** Based on a sample of 5,660 substantiated investigations. The sum of column entries may exceed the total substantiated investigations because there may be more than one applicable category per investigation.

Columns add up to more than 100% because referrals can be made from several different sources.

placement or court involvement, provide more evidence that child welfare services are reaching a broader range of children at risk.

FUTURE DIRECTIONS

This report provides a first glance at the dramatic changes in child welfare services across Canada since 1998. In five years the number of investigations of suspected child abuse and neglect doubled. While service providers across the country are keenly aware of the increase in the demand for child welfare services, the CIS-2003 provides unique opportunities to examine these changes at the national level, and to analyze them in far more detail than would be possible using current provincial and territorial administrative information systems.

The two CIS datasets will provide researchers across the country with the opportunity to examine in more

detail the factors underlying the changes in reported and substantiated maltreatment. Given the changes in the types of maltreatment being reported, it will be particularly important to examine the changes between 1998 and 2003 within each category of maltreatment, and changes at the level of specific sub-forms of maltreatment. It will also be important to conduct analyses specific to different age groups and to specific populations, such as children from Aboriginal backgrounds. As it did with the CIS-1998, the Injury and Child Maltreatment Section at the Public Health Agency of Canada will make the CIS-2003 dataset available to researchers wanting to explore these changes more fully.

The preliminary analyses of the important changes between 1998 and 2003 demonstrate the critical importance of public health datasets like the CIS. Findings from the Ontario portion of the CIS-1998 and an earlier 1993

Ontario-wide study have already contributed to important policy changes in a several jurisdictions across Canada. The 2003 study provides the first opportunity in Canadian history to compare national child welfare data at two points in time. Plans are being developed for the third national cycle of the CIS, to be conducted in 2008.

In addition to providing a periodic national data collection system, the CIS data also support provincial and territorial efforts to more efficiently integrate administrative information systems. With better-integrated information systems, jurisdictions across the country will be better positioned to learn from the diversity of policies and programs.

Appendix A

CIS-2003 SITE RESEARCHERS

CIS-2003 Site Researchers provided training and data collection support at the 66 CIS sites. Their enthusiasm and dedication to the study were critical in ensuring its success.

The following is a list of Site Researchers who participated in the CIS-2003.

British Columbia

Connie Bird

Woods Homes

Janet Douglas

Government of British Columbia

Prairies/North

Jennifer Banks

University of Calgary

Marlyn Bennett

First Nations Child & Family Caring Society

Kathy Bent

First Nations Child & Family Caring Society

Nathalie Forest

Faculty of Social Work
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Bruce MacLaurin (Co-Investigator)

Faculty of Social Work
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Megan McCormack

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Tara Black

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Katharine Dill

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Valérie Gaston

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Heidi Kiang

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Daniel Moore

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Maria Mulloy

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Université Laval

Atlantic Provinces/Maritimes

Ken Barter

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Memorial University
Newfoundland and Labrador

Shirley Cole

Department of Health and Social Services
Prince Edward Island

DATA ENTRY

Data entry of the CIS-2003 Intake Face Sheet was completed by Sharon George and Maria Mulloy in Toronto.

DATA ANALYSIS

Assistance in developing the sampling design, custom area files, weights, and confidence intervals was provided by Tahany Gadalla, Faculty of Social Work, University of Toronto. Additional statistical support was provided by Della Knoke, Faculty of Social Work, University of Toronto.

Appendix B

PUBLIC HEALTH AGENCY OF CANADA STAFF & NATIONAL STEERING COMMITTEE MEMBERS

Public Health Agency of Canada staff played an active role throughout the study, providing feedback, consultation, and support at all phases of the project. The National Steering Committee provided consultation for the design of the study, in particular with respect to the enlistment strategies and survey instruments.

PUBLIC HEALTH AGENCY OF CANADA

Lil Tonmyr

Injury and Child Maltreatment Section

Margaret Herbert (former co-chair)

Injury and Child Maltreatment Section

Richard De Marco

Injury and Child Maltreatment Section

Anne-Marie Ugnat (co-chair)

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Sophie Hyman

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Catherine M^cCourt

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NATIONAL STEERING COMMITTEE

Jade Rox

National Youth in Care Network

Peter Dudding (co-chair)

Child Welfare League of Canada

Gilles Fortin

Protection de la jeunesse

Joan Glode

Mi'kmaw Family and Children's Services

Harriet MacMillan

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Vicki Wood

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Andrea Sedlak

Westat Inc.

Appendix C

GLOSSARY OF TERMS

The following is an explanatory list of terms used throughout this report on the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2003).

Age Group: The age range of children included in the CIS-2003 sample. Unless otherwise specified, all data are presented for children between newborn and 15 years of age. Table 6-2 presents data on adolescents between 16 and 19 years of age.

Annual Incidence: The number of child maltreatment investigations per 1,000 children in a given year.

Case Duplication: Children who are the subject of an investigation more than once in a calendar year are counted in most child welfare statistics as separate “cases” or “investigations.” As a count of children, these statistics are therefore duplicated.

Case Openings: Cases that appear on agency/office statistics as openings. These may be counted on a family basis or a child basis. Openings do not include referrals that have been screened-out.

Categories of Maltreatment: The five key classifications categories under which the 25 forms of maltreatment were subsumed: physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence.

Child Maltreatment Investigations: Case openings that meet the CIS-2003 criteria for investigated maltreatment (see Figure 1-1, Major Findings Report)

Child Welfare: Refers to child protection services and other related services. The focus of the CIS-2003 is on services that address suspected child abuse and neglect.

Childhood Prevalence: The proportion of people maltreated at any point during their childhood.

CIS-2003: *Canadian Incidence Study of Reported Child Abuse and Neglect – 2003.*

CIS-Cycle II: *Canadian Incidence Study of Reported Child Abuse and Neglect – 2003.*

CWSA: A child welfare service area, which is a geographic area served by a distinct child welfare office. In decentralized provinces and territories, a child welfare service area refers to a child welfare agency, while in centralized provinces and territories; it corresponds to a district or regional office. In some cases several agencies serve the same geographic area on the basis of children’s religious or aboriginal status. In such instances, all child welfare agencies sharing the same geographic boundaries are counted as a single child welfare service area.

Definitional Framework: The CIS-2003 provides an estimate of the number of cases (child-based, age under 16 years) of alleged child maltreatment (physical abuse, sexual abuse, neglect,

and emotional maltreatment) reported to and investigated by Canadian child welfare services in 2003 (screened-out reports not included). The estimates are broken down by three levels of substantiation (substantiated, suspected, unsubstantiated). Cases opened more than once during the year are counted as separate investigations.

Forms of Maltreatment: Specific types of maltreatment (e.g., hit with an object, sexual exploitation, or exposure to domestic violence) that are classified under the five CIS-2003 Categories of Maltreatment. The CIS-2003 captured 25 forms of maltreatment.

Level of Identification and Substantiation: There are four key levels in the case identification process: detection, reporting, investigation, and substantiation (see Figure 1-2 in Chapter 1). *Detection* is the first stage in the case identification process. Little is known about the relationship between detected and undetected cases. *Reporting* suspected child maltreatment is required by law in all provinces and territories in Canada. The CIS-2003 does not document unreported cases. *Investigated* cases are subject to various screening practices, which vary across sites. The CIS-2003 did not track screened-out cases, nor did it track new incidents of maltreatment on already opened cases. *Substantiation* distinguishes between cases where maltreatment is confirmed following an investigation, and cases

where maltreatment is not confirmed. The CIS-2003 uses a three tiered classification system, in which a *suspected* level provides an important clinical distinction for cases where maltreatment is suspected to have occurred by the investigating worker, but cannot be substantiated.

NIS: U.S. *National Incidence Study of Child Abuse and Neglect*.

Non-maltreatment Cases: Cases open for child welfare services for reasons other than suspected maltreatment (e.g., prevention services, parent-child conflict, services for young pregnant women, etc.).

OIS: *Ontario Incidence Study of Reported Child Abuse and Neglect*.

Reporting Year: The year in which child maltreatment cases were opened. The reporting year for the CIS is 2003.

Screened-out: Referrals that are not opened for an investigation.

Two-parent Blended Family: A family in which one of the caregivers was identified as a step-parent, a common-law partner, or an adoptive parent who was not the biological parent of at least one of the children in the family.

Unit of Analysis: The denominator used in calculating maltreatment rates. In the case of the CIS-2003 the unit of analysis is the child investigation.

Appendix D

CIS MALTREATMENT ASSESSMENT FORM

The Maltreatment Assessment Form consists of:

- Intake Face Sheet;
- Household Information Sheet; and
- Child Sheet.



CIS Maltreatment Assessment

INTAKE FACE SHEET (Please complete this face sheet for all cases)

CIS OFFICE USE ONLY									
		-			-				

1. Date referral was received: 2. Date case opened:

3. Date CIS Maltreatment Assessment form was filled out:

4. Source of allegation/referral (Fill in all that apply)

- Custodial parent Neighbour/Friend Public health nurse Mental health professional Police
- Non-custodial parent Social assistance worker Physician Other child welfare service Community agency
- Child (subject of referral) Crisis service/Shelter School Day care centre Anonymous
- Relative Hospital Community/Recreation centre Other: _____

5. Please describe referral and investigated maltreatment

	CIS OFFICE USE ONLY

This shaded area to be filled only by the investigating worker

CIS OFFICE USE ONLY	6. a) List first names of <i>all</i> children in the home (19 years and under)	b) Age	c) Gender of child	d) Children Referred Investigated	
			<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/>	<input type="radio"/>
			<input type="radio"/> Male <input type="radio"/> Female	<input type="radio"/>	<input type="radio"/>

7. Was child maltreatment alleged by the referral or suspected during the assessment period? Yes No

IF YES 8. Was an assessment/investigation initiated?

CIS OFFICE USE ONLY	<input type="radio"/> Yes → Complete the remainder of the CIS Maltreatment Assessment
	<input type="radio"/> No → Why? _____

CIS OFFICE USE ONLY									
Assessment worker's name: _____									
First two letters of Family surname: <input type="text"/>				Postal code: <input type="text"/> - <input type="text"/>					
(Other Family surname, if applicable): <input type="text"/>				or address					
Case number: <input type="text"/>									

This information will remain totally confidential, and no identifying information will be used outside of your own agency.
 This tear-off portion of the instrument will be destroyed at this location following the coded entry of this data by one of our researchers.
 Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto 246 Bloor St. W., Toronto ON M5S 1A1 • tel: 416-978-2527 • fax: 416-978-7072

PROCEDURES

- 1. The **Intake Face Sheet** should be completed on every case that you assess/investigate, even if there is no suspected maltreatment.
- 2. The entire **CIS Maltreatment Assessment** form (*Intake Face Sheet, Household Information Sheet and the Child Information Sheet(s)*) should be completed for cases where maltreatment was alleged or suspected at any point during the assessment/investigation.

Note: Currently open/active cases with new allegations of child maltreatment are not included in the CIS.

COMPLETION INSTRUCTIONS

To ensure accuracy and minimize response time, the **CIS Maltreatment Assessment** should be completed when you complete the standard written assessment/investigation report for the child maltreatment investigation.

Unless otherwise specified, all information *must* be completed by the investigating worker.

Complete all items to the best of your knowledge. To increase accuracy of data scanning please avoid making marks beyond the fill in circles.

Thank you for your time and interest.

COMMENTS

Comments: Intake information

Comments: Household information

Comments: Child information

This information will remain totally confidential, and no identifying information will be used outside of your own agency.
 This tear-off portion of the instrument will be destroyed at this location following the coded entry of this data by one of our researchers.
 Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto 246 Bloor St. W., Toronto ON M5S 1A1 • tel: 416-978-2527 • fax: 416-978-7072

CIS Maltreatment Assessment: Household Information

CIS OFFICE USE ONLY

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<p>1. Caregiver A in the home</p> <p><input type="radio"/> Biological parent <input type="radio"/> Common-law partner <input type="radio"/> Foster parent</p> <p><input type="radio"/> Adoptive parent <input type="radio"/> Step-parent <input type="radio"/> Grandparent</p> <p><input type="radio"/> Other:</p>	<p>1. Caregiver B <input type="radio"/> No other caregiver</p> <p><input type="radio"/> Caregiver in home <input type="radio"/> Caregiver not in home</p> <p><input type="radio"/> Biological parent <input type="radio"/> Common-law partner <input type="radio"/> Foster parent</p> <p><input type="radio"/> Adoptive parent <input type="radio"/> Step-parent <input type="radio"/> Grandparent</p> <p><input type="radio"/> Other:</p>																																																																																																																								
<p>2. Sex</p> <p><input type="radio"/> Male <input type="radio"/> Female</p>	<p>3. Age <input type="radio"/> <16 <input type="radio"/> 16-18 <input type="radio"/> 19-21 <input type="radio"/> 22-25 <input type="radio"/> 26-30</p> <p><input type="radio"/> 31-40 <input type="radio"/> 41-50 <input type="radio"/> 51-60 <input type="radio"/> 61-70 <input type="radio"/> >70</p>																																																																																																																								
<p>4. Primary income source</p> <p><input type="radio"/> Full time <input type="radio"/> Seasonal <input type="radio"/> Other benefit</p> <p><input type="radio"/> Part time (<30 hrs/wk) <input type="radio"/> Employment insurance <input type="radio"/> None</p> <p><input type="radio"/> Multiple jobs <input type="radio"/> Social assistance <input type="radio"/> Unknown</p>	<p>4. Primary income source</p> <p><input type="radio"/> Full time <input type="radio"/> Seasonal <input type="radio"/> Other benefit</p> <p><input type="radio"/> Part time (<30 hrs/wk) <input type="radio"/> Employment insurance <input type="radio"/> None</p> <p><input type="radio"/> Multiple jobs <input type="radio"/> Social assistance <input type="radio"/> Unknown</p>																																																																																																																								
<p>5. Educational level <input type="radio"/> Elementary or less <input type="radio"/> Some secondary</p> <p><input type="radio"/> Completed secondary <input type="radio"/> College/University <input type="radio"/> Unknown</p>	<p>5. Educational level <input type="radio"/> Elementary or less <input type="radio"/> Some secondary</p> <p><input type="radio"/> Completed secondary <input type="radio"/> College/University <input type="radio"/> Unknown</p>																																																																																																																								
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<p>7. Primary language <input type="radio"/> English <input type="radio"/> French <input type="radio"/> Other:</p>	<p>7. Primary language <input type="radio"/> English <input type="radio"/> French <input type="radio"/> Other:</p>																																																																																																																								
<p>8. Contact with caregiver in response to investigation</p> <p><input type="radio"/> Co-operative <input type="radio"/> Not co-operative <input type="radio"/> Not contacted</p>	<p>8. Contact with caregiver in response to investigation</p> <p><input type="radio"/> Co-operative <input type="radio"/> Not co-operative <input type="radio"/> Not contacted</p>																																																																																																																								
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<p>10. Other adults in the home <i>(Fill in all that apply)</i></p> <p><input type="radio"/> None <input type="radio"/> Grandparent</p> <p><input type="radio"/> Children >19 <input type="radio"/> Other:</p>	<p>15. Unsafe housing conditions</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p>	<p>19. Case will stay open for on-going child welfare services</p> <p><input type="radio"/> Yes <input type="radio"/> No</p>																																																																																																																							
<p>11. Caregiver(s) outside the home <i>(Fill in all that apply)</i></p> <p><input type="radio"/> None <input type="radio"/> Father <input type="radio"/> Mother</p> <p><input type="radio"/> Grandparent <input type="radio"/> Other:</p>	<p>16. Home overcrowded</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p>	<p>20. Referral(s) for any family member</p> <p><input type="radio"/> No referral made <i>(Fill in all that apply)</i></p> <p><input type="radio"/> Parent support group <input type="radio"/> Psychiatric/psychological services</p> <p><input type="radio"/> In-home parenting support <input type="radio"/> Special education placement</p> <p><input type="radio"/> Other family/parent counselling <input type="radio"/> Recreational services</p> <p><input type="radio"/> Drug/alcohol counselling <input type="radio"/> Victim support program</p> <p><input type="radio"/> Welfare/social assistance <input type="radio"/> Medical/dental services</p> <p><input type="radio"/> Food bank <input type="radio"/> Child/day care</p> <p><input type="radio"/> Shelter services <input type="radio"/> Cultural services</p> <p><input type="radio"/> Domestic violence services <input type="radio"/> Other:</p>																																																																																																																							
<p>12. Child custody dispute at this time</p> <p><input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown</p>	<p>17. Approximate number of moves in past 12 months</p> <p><input type="radio"/> 0 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 or more</p> <p><input type="radio"/> Unknown</p>																																																																																																																								
<p>13. Household income estimated</p> <p><input type="radio"/> <\$15,000 <input type="radio"/> \$15-24,999 <input type="radio"/> \$25-40,000</p> <p><input type="radio"/> >\$40,000 <input type="radio"/> Unknown</p>	<p>18 a) Case previously opened</p> <p><input type="radio"/> Never <input type="radio"/> 1 time <input type="radio"/> 2-3 times</p> <p><input type="radio"/> >3 times <input type="radio"/> Unknown</p> <p>b) If yes, how long since previous opening</p> <p><input type="radio"/> <3 mo <input type="radio"/> 3-6 mo <input type="radio"/> 7-12 mo</p> <p><input type="radio"/> 13-24 mo <input type="radio"/> >24 mo</p>																																																																																																																								
<p>14. Housing</p> <p><input type="radio"/> Own home <input type="radio"/> Rental</p> <p><input type="radio"/> Public housing <input type="radio"/> Shelter/Hotel</p> <p><input type="radio"/> Unknown <input type="radio"/> Other:</p>																																																																																																																									

9296



CIS Maltreatment Assessment: Child Information

CIS OFFICE USE ONLY

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First name: _____			21. Sex <input type="radio"/> Male <input type="radio"/> Female						
22. Age									
<input type="radio"/> <1 <input type="radio"/> 1 <input type="radio"/> 2 <input type="radio"/> 3 <input type="radio"/> 4 <input type="radio"/> 5 <input type="radio"/> 6 <input type="radio"/> 7 <input type="radio"/> 8 <input type="radio"/> 9 <input type="radio"/> 10 <input type="radio"/> 11 <input type="radio"/> 12 <input type="radio"/> 13 <input type="radio"/> 14 <input type="radio"/> 15 <input type="radio"/> 16 <input type="radio"/> 17 <input type="radio"/> 18 <input type="radio"/> 19									
23. Aboriginal status <input type="radio"/> Not Aboriginal <input type="radio"/> First Nation status <input type="radio"/> First Nation non-status <input type="radio"/> Métis <input type="radio"/> Inuit <input type="radio"/> Other:									
24. Child functioning (Are you aware if any of the following apply to this child at this point in time?)									
(Fill in each item)		Confirmed	Suspected	No	Unknown				
Depression/anxiety	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
ADD/ADHD	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Negative peer involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Alcohol abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Drug/solvent abuse	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Self-harming behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Violence toward others	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Running (One incident)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Running (Multiple incidents)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Inappropriate sexual behaviour	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Other behav./ emotional problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Learning disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Special education services	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Irregular school attendance	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Developmental delay	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Physical disability	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Substance abuse related birth defects	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Positive toxicology at birth	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Other health conditions	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Psychiatric disorder	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Youth Criminal Justice Act involvement	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
Other:	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>				
25. Maltreatment Codes									
Physical abuse		Sexual abuse		Neglect					
1 - Shake, push, grab or throw		6 - Penetration		14 - Failure to supervise: physical harm					
2 - Hit with hand		7 - Attempted penetration		15 - Failure to supervise: sexual abuse					
3 - Punch, kick or bite		8 - Oral sex		16 - Permitting criminal behaviour					
4 - Hit with object		9 - Fondling		17 - Physical neglect					
5 - Other physical abuse		10 - Sex talk		18 - Medical neglect					
		11 - Voyeurism		19 - Failure to provide psych. treatment					
		12 - Exhibitionism		20 - Abandonment					
		13 - Exploitation		21 - Educational neglect					
22 - Emotional abuse									
23 - Non-organic failure to thrive									
24 - Emotional neglect									
25 - Exposed to domestic violence									
CIS OFFICE USE ONLY <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>									
Insert Maltreatment Codes in the boxes below (Enter primary form of maltreatment first)									
<input type="text"/>	<input type="text"/>	<input type="text"/>	26. Alleged perpetrator (Fill in all that apply)						
1st	2nd	3rd	<input type="radio"/> Caregiver A: _____						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Caregiver B: _____						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Other: _____ →						
1st	2nd	3rd	27. Substantiation (Fill in only one per column)						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Substantiated						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Suspected						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Unfounded →						
1st	2nd	3rd	28. Was maltreatment a form of punishment?						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Not applicable (unfounded)						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> No						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Yes						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Unknown						
1st	2nd	3rd	29. Duration of maltreatment (Fill in only one per column)						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Not applicable (unfounded)						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Single incident						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Less than six months						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> More than six months						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Unknown						
1st	2nd	3rd	30. Physical harm (Fill in all that apply)						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> No Harm						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Bruises/Cuts/Scrapes						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Burns and scalds						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Broken bones						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Head trauma						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Fatal						
<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	<input type="radio"/> Other health condition: _____						
If Other perpetrator: CIS OFFICE USE ONLY <table border="1" style="display: inline-table; vertical-align: middle;"><tr><td style="width: 20px; height: 20px;"></td><td style="width: 20px; height: 20px;"></td></tr></table>					a) Age				
			<input type="radio"/> <13 <input type="radio"/> 13-15 <input type="radio"/> 16-20 <input type="radio"/> 21-30						
			<input type="radio"/> 31-40 <input type="radio"/> 41-50 <input type="radio"/> 51-60 <input type="radio"/> >60						
			b) Sex <input type="radio"/> Male <input type="radio"/> Female						
			27a. If unfounded, was the report a malicious referral?						
			<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown						
			31. Physical harm						
			a) Medical treatment required						
			<input type="radio"/> Yes <input type="radio"/> No / N/A no harm						
			b) Health or safety seriously endangered by suspected or substantiated maltreatment						
			<input type="radio"/> Yes <input type="radio"/> No / N/A no harm						
			c) History of undetected or misdiagnosed injuries						
			<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown						
			32. Mental or emotional harm						
			a) No current signs, but mental or emotional harm is probable						
			<input type="radio"/> Yes <input type="radio"/> No						
			b) Child shows signs of mental or emotional harm						
			<input type="radio"/> Yes <input type="radio"/> No						
			c) Child requires therapeutic treatment						
			<input type="radio"/> Yes <input type="radio"/> No						
			33. Physician/nurse conducted a physical examination of the child as part of the investigation						
			<input type="radio"/> Yes <input type="radio"/> No						
34. Placement during investigation									
<input type="radio"/> No placement required									
<input type="radio"/> Placement considered									
<input type="radio"/> Informal kinship care									
<input type="radio"/> Kinship foster care									
<input type="radio"/> Other family foster care									
<input type="radio"/> Group home									
<input type="radio"/> Residential/secure treatment									
35. Child welfare court									
<input type="radio"/> No court considered									
<input type="radio"/> Application considered									
<input type="radio"/> Application made									
a) Referral to mediation/alternative response									
<input type="radio"/> Yes <input type="radio"/> No									
36. Previous reports									
a) Child previously reported to child welfare for suspected maltreatment									
<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown									
b) If yes, was the maltreatment substantiated?									
<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown									
37. Police involvement in child maltreatment investigation									
<input type="radio"/> None <input type="radio"/> Charges being considered									
<input type="radio"/> Investigation only <input type="radio"/> Charges laid									
38. Police involvement in adult domestic violence investigation									
<input type="radio"/> None <input type="radio"/> Charges laid									
<input type="radio"/> Investigation only <input type="radio"/> Unknown									
<input type="radio"/> Charges being considered <input type="radio"/> N/A									
39. Caregivers use spanking as a form of discipline									
<input type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown									

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Appendix E

CIS-CYCLE II GUIDE BOOK

The following is the CIS-Cycle II Guide Book used by child welfare workers to assist them in completing the Maltreatment Assessment Form.

THE CANADIAN INCIDENCE STUDY OF REPORTED CHILD ABUSE AND NEGLECT – CYCLE II GUIDEBOOK

BACKGROUND

The Canadian Incidence Study of Reported Child Abuse and Neglect – *CIS-Cycle II* – is the second national study of child abuse and neglect investigations in Canada. Results from *CIS-Cycle I* (conducted in 1998) and its precursor, the 1993 Ontario Incidence Study of Reported Child Abuse and Neglect, have been widely disseminated in conferences, reports, books and journal articles (see Centre of Excellence for Child Welfare <http://www.cecw-cepb.ca> and Public Health Agency of Canada (PHAC) <http://www.phac-aspc.gc.ca> websites) and have had an impact on the development of child welfare services and policies across Canada.

CIS-Cycle II is funded by PHAC. Additional funding has been provided by Bell Canada, the First Nations Child & Family Caring Society, the provinces of Alberta and Ontario, and the Northwest Territories, with significant in-kind support provided by every participating jurisdiction. The project is managed by a team of researchers at the Centre of Excellence for Child Welfare, Faculty of Social Work, University of Toronto; the University of Calgary's Faculty of Social Work; and Laval University in Quebec.

Objectives

The primary objective of the CIS-Cycle II is to provide reliable estimates of the scope and characteristics of reported child abuse and neglect in Canada. Specifically, the study is designed to accomplish the following objectives:

- produce national estimates of the incidence of investigated abuse and neglect in Canada in 2003;
- examine changes between 1998 to 2003 investigations of abuse and neglect;
- enhance our understanding of the types and severity of reported child maltreatment;
- collect information to help develop programs and policies for at risk children and youths, and to assist in the targeting of resources for children at risk of abuse;
- explore the role of selected determinants of health (e.g., physical and social environments, social support, income, social status, healthy child development, and personal coping practices) on the incidence and characteristics of child abuse and neglect.

Sample

Fifty-seven Child Welfare Service Areas (CWSA) across Canada were randomly selected from the total number of child welfare offices and agencies. A minimum of one CWSA was chosen from each province and territory. Provinces and territories were allocated additional CWSAs based on the provincial and territorial proportion of the Canadian child population and on oversampling funds provided in Alberta, Ontario and the Northwest Territories.

Information will be collected on all child maltreatment investigations opened during the three-month period between October 1st and December 31st, 2003.

CIS MALTREATMENT ASSESSMENT

The *CIS Maltreatment Assessment* form was designed to collect information from child welfare investigators on the results of their investigations. It consists of three yellow legal sized pages, with the “Canadian Incidence Study of Reported Child Abuse and Neglect: CIS Maltreatment Assessment: Cycle II” clearly marked on the front sheet.

The *CIS Maltreatment Assessment* is made up of: an *Intake Face Sheet*, a *Comment Sheet* (which is on the back of the Intake Face Sheet), a *Household Information* sheet and a *Child Information* sheet (please refer to *Frequently Asked Question # 2*). The form is designed to be completed in ten minutes.

The *CIS Maltreatment Assessment* examines a range of family, child, and case status variables. This includes household demographics, caregiver profile, source of referral, health

determinants, outcomes of the investigation on a child-specific basis (including up to three forms of maltreatment), nature of harm, duration of maltreatment, identity of alleged perpetrator, placement in care, child welfare and criminal court involvement.

Training

Training sessions will be held during September and early October 2003 for all workers involved in the study. Your Site Researcher will visit your agency/office prior to the data collection period and will continue to make regular visits during the data collection process. These on-site visits will allow the Site Researcher to collect forms, enter data, answer questions, and resolve any instrumental problems that may arise. If you have any questions about the study, please contact your Site Researcher (see contact information on the inside of the front cover of the *CIS Guide Book*).

Confidentiality

Confidentiality will be maintained at all times during data collection and analysis.

To guarantee client confidentiality, all near identifying information (located at the bottom of the *Intake Face Sheet*) will be coded at your agency/office. Near-identifying information is data, which could potentially identify a family (e.g., agency/office case file number; the first two letters of the family name; and the first names of the children in the family). This information is required for purposes of data verification only. This tear-off portion of the Intake Face Sheet will be stored in a locked area at your agency/office until the study is completed, and then it will be destroyed.

The completed *CIS Maltreatment Assessments* (with all identifying information removed) will be sent to the University of Toronto site for data entry and will then be kept under double lock (a locked RCMP approved filing cabinet in a locked office at the University of Toronto). Access to the forms, for any additional verification purposes, will be restricted to select research team members authorized by the Public Health Agency of Canada.

Published analyses will be conducted at the national level only and at the provincial level in Alberta and Ontario, and in the Northwest Territories. If requested by a site, specific data will be made available for an internal summary report; however, this information will not be externally shared. **Worker or team-specific data will not be made available to anyone under any circumstances.**

COMPLETING THE CIS MALTREATMENT ASSESSMENT

The *CIS Maltreatment Assessment* should be completed by the investigating worker when she/he is writing the standard investigation report. In most jurisdictions this report is required within 4 to 12 weeks of the date the case was opened.

It is essential that all items on the *CIS Maltreatment Assessment* be completed. Use the “Unknown” response if you are unsure. Please be sure that **all items are completed**. If the categories provided do not adequately describe a case, indicate the specific nature of the case in the available space, or use the additional information section on the *Comment Sheet*. If you have any

¹ Because of differences in data collection methods, the eight CWSAs in Quebec were not randomly selected.

questions during the study you are encouraged to contact your Site Researcher. The number is listed on the inside cover of *CIS-Cycle II Guide Book*.

FREQUENTLY ASKED QUESTIONS

#1 What cases should I complete a CIS Maltreatment Assessment on?

You should complete a *CIS Maltreatment Assessment* for all cases opened during the case selection period (October 1st to December 31st, 2003). Generally, if your agency/office counts the case in its official opening statistics reported to a Ministry or government office, then the case is included in the sample and a *CIS Maltreatment Assessment* should be completed, unless your Site Researcher indicates otherwise.

#2 Should I complete a form on only those cases where abuse is suspected?

You should complete an *Intake Face Sheet* and the tear-off portion of the instrument for all cases opened during the data selection period at your agency office (e.g., pre-natal counseling, child/youth behaviour problems, request for services from another office or agency, and where applicable, screened-out cases).

If maltreatment was suspected at any point during the investigation, and the case was opened for assessment investigation (not screened-out) then you should complete the remainder of the *CIS Maltreatment Assessment* (both *Household Information* and *Child Information* sheets). Maltreatment may be alleged by the person(s) making the report, or by any other person(s), including yourself, during

the investigation. For example, complete a *CIS Maltreatment Assessment* if a case was initially referred for parent/adolescent conflict, but later investigated for suspicions regarding abuse and maltreatment during the investigation.

#3 Should I complete a CIS Maltreatment Assessment on screened-out cases?

The procedures for screening cases vary considerably across Canada. While the CIS will not try to capture informally screened-out cases, we will gather face sheet information on screened-out cases that are formally counted as case openings by your agency/office. If in doubt, please contact your Site Researcher.

#4 When should I complete the CIS Maltreatment Assessment?

You should complete the *CIS Maltreatment Assessment* at the same time that you prepare the assessment/investigation report for your agency or office (usually within the first two months of a case being opened). For some child maltreatment investigations, you may find that this does not allow enough time to document the outcome of the full assessment; however, please complete the form to the best of your abilities.

#5 Who should complete the CIS Maltreatment Assessment if more than one person works on the investigation?

The *CIS Maltreatment Assessment* should be completed by the worker who conducts the intake assessment and prepares the assessment or investigation report. The worker with primary responsibility for the case should complete the *CIS Maltreatment Assessment*, if several workers investigate a case.

#6 What should I do if more than one child is investigated?

The *CIS Maltreatment Assessment* primarily focuses on the household; however, the *Child Information* sheet is specific to the individual child being investigated. **Complete one child sheet for each investigated child.** In jurisdictions where all children are automatically investigated, only include those children for whom maltreatment was actually suspected. Additional pads of *Child Information* sheets are available in your training package.

#7 Will I receive training for the CIS Maltreatment Assessment?

All workers who complete investigations in your agency/office will receive training prior to the start of the data collection period. If a worker is unable to attend the training session or is hired after the start of the Canadian Incidence Study, he/she should contact the Site Researcher regarding any specific questions about the form. Your Site Researcher's name and contact number is on the inside cover of the *CIS Guide Book*.

#8 What should I do with the completed forms?

Give the completed *CIS Maltreatment Investigation Form* to your local Agency/Office Contact Person. All forms will be reviewed by the Site Researcher during a site visit, and should he/she have additional questions they will contact you during this visit. Your Agency/Office Contact Person is listed on the inside cover of the *CIS Guide Book*.

#9 Is this information confidential?

The information you provide is confidential, and no identifying information will leave your agency/office. Your Site Researcher will code and enter any near-identifying information from the bottom portion of the tear-off portion of the **Intake Face Sheet** of the **CIS Maltreatment Assessment**, and then destroy that portion of the sheet when the CIS concludes. Please refer to the previous section on Confidentiality.

DEFINITIONS: INTAKE FACE SHEET

Sections that are shaded require the clinical judgment of the investigating worker. Other information (18a, 18b, 19, 36a) may be completed by an agency/office clerical staff or Site Researcher.

Question 1: Date that referral was received

This date refers to the day that the referral source made initial contact with your agency or office.

Question 2: Date the case was opened if not at time of referral

The date the case was opened.

Question 3: Date CIS maltreatment assessment was completed

Please complete the date that the **CIS Child Maltreatment Assessment Form** was completed.

Question 4: Source of allegation/referral

Please fill in all sources of referral that are applicable for each case. This refers to **separate and independent contacts** with the Child Welfare agency or office. When a young person tells a school principal of abuse and the school principal reports this to Child Welfare, you would fill in the circle for this referral as “School”. There was only one contact and referral in this case. If a second source (neighbour) contacted Child Welfare and also reported a form of maltreatment, then you would also fill in the circle for “Neighbour/friend”. Please use this section to fill in all sources of referral.

- Custodial Parent:** Includes parent identified in Section (1) of “Caregiver A or B”.
- Non-custodial Parent:** Contact from an estranged spouse (e.g., individual reporting the parenting practices of her/his spouse).
- Child:** A self-referral by any child listed on the **Intake Face Sheet** of the **CIS Maltreatment Assessment**.
- Relative:** Any relative of the child in question. If child lives with foster parents, and relative of the foster parents report maltreatment, please specify under “Other”.
- Neighbour/Friend:** Includes any neighbour or friend of the children or his/her family.
- Social Assistance Worker:** Refers to a Social Assistance Worker involved with the household.
- Crisis Service/Shelter:** Includes any shelter or crisis service for domestic violence or homelessness.
- Hospital:** Referral originates from a hospital and is made by either a doctor, nurse or social worker rather than a family physician or nurse.
- Public Health Nurse:** Includes nurses involved in services such as family support, family visitation programs and community medical outreach.
- Physician:** A report from any family physician with a single or ongoing contact with the child and/or family.
- School:** Any school personnel (teacher, principal, teacher’s aide, etc.).
- Community/Recreation Centre:** Refers to any form of recreation and community activity programs (e.g., organized sports leagues or Boys and Girls Clubs).
- Mental Health Professional/ Agency:** Includes family service agencies, mental health centres (other than hospital psychiatric wards), and private mental health practitioners (psychologists, social workers, other therapists) working outside of a school/hospital/Child Welfare/YJA setting.
- Other Child Welfare Services:** Includes referrals from mandated Child Welfare service providers from other jurisdictions or provinces.
- Day Care Centre:** Refers to a child care or day care provider.
- Police:** Any member of a Police Force, municipal, provincial/territorial or RCMP.
- Community Agency:** Any other community agency or service.
- Anonymous:** A caller who is not identified.
- Other:** Please specify the source of referral in the section provided (e.g., foster parent, store clerk, etc.).

Question 5: Describe referral and investigated maltreatment

Provide a short description of the referral, including, as appropriate:

- the investigated maltreatment and major investigation results (e.g., type of maltreatment, substantiation, injuries);
- other reasons for referral, if not maltreatment (e.g., adoption home assessment, request for information).

Question 6: List all children in the home

Please include biological, step, adoptive and foster children.

- A) List the first names of the children:** List the first name of all children who are currently living in the home.
- B) Age of all children in the home:** Indicated the age of all the children in the home. Use 0 for children less than 1 year of age.
- C) Sex of all children in the home:** Indicate the sex of all the children in the home.
- D) Subject of referral or investigation:** Indicate which children were investigated because of suspected child maltreatment (abuse or neglect). In jurisdictions that require that all children be routinely interviewed for an investigation, only include those cases where in your clinical opinion maltreatment was suspected at some point (e.g., include three siblings ages 5 to 12 in a situation of suspected

chronic neglect, but do not include the 3-year-old brother of a 12-year-old girl who was sexually abused by someone who does not live with the family and has not had access to the younger sibling).

Question 7: Was child maltreatment alleged by the referral or suspected at any other point

Indicate if child maltreatment was suspected at any point prior to the referral. If you or a co-investigating worker suspected child maltreatment at any point during the referral or the investigation, or child maltreatment was alleged by the referral please fill in “Yes”.

Question 8: Was an assessment/investigation completed

If yes, and the case was opened for assessment and investigation, complete the remainder of the CIS Maltreatment Assessment (Household and Child Information Sheets).

If no, please specify why (e.g., youth older than investigation mandate, no maltreatment alleged, insufficient information).

Tear-off portion of comment sheet

The potentially identifying information on the tear-off section will be kept securely at your agency/office, for purposes of verification. It will be destroyed at the conclusion of the study².

Assessment worker’s name

This refers to the person completing the form. When more than one individual is involved in the investigation, the individual with overall case responsibility should complete the *CIS Maltreatment Assessment*.

First two letters of family surname

Use the reference name used for your agency/office filing system. In most cases this will be the primary caregiver’s last name. If another name is used in the agency/office, please include it under “Alternate Surname”. For example, if a parent’s surname is Thompson, and the two children have the surname of Smith, then put TH and SM. Use the first two letters of the family name only. Never fill in the complete name.

Case number

This refers to the case number used by your agency/office.

Postal code or address

Although the postal code may be difficult to find, this is useful information that may allow us to examine critical community level characteristics. If it is not available, please provide the current address for the family. This information will not leave your office/agency.

² If a new protocol for keeping potentially identifying information is approved by your agency/office, some of this information may be used for follow-up research. At no time will any near-identifying information be available for other purposes.

DEFINITIONS: COMMENT SHEET

Comment sections

Should the *CIS Maltreatment Assessment* fail to capture any information about the child maltreatment investigation, please provide your additional comments under the three comment sections: **Intake Information**, **Household Information**, and **Child Information**.

DEFINITIONS: HOUSEHOLD INFORMATION SHEET

Identity of caregiver (A) and caregiver (B)

The *Household Information* sheet will focus on the immediate household of the child(ren) who have been referred to child welfare. This household is made up of all adults and children living at the address of the investigation. Provide information for Caregiver (A) and Caregiver (B) for questions 1-9 if there are two adults/caregivers living in the household. Complete information on Caregiver (A) if there is only one caregiver in the household.

If you have a unique circumstance that does not seem to fit the categories provided, please write a note in the comment sections on the *Comment Sheet*.

Question 1: Caregiver A/B in the home

Choose one category only. Identify the relationship between the caregiver and the children in the home. If a caregiver is both a biological and step-parent for different children in the household, please check “Step-parent” only.

In the event that there is **only one caregiver residing in the household, and there is another significant caregiver residing outside of the home**, then check “Other Adult (not in household)” and complete Caregiver (B) information on that individual.

Question 2: Sex

Identify if caregiver is male or female.

Question 3: Age

Indicate the caregiver’s age range. If you are not certain of an individual’s age range, please provide your best estimate.

Question 4: Primary income source

We are interested in estimating the primary source of the caregiver’s income. Please choose the category that best describes the caregiver’s source of income. Note that this is a caregiver specific question and does not include income from the second caregiver.

- Full Time:** Individual is employed in a permanent, full-time position.
- Part Time (Less than 30 hours/week):** Refers to a single part-time position.
- Multiple Jobs:** Caregiver has more than one part-time or temporary position.
- Seasonal:** This indicates that the caregiver works at either full-or-part-time positions for temporary periods of the year.
- Employment Insurance:** Caregiver is temporarily unemployed and receiving Employment Insurance Benefits.
- Social Assistance:** Caregiver receives social assistance benefits at this point in time.

- Other Benefit:** Refers to other forms of benefits or pensions (e.g., family benefits, long-term disability insurance, child support payments).
- Unknown:** Check if you do not know the caregiver’s source of income.
- None :** If drugs, prostitution, or other illegal activity please specify in comments section.

Question 5: Educational level

Select the category that best describes the caregiver’s education level. Use provincial or territorial definitions for elementary and secondary levels.

- Elementary or Less:** Caregiver attended some or all of elementary school.
- Some Secondary:** Please check this category if caregiver attended high school, but did not complete.
- Completed Secondary:** Please check this category if caregiver completed high school.
- College/University:** Caregiver attended College or University or other post-secondary technical school, and has partially or totally completed a degree or diploma.
- Unknown:** Check if you do not know the educational level of the caregiver.

Question 6: Ethno-racial group

Examining the ethno-racial background can provide valuable information regarding differential access to child welfare services. Given the sensitivity of this question, this information will not be published out of context. This section uses a checklist of ethno-racial categories used by Statistics Canada in the 1996 Census (Long Questionnaire).

Please check the ethno-racial category that best describes the caregiver and identify the primary language spoken at home by that individual. Select “Other” if you wish to identify two ethno-racial groups, and specify.

A) If Aboriginal: Is the caregiver residing “on” or “off” reserve.

B) Aboriginal Caregiver Status: If First Nations please indicate if the caregiver has formal Indian or treaty status (i.e., registered with the Department of Indian and Northern Affairs Canada).

Question 7: Primary language

Please identify the primary language of the caregiver: English, French or Other and specify.

Question 8: Contact with caregiver in response to investigation

Would you describe the caregiver as being overall cooperative or non-cooperative with the child welfare investigation? Please check “Not Contacted” in the case that you had no contact with the caregiver.

Question 9: Caregiver risk factors

These questions pertain to Caregiver A and/or Caregiver B, and are to be rated as “Confirmed”, “Suspected”, “No” or “Unknown”. Please fill in “Confirmed” if problem has been **diagnosed**, **observed** by you or another worker, or **disclosed** by the caregiver. Use the “Suspected” category if your suspicions are sufficient to include in a written assessment of the household or a transfer summary to a colleague. Fill in “No” if you do not believe there is a problem and “Unknown” if you are unsure or have not attempted to

determine if there was such a caregiver functioning issues. Where applicable, use the **past six months** as a reference point.

Alcohol Abuse: Use of alcohol poses a problem for household.

Drug/Solvent Abuse: Abuse of prescription drugs, illegal drugs, or solvents.

Criminal Activity: Absent due to incarceration, involved in criminal activity (e.g., drug dealing, theft, prostitution, etc.).

Cognitive Impairment: Cognitive ability of caregiver(s) has an impact on the quality of care-giving provided in the household.

Mental Health Issues: Any mental health diagnosis or problem.

Physical Health Issues: Chronic illness, frequent hospitalizations, or physical disability.

Few Social Supports: Social isolation or lack of social supports.

Maltreated As a Child: Indicate whether the caregiver suffered maltreatment as a child.

Victim of Domestic Violence: During the past six months the caregiver was a victim of domestic violence, include physical, sexual and verbal assault.

Perpetrator of Domestic Violence: During the past six months the caregiver was perpetrator of domestic violence.

Other: Identify other issues/concerns that describe caregiver functioning.

Question 10: Other adults in the home

Please fill in all categories that describe adults (excluding Caregiver A and B) who lived in the house at the time of

the referral to child welfare. Note that children in the home have already been described on the **Intake Face Sheet**. If recent changes in household, describe the situation at the time of the referral. Please fill in all that apply.

Question 11: Caregiver outside the home

Identify any other caregivers living outside of the home who provide care to any of the children in the household, including a separated parent who has some access to the child(ren). Please fill in all that apply.

Question 12: Child custody dispute at this time

Specify if there is an ongoing child custody/access dispute at this time (court application has been made or is pending).

Question 13: Household income estimated

Please provide an estimate of the family income. This is critical information to examine the effects of child poverty. Use the “Unknown” category only if you cannot provide any estimate of this figure.

Question 14: Housing

These questions address the housing accommodations and conditions related to household (e.g., safety of housing and frequency of moves). Indicate the housing category that best describes the living situation of this household.

Own Home: A purchased house, condominium, or townhouse.

Rental: A private rental house, townhouse or apartment.

- Public Housing:** A unit in a public rental-housing complex (i.e., rent-subsidized, government-owned housing), a house, townhouse or apartment on a military base, or band housing.
- Shelter/Hotel:** A homeless or family shelter, SRO hotel (single room occupancy), or motel accommodations.
- Unknown:** Housing accommodation is unknown.
- Other:** Specify any other form of shelter.

Question 15: Unsafe housing conditions

In your opinion, are children at risk for injury or impairment in this living situation (e.g., broken windows, insufficient heat, parents and children sharing single room)? Please check “Unknown” only if you have not been to the home or residence.

Question 16: Home overcrowded

Indicate if household is made up of multiple families and/or overcrowded.

Question 17: Approximate number of moves within the last 12 months

Indicate the number of family moves within the past 12 months.

Question 18: Case status information

Describe case status at the time that you are completing the form.

A) Case previously opened: Has this family previously had an open file with Child Welfare? Please respond if there is documentation, or if you are aware that there have been

previous openings. Please estimate the number of previous openings. This would relate to case openings for any of the children identified as living in the home (listed on the **Intake Face Sheet**).

B) If yes, how long since previous opening: How many months between the time the case was **last closed** and this current opening?

Question 19: Cases will stay open for ongoing child welfare services

At the time you are completing the *CIS Maltreatment Assessment Form*, do you plan to keep the case open to allow ongoing child welfare services?

Question 20: Referral(s) for any family member

Indicate referrals that have been made to programs designed to offer services beyond the parameters of “ongoing child welfare services”. Include referrals made internally to a special program provided by your agency/office as well as referrals made externally to other agencies/services. Note whether a referral was made and is part of the case plan, not whether the young person or family has actually started to receive services. Please fill in all that apply.

- Parent Support Program:** Any group program designed to offer support or education (e.g., Parents Anonymous, Parenting Instruction Course, Parent Support Association).
- In-home Parenting Support:** Home-based support services designed to support families, reduce risk of out-of-home placement, or reunify children in care with their family.

- Other Family/Parent Counseling:** Include programs for family therapy/counseling or couple counseling (e.g., family service bureau, mental health centre).
- Drug/Alcohol Counseling:** Addiction program (any substance) for caregiver(s) or children.
- Welfare/Social Assistance:** Referral for social assistance to address financial concerns of the household.
- Food Bank:** Referral to any food bank.
- Shelter Services:** Regarding domestic violence or homelessness.
- Domestic Violence Services:** Referral for services/counseling regarding domestic violence, abusive relationships, or the effects of witnessing violence.
- Psychiatric/Psychological Services:** Child or parent referral to psychological or psychiatric services (trauma, high-risk behaviour, or intervention).
- Special Education Referral:** Any specialized school program to meet a child’s educational, emotional, or behavioural needs.
- Recreational Program:** Referral to a community recreational program (e.g., organized sports leagues, community recreation, Boy’s and Girl’s Club).
- Victim Support Program:** Referral to a victim support program (e.g., sexual abuse disclosure group).
- Medical/Dental Services:** Any specialized service to address the child’s immediate medical or dental health needs.
- Child/Day Care:** Any paid child/day care services, including staff-run and in-home services.

- Cultural Services:** Services to help children or families strengthen their cultural heritage.
- Other Child/Family Referral:** Indicate and specify any other child or family-focused referral.

DEFINITIONS: CHILD INFORMATION SHEET

Question 21: Child name and sex

Indicate the first name and sex of the child for which the maltreatment assessment is being completed.

Question 22: Age

Indicate the child's age.

Question 23: Aboriginal status

Indicate the Aboriginal status of the child for which the maltreatment assessment is being completed.

Question 24: Child functioning

This section focuses on issues related to a child's level of functioning. Please fill in "Confirmed" if problem has been **diagnosed, observed** by you or another worker, or **disclosed** by the parent or child. Suspected means that, in your clinical opinion, there is reason to suspect that the conditions may be present, but they have not been diagnosed, observed or disclosed. Fill in "No" if you do not believe there is a problem and "Unknown" if you are unsure or have not attempted to determine if there was such a child functioning issues. Where appropriate, use the **past six months** as a reference point.

- Depression/Anxiety:** Feelings of depression or anxiety that persist for most of every day for two weeks or longer, and interfere with the child's ability to manage at home and at school.
- ADD/ADHD:** Attention Deficit Disorder/Attention Deficit Hyperactivity Disorder includes: distractibility (quickly moving attention from one thing to another); impulsivity (acting quickly without thinking of the consequences); hyperactivity (excessive activity and physical restlessness). These behaviours are very noticeable, occur over a long period of time in many situations, and are troublesome to others.
- Negative Peer Involvement:** High risk peer activities (e.g., gang activities, graffiti or vandalism).
- Alcohol Abuse:** Problematic consumption of alcohol (consider age, frequency and severity).
- Drug/Solvent Abuse:** Include prescription drugs, illegal drugs and solvents.
- Self-Harming Behaviour:** Include high-risk or life-threatening behaviour, suicide attempts, and physical mutilation or cutting.
- Violence Toward Others:** Aggression and violence to other children or adults.
- Running (One Incident):** Has run away from home (or other residence) on one occasion, for at least one overnight period.
- Running (Multiple Incidents):** Has run away from home (or other residence) on multiple occasions for at least one overnight period.
- Inappropriate Sexual Behaviour:** Child involved in inappropriate sexual behaviour.
- Other Emotional or Behavioural Problems:** Significant emotional or behavioural problems not covered by the previous items.
- Learning Disability:** Disability that is usually identified in schools. Children with learning disabilities have normal or above normal intelligence, but deficits in one or more areas of mental functioning (e.g., language usage, numbers, special, reading, work comprehension).
- Specialized Education Services:** Any special education program for learning disability, special needs, or behaviour problems.
- Irregular School Attendance:** Irregular attendance and truancy (+5 days/month).
- Developmental Delay:** Is characterized by delay in intellectual development. It is typically diagnosed when a child does not reach his/her developmental milestones at expected times, such as speech and language, fine or gross motor skills, and/or personal and social skills.
- Physical Disability:** Physical disability is the existence of a long-lasting condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting, or carrying. This includes sensory disability conditions, such as blindness, deafness, or a severe vision or hearing impairment that noticeably affects activities of daily living.
- Substance Abuse-Related Birth Defects:** Birth defects related to substance abuse of the biological parent (e.g., Fetal Alcohol Syndrome (FAS)/Fetal Alcohol Effect (FAE), cocaine addiction or solvent use).
- Positive Toxicology At Birth:** When a toxicology screen for a newborn tests positive for the presence of drugs or alcohol.

- Other Health Condition:** Ongoing physical health condition (e.g., chronic disease, and frequent hospitalizations).
- Psychiatric Disorder:** Psychiatric disorder, use the confirmed category only if diagnosed by a psychiatrist (e.g., conduct disorder, anxiety disorder).
- Youth Criminal Justice Act involvement:** Charges, incarceration or alternative measures with the Youth Justice system.
- Other:** Specify any other conditions related to child functioning.

Question 25: Maltreatment codes

Select the applicable maltreatment codes from the list provided (1-25), and write these numbers **clearly** in the boxes beside Question 26. Please enter in the first box the primary form of maltreatment that best characterizes the investigated maltreatment.

The maltreatment typology developed here uses four major forms of maltreatment: **Physical Abuse, Sexual Abuse, Neglect, and Emotional Maltreatment**. These categories are comparable those used in the first cycle of the CIS, the Ontario Incidence Study of Reported Child Abuse and Neglect, and the U.S. National Incidence Study of Child Abuse and Neglect.

Because there is significant variation in provincial and territorial child welfare statutes, we are using a broad typology. Please rate cases **on the basis of your clinical opinion**, not on provincial, territorial or agency/office-specific definitions.

In cases of physical or sexual abuse where several codes may apply please select the code that you consider to be the most harmful to the child. For

example, if sexual abuse involves fondling and penetration, you would most likely select penetration. If more than one code applies to the physical or sexual abuse, then enter the most harmful and circle the other codes that apply (circle the corresponding number from the list under #25).

All major forms of alleged, suspected or investigated maltreatment should be noted in the maltreatment code box regardless of the outcome of the investigation. For example, a three year old repeatedly found playing on a busy street is neglected even if harm has not yet occurred.

Physical Abuse

The child has suffered, or is at substantial risk of suffering, physical harm, at the hands of the child's caregiver.

Include any alleged physical assault, including abusive incidents involving some form of punishment. If several types of physical abuse are involved, **please identify the most harmful subtype** and circle the codes of other relevant descriptors.

- Shake, Push, Grab, or Throw:** Include pulling or dragging a child as well as shaking an infant.
- Hit with Hand:** Include slapping and spanking, but not punching.
- Punch, Kick, or Bite:** Include as well any other hitting with other parts of the body (e.g., elbow or head).
- Hit with Object:** Includes hitting with a stick, a belt or other object, throwing an object at a child, but does not include stabbing with a knife.
- Other Physical Abuse:** Include any other form of physical abuse, including choking, strangling, stabbing, burning, shooting, poisoning, and the abusive use of restraints.

Sexual Abuse

The child has been, or is at substantial risk of being, sexually molested or sexually exploited. This includes oral, vaginal or anal sexual activity, attempted sexual activity, sexual touching or fondling, exposure, voyeurism, involvement in prostitution or pornography, and verbal sexual harassment. If several types of sexual activity are involved, **please identify the most intrusive subtype**. Include both intra-familial and extra-familial sexual abuse, as well as sexual abuse involving an older child or youth perpetrator.

- Penetration:** Penile, digital or object penetration of vagina or anus.
- Attempted Penetration:** Attempted penile, digital or object penetration of vagina or anus.
- Oral Sex:** Oral contact with genitals either by perpetrator or by the child.
- Fondling:** Touching or fondling genitals for sexual purposes.
- Sex Talk:** Verbal or written proposition, encouragement, or suggestion of a sexual nature (include face-to-face, phone, written and internet contact, as well as exposing the child to pornographic material).
- Voyeurism:** Include activities where the alleged perpetrator observes the child for the perpetrator's sexual gratification. Use the "Exploitation" code if voyeurism includes pornographic activities.
- Exhibitionism:** Include activities where the perpetrator is alleged to have exhibited himself/herself for his/her own sexual gratification.
- Exploitation:** Include situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.

Neglect

The child has suffered harm or the child's safety or development has been endangered as a result of the caregiver(s)' failure to provide for or protect the child. Please note that the term "neglect" is not consistently used in all provincial/territorial statutes, but interchangeable concepts include: "failure to care and provide or supervise and protect"; "does not provide", "refuses or is unavailable or unable to consent to treatment".

- ❑ **Failure to Supervise:** Physical harm
The child suffered or is at substantial risk of suffering physical harm because of the caregiver's failure to supervise or protect child adequately. Failure to supervise includes situations where a child is harmed or endangered as a result of a caregiver's actions (e.g., drunk driving with a child, or engaging in dangerous criminal activities with a child).
- ❑ **Failure to Supervise:** Sexual harm:
The child has been, or is at substantial risk of being sexually molested or sexually exploited, and the caregiver knows or should have known of the possibility of sexual molestation and failed to protect the child adequately.
- ❑ **Permitting Criminal Behaviour:**
A child has committed a criminal offence (e.g., theft, vandalism or assault) with the encouragement of the child's caregiver, or because of the caregiver's failure or inability to supervise the child adequately.
- ❑ **Physical Neglect:** The child has suffered or is at substantial risk of suffering physical harm caused by the caregiver(s)' failure to care and provide for the child adequately. This includes inadequate nutrition/clothing, and unhygienic dangerous living conditions. There must be

evidence or suspicion that the caregiver is at least partially responsible for the situation.

- ❑ **Medical Neglect:** The child requires medical treatment to cure, prevent or alleviate physical harm or suffering and the child's caregiver does not provide, or refuses, or is unavailable, or unable to consent to the treatment. This includes dental services when funding is available.
- ❑ **Failure to Provide Psych. Treatment:** The child is at substantial risk of suffering from either emotional harm demonstrated by severe anxiety, depression, withdrawal, self-destructive or aggressive behaviour; or a mental, emotional or developmental condition that could seriously impair the child's development. The child's caregiver does not provide, or refuses, or is unavailable, or unable to consent to treatment to remedy or alleviate the harm. This category includes failing to provide treatment for school-related problems such as learning and behaviour problems, as well as treatment for infant development problems such as non-organic failure to thrive. Parent awaiting service should not be included in this category.
- ❑ **Abandonment:** The child's parent has died or is unable to exercise custodial rights and has not made adequate provisions for care and custody, or the child is in a placement and parent refuses/unable to take custody.
- ❑ **Educational Neglect:** Caregivers knowingly permit chronic truancy (5+ days a month), or fail to enroll the child, or repeatedly keep the child at home. If child is experiencing mental, emotional, or developmental problems associated with school, and treatment is offered

but caregivers do not cooperate with treatment, classify the case under failure to provide treatment as well.

Emotional Maltreatment

- ❑ **Emotional Abuse:** The child has suffered or is at substantial risk of suffering from mental, emotional or developmental problems caused by overtly hostile or punitive treatment, or habitual or extreme verbal abuse (e.g., threatening, belittling). If treatment is offered but caregivers do not cooperate, classify case under failure to provide treatment as well.
- ❑ **Non-Organic Failure to Thrive:** A child under three, who has suffered a marked retardation or cessation of growth for which no organic reasons can be identified. Failure to thrive cases where inadequate nutrition is the identified cause should be classified as physical neglect. Non-organic failure to thrive is generally considered to be a form of psychological maltreatment, however it has been classified as a separate category because of its particular characteristics.
- ❑ **Emotional Neglect:** The child has suffered or is at substantial risk of suffering from mental, emotional or developmental problems caused by inadequate nurturing or affection. If treatment is being offered but caregivers are not cooperating, classify case under failure to provide treatment as well.
- ❑ **Exposed to Domestic Violence:** A child has been a witness to violence occurring between the caregivers (or a caregiver and his/her partner). This would include situations where the child indirectly witnessed the violence (e.g., saw the physical injuries on his/her caregiver the next day or overheard the violence).

Question 26: Alleged perpetrator

This section relates to the individual who is alleged, suspected or guilty of maltreatment towards the young person in question. Fill in either Caregiver A, Caregiver B or Other and please specify the relationship of the alleged perpetrator to the child. If you select Caregiver A or Caregiver B, please write in a short descriptor (e.g., mom, dad or “boyfriend”) to allow us to verify consistent use of the label between the Household and Child sheets. Note that different people can be responsible for different forms of maltreatment (e.g., common-law partner abuses child, but other parent could possibly have prevented the abuse). If you responded with “Other”, please specify relationship to child (e.g., brother, uncle, grandmother, teacher, doctor, stranger, classmate, neighbour, family friend). Identify the alleged perpetrator regardless of the level of substantiation at this point of the investigation.

A) If “Other” Alleged Perpetrator, Age:

If the alleged perpetrator is “Other”, please indicate the age of this individual. Age is essential information used to distinguish between child, youth and adult perpetrators. If there are multiple alleged perpetrators, please describe the perpetrator associated with the primary form of maltreatment.

B) If “Other” Perpetrator, Sex:

Please indicate the sex of the “Other” alleged perpetrator.

Question 27: Substantiation

Indicate the level of substantiation at this point in your investigation.

- Substantiated:** A case is considered “Substantiated” if the balance of evidence indicates that abuse or neglect has occurred.

- Suspected:** Insufficient evidence: A case is “Suspected” if you do not have enough evidence to substantiate maltreatment, but you also are not sure that maltreatment can be ruled out.

- Unfounded:** A case is “Unfounded” if the balance of evidence indicates that abuse or neglect has not occurred.

Question 27A: If unfounded, was report a malicious referral?

Identify if this case was intentionally reported while knowing the allegation was unfounded. This could apply to conflictual relationships (e.g., custody dispute between parents, disagreements between relatives, disputes between neighbours).

Question 28: Was alleged maltreatment a form of punishment?

Indicate if the alleged maltreatment was a form of punishment. This includes situations where abusive punishment was investigated but eventually unfounded.

Question 29: Duration of maltreatment

Check the duration of maltreatment, as it is known at this point of time in your investigation. This can include a single incident, multiple incidents for less than six months in duration, or multiple incidents longer than six months in duration. If this case is unfounded, then the duration needs to be listed as “Not Applicable (Maltreatment unfounded)”.

Question 30: Physical harm

Describe the physical harm suspected or known to have been caused by each

of the investigated forms of maltreatment. Please include harm ratings even in accidental injury cases where maltreatment is unfounded, but the injury triggered the investigation.

- No Harm:** There is no apparent evidence of physical harm to the child as a result of maltreatment.
- Bruises/Cuts/Scrapes:** The child suffered various physical hurts visible for at least 48 hours.
- Burns and Scalds:** The child suffered burns and scalds visible for at least 48 hours.
- Broken Bones:** The child suffered fractured bones.
- Head Trauma:** The child was a victim of head trauma (note that in shaken infant cases the major trauma is to the head not to the neck).
- Fatal:** The child has died, maltreatment was suspected during the investigation as the cause of death. Include cases where maltreatment was eventually unfounded.
- Other Health Conditions:** Other physical health conditions, such as untreated asthma, failure to thrive or STDs.

Question 31: Physical harm

A) **Medical treatment required for injury:** In order to help us rate the severity of any documented physical harm, please indicate whether medical treatment was required as a result of the injury or harm for any of the investigated forms of maltreatments.

B) **Health or safety seriously endangered by suspected or substantiated maltreatment:** In cases of “suspected” or “substantiated” maltreatment indicate whether the child’s health or safety were endangered to the extent that the child could have

suffered life threatening or permanent harm (e.g.: three year old child wandering on busy street, child found playing with dangerous chemicals or drugs).

C) History or undetected or misdiagnosed injuries: Indicate whether the investigation revealed a history of previously undetected or misdiagnosed injuries.

Question 32: Mental or emotional harm

A) No current signs, but mental or emotional harm is probable:

Indicate if the child is showing no symptoms, but in your opinion mental or emotional harm is probable. If child is showing symptoms indicate no.

B) Child shows signs of mental or emotional harm: Indicate whether child is showing signs of mental or emotional harm (e.g., nightmares, bed wetting or social withdrawal following the maltreatment incident(s)).

C) Exhibited mental or emotional harm requires treatment: Indicate whether child is exhibiting symptoms of mental or emotional harm requiring therapeutic treatment.

Question 33: Physician/nurse conducted a physical examination of the child

Indicate if a physician or nurse conducted a physical examination of the child over the course of the investigation.

Question 34: Out-of-home placement

Check one category related to the placement of the child. If the child is already living in an alternative living situation (emergency foster home,

receiving home), please indicate the setting where the child has spent the most time.

No Placement Required: No placement is required following the investigation.

Placement Considered: At this point of the investigation, an out-of-home placement is still being considered.

Informal Kinship Care: An informal placement has been arranged within the family support network (kinship care, extended family, traditional care), the child welfare authority does not have temporary custody.

Kinship Foster Care: A formal placement has been arranged within the family support network (kinship care, extended family, customary care), the child welfare authority has temporary or full custody and is paying for the placement.

Other Family Foster Care: Include any family-based care, including foster homes, specialized treatment foster homes, and assessment homes.

Group Home Placement: Out of home placement required in a structured group living setting.

Residential/Secure Treatment Centre: Placement required in a therapeutic residential treatment centre to address the needs of the child.

Question 35: Child welfare court

There are three categories to describe the current status of child welfare court at this time in the investigation. These are: “No court considered”, “application considered”, and “application made.” Select one category. If investigation is not completed, please answer to the best of your knowledge at this time. Please fill in one only.

Question 36: Previous reports

A) Child previously reported to child welfare for suspected maltreatment: This section collects information on previous reports to Child Welfare for the individual child in question. Please report if the child has been previously reported to Child Welfare authorities because of suspected maltreatment. Please use “Unknown” if you are aware of an investigation but cannot confirm this. Note that this is a child-specific question as opposed to the previous reports questions on the Household Information sheet.

B) If yes, was the maltreatment substantiated: Please indicate if the maltreatment was substantiated.

Question 37: Police involvement in child maltreatment investigation

Indicate if there was a police investigation only or if charges were laid. If police investigation is ongoing and a decision to lay charges has not yet been made select the “investigation only” item.

Question 38: Police involvement in adult domestic violence investigation

Indicate if there was a police investigation only or if charges were laid. If police investigation is ongoing and a decision to lay charges has not yet been made, select the “investigation only” item.

Question 39: Caregivers use spanking as a form of discipline

Indicate if the caregiver uses spanking as a form of discipline. Please use “Unknown” if you are unaware of the caregiver using spanking.

Appendix F

CASE VIGNETTES

The following are the case vignettes used during training sessions to ensure that workers understood how to complete the Maltreatment Assessment Form.

INTAKE ASSESSMENT: VIGNETTE – REBECCA

File Number: 2345-234 G

Referring Source:
School Vice-Principal

Date of Referral: October 6

Family Name: Smith

Ethno-racial Group: White

Mother's Name: Betsy Smith

Father's Name: Barry Smith

Children in the Family Home:
Rebecca

Date of Birth:
02/02/92

Address at Time of Referral:
222 Apple Street
Vancouver, Ontario
D3E F4G

Referral Summary:

Date: 06/10/03 Vice Principal Q called the office about an alleged sexual abuse involving a student at his school. Rebecca's mother had called Q after Rebecca had disclosed to her that her father had touched her breasts and had made Rebecca touch his penis.

The parents are divorced. Mrs. Smith has had custody for a number of years. Rebecca lives with her mother in a rented townhouse. Mrs. Smith is 31 and she works full time as a grocery store clerk and makes \$20,000 annually. Mr. Smith is 32 and is presently unemployed but has worked as a computer software salesperson in the past. He receives monthly employment insurance. Rebecca visits her father every other weekend, Friday to Sunday at his apartment. There is also a Thursday evening visit.

Action Taken:

Date: 06/10/03 Police officer J. and Mrs. Smith were contacted and arrangements were made to interview Rebecca at the police station on October 7. The CAS has no previous record of this family. Mr. Smith has criminal convictions for drug possession and for driving while impaired. There is no record of any violence.

Date: 07/10/03 Constable J. of the Youth Bureau, Mrs. Smith and Rebecca were met at the police station. Mrs. Smith was interviewed alone. She explained that she has had custody of Rebecca for three years. Her father has been in Vancouver only one year; prior to that he was living in Calgary. Betsy has recently sought treatment for her own childhood sexual abuse, by her father. She is seeing a therapist weekly. Her father has not been charged but is being investigated by the police.

During Rebecca's interview both the police and I were present. The interview was videotaped. Rebecca stated that the first incident occurred a few weeks ago when she was sleeping over at her father's. Rebecca reported that shortly after she went to bed, her father came into the bedroom, bent over the bed and touched her breasts under her pyjamas, rubbing them with his fingers. Her father said "shh shh" but nothing else.

Rebecca reported that the second incident occurred on the most recent visit. Her father again came into the bedroom after she had been asleep. He reached for her hand and had her touch his penis. He whispered "it's okay, it's okay." Rebecca provided details of both events remembering what pajamas she was wearing, and noting that during the second incident her father was only wearing his undershirt. Rebecca indicated that her father had an erection during the second incident.

Rebecca stated that she is afraid that something else will happen and that her father may try to hurt her again.

Later that evening the police officer indicated that Mr. Smith was charged with sexual assault. No contact is allowed between Mr. Smith and his daughter at this time. Both Rebecca and her mother are accepting a referral to the disclosure group.

Date 8/10/03: A follow-up visit to the home was conducted. The home is adequately equipped and tidy. Rebecca

and her mother were feeling calm and still prepared to attend the disclosure group.

Date: 10/11/03: A message was left for Betsy Smith's therapist to call me.

I spoke with the family doctor who has known Mrs. Smith and Rebecca for 8 years. The doctor indicated that she had normal childhood milestones. She was functioning well in school and had no health problems. The doctor noted that the parents separated because of Mr. Smith's drug and alcohol use. He had no concerns about Mrs. Smith's emotional health or her physical health.

A referral was made to the Sexual Abuse Disclosure Group.

Investigation Conclusions:

Date 11/11/03: This case involves the sexual abuse of Rebecca by her father; Barry. The mother presents as a concerned and supportive parent. Rebecca was very clear and credible when she was interviewed and the police have charged Mr. Smith. Rebecca felt relieved after she made the disclosure. She is not displaying signs of emotional distress at this time. Rebecca is close with her mother and has the support of her aunts and neighbourhood friends.

Investigation Recommendations:

- Interview Mr. Smith,
- To support and encourage both mother and daughter to attend the Disclosure Group.

Outcome:

Case to be transferred to Family Services.

INTAKE ASSESSMENT: VIGNETTE – PETER

File Number: 1234-567A

Referring Source:
Tom B – School Principal

Date of Referral: September 21

Family Name: Nyugen

Mother's Name: Marla Nyugen

Father's Name: Martin Nyugen

Children in the Family Home:

Peter
Sean

Date of Birth:

Peter: 28/02/98
Sean: 05/03/00

Address at Time of Referral:

111 Anystreet, Apartment #1
Barrie, Ontario
A1B C2D

Language Spoken:

Chinese/Vietnamese
(limited English)

Referral Summary:

Date: 21/09/03 Peter (5 years) came to school complaining that his father hit him with a shoe. He pointed to his groin area. The school principal said that Peter stated earlier in the year that his father hits him on the bottom. School stated Peter goes home from school with grade 5 and 6 students; D and N. D and N reported having seen Peter's father hit him outside of the family's store.

D and N say Peter is hard to control on the daily walk home from school and see him as aggressive with his peers. Peter's teacher (L) reports that Peter regularly displays behaviour problems and that he misses approximately 3 days of school each month.

Action Taken:

Date: 22/09/03 Peter was in attendance at school and in the presence of his teacher L was interviewed in regards to the above referral report. Peter spoke with ease and explained that his father hit him with a shoe when he ran out of the family's store. Peter indicated that the shoe hit him on his right inner thigh near the groin. Peter openly stated that his father hits him with his hand and a stick. The child did not appear to be saddened or feel it was out of the norm. He did not appear frightened by his parents and was willing to have us talk with his father. The boy jumped around much in the conversation and had a difficult time concentrating on the questions he was asked.

Upon examination there was no bruising on the child's body.

Peter told us that his father had been in jail for fighting with some neighbourhood youth. He went into much detail about the fighting.

I called Peter's father and requested an interview. Mr. Nyugen agreed and directed me to the family's apartment. He said that his wife would also be available to talk with me.

I contacted the 1001 Division Youth Bureau to consult regarding this case. The possibility of over-discipline possibly cultural was discussed. During this consultation the police verified that Mr. Nyugen had recently been jailed on a warrant, which originated from a charge of "uttering death threats". The details of the charge were not available.

Date: 23/09/03: Mother and father appeared calm and pleasant. Mother is in her early thirties, father is approximately ten years older. The apartment appeared neat and orderly. Mr. Nyugen described Peter as hard to manage and as a result he was primarily responsible for the child care for Peter. Peter is

always asking for money from the till. I believe this may be attention seeking and parents might not have much time to spend with the boy if they are running the store. The store is not doing very well which is an added stressor on the family. The father says he has never hit the boy and explains how much he values him, especially being the oldest male.

Father was willing to have ongoing support from the agency and assured me he does not use physical discipline. Peter and his father appeared to have a warm relationship.

Investigation Conclusions:

Date: 24/09/03 The Nyugen family uses physical discipline, in my opinion, and I have difficulty with the father's denial in this regard. I do not believe it is abusive but could lean towards over-discipline. The father's recent charge of "Uttering Death Threats" is concerning.

Further assessment needs to be done around gathering information on family history, family dynamics, etc. These assessments should be completed in the family's primary language.

I believe that this family could benefit from some child management training. Supervision of both children should also be explored.

Investigation Recommendations:

- Further assessment
- Child management

Protection Concerns:

- Child's behaviour
- Parent's disciplinary measures
- Possible supervision difficulties
- Cultural differences

Outcome:

Case to be transferred to Family Services.

Appendix G

WORKER INFORMATION FORM

The following is the worker information form completed by the investigating workers.



CIS OFFICE USE ONLY

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WORKER INFORMATION FORM

Thank you for taking the time to complete this Worker Information Form for the Canadian Incidence Study of Reported Child Abuse and Neglect. This information is confidential and you will not be identified in the study report or within your agency office. If you have any questions about completing this form, please contact your assigned Research Associate: _____
 Tel: (_____) _____

A. BACKGROUND INFORMATION

1. Name: _____

2. Age: 3. Gender: Male Female

4. Ethno-racial Group

White Latin American Arab/West Asian (e.g. Armenian, Egyptian, Iranian, Lebanese, Moroccan)

Chinese Aboriginal South Asian (e.g. East Indian, Pakistani, Punjabi, Sri Lankan)

Black (e.g. African, Haitian, Jamaican) Southeast Asian other than Chinese (e.g. Filipino, Indonesian, Japanese, Korean, Laotian, Vietnamese)

Other: _____

5. Primary Language: English French Other (specify): _____

6. Agency: _____

7. Team/Branch: _____

8. Which category best describes your current position?

Intake worker (primarily investigations and referrals) Combination of ongoing and intake

Ongoing service worker (primarily ongoing cases) Other (specify): _____

B. CASELOAD INFORMATION

9. What is your current caseload? 10. What is the average size of your caseload?

(# of open cases at this time)

C. EDUCATION

11. Please check all diplomas that you have obtained College diploma BA/BSc BSW MSc MSW PhD

D. EXPERIENCE

12. Total years you have worked as a social worker? 13. How many years of this were spent in child protection?

E. CHILD PROTECTION TRAINING

14. Please fill in all specific training that you have received

General child abuse Crisis intervention Neglect assessment Family preservation intervention

Sexual abuse training Risk assessment Child development Cultural sensitivity training

Physical abuse training Solution focussed interventions Other: _____



Appendix H

VARIANCE ESTIMATES AND CONFIDENCE INTERVALS

The following is a description of the method employed to develop the sampling error estimation for the CIS-2003. As well as the variance estimates and confidence intervals for the CIS-2003 estimates. Variance estimates are provided for the statistics in the “total” column for most tables in the Major Findings Report.

SAMPLING ERROR ESTIMATION

The CIS-2003 uses a random sample survey method to estimate the incidence and characteristics of cases of reported child abuse and neglect across the country. The study estimates are based on the core CIS-2003 sample of 11,562 child investigations drawn from a total population of 6,948 family cases open for service in Canada.

The size of this sample ensures that estimates for figures such as the overall rate of reported maltreatment, substantiation rate, and major categories of maltreatment have a reasonable margin of error. However, the margin of error increases for estimates involving less-frequent events, such as the number of reported cases of medical neglect or the number of children under four years of age placed in the care of child welfare services. For extremely rare events, such as voyeurism, the margin of error is very large, and such estimates should be interpreted as providing a

rough idea of the relative scope of the problem rather than a precise number of cases.

Appendix H tables provide the margin of error for selected CIS-2003 estimates. For example, the estimated number of child maltreatment investigations in Canada (excluding Quebec) is 217,319. The lower 95 per cent confidence interval is 161,242 child investigations and the upper confidence interval is 247,647 child investigations. This means that there is a 95 per cent chance that the true number of substantiated maltreatment investigations is between 161,242 and 247,647. In contrast, the estimated number of substantiated investigations involving head trauma is 371, but the 95 per cent confidence interval is between 64 and 678 child investigations. The estimate of 371 is unlikely to be exactly correct; however, we can be reasonably sure that the actual number of cases involving head trauma investigated by child welfare services in Canada is in the range of 64 to 678 investigations.

The error estimates do not account for any errors in determining the annual and regional weights. Nor do they account for any other non-sampling errors that may occur, such as inconsistency or inadequacies in administrative procedures from site to site. The error estimates also cannot account for any variations due to seasonal effects. The accuracy of these annual estimates

depends on the extent to which the sampling period is representative of the whole year.

To assess the precision of the CIS-2003 estimates, sampling errors were calculated from the sample with reference to the fact that the survey population had been stratified and that a single cluster (or site) had been selected randomly from each stratum. From the selected cluster all cases in the three-month period were sampled. In a few situations, a shorter period of time was sampled or very random cases were sampled. An annualization weight was used to weight the survey data to represent annual cases. A regionalization weight was used to weight the survey data so that data from sites represented regions or strata.

Sampling errors were calculated by determining the sampling variance and then taking the square root of this variance. The sampling variability that was calculated was the variability due to the randomness of the cluster selected. Had a different cluster been selected, then a different estimate would have been obtained. The sampling variance and sampling error calculated are an attempt to measure this variability. Thus, the measured variability is due to the cluster. We did not measure the variability, however, because only three months were sampled, not a full year, and in some situations only every second case was sampled.

To calculate the variance, the stratified design allowed us to assume that the variability between strata was zero and that the total variance at the Canada level was the sum of the variance for each strata.

Calculating the variance for each strata was a problem, because only one cluster had been chosen in each strata. To overcome this problem we used the approach given in Rust and Kalton (1987).¹

This approach involved collapsing stratum into groups (collapsed strata); the variability among the clusters within the group was then used to derive a variance estimate. Collapsing of strata was done to maintain homogeneity as much as possible.

The estimated population of incidences ($\hat{\tau}$) with the characteristic of interest is:

$$\hat{\tau} = \sum_{h=1}^H \hat{\tau}_h$$

Where $\hat{\tau}_h$ is the population of incidences with the characteristic of interest for the hth stratum.

$$\hat{\tau}_h = \sum_i w_h y_{hi}$$

where:

w_h is the weight for the hth stratum
 y_{hi} is 1 if the ith unit (case) in stratum h has the characteristic of interest, is 0 if the ith unit (case) in stratum h does not have the characteristic of interest, and we sum over all the i units (cases) in the hth stratum.

For our study the H strata were partitioned into J groups of strata, known as collapsed strata, and there were $H_j \geq 2$ strata in the collapsed stratum j. Stratum h within collapsed stratum j is denoted by h(j). The collapsed strata estimator of the variance $\hat{\tau}$ is

$$\text{var}(\hat{\tau}) = \sum_j \frac{H_j}{(H_j - 1)} \sum_h^{H_j} \left[\hat{\tau}_{h(j)} - \frac{\hat{\tau}_j}{H_j} \right]^2$$

Where $\hat{\tau}_{h(j)}$ denotes the unbiased estimator of $\tau_{h(j)}$, the parameter value for stratum h in collapsed stratum j, and

$$\hat{\tau}_j = \sum_h^H \hat{\tau}_{h(j)}$$

The following are the variance estimates and confidence intervals for CIS-2003 variables of interest. The tables are presented to correspond with the tables in the chapters of the Major Findings Report. Each table reports the estimate, standard error, coefficient of variation, lower and upper confidence interval.

APPENDIX H: TABLE 3-1
Estimate of Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

Variable	Estimate*	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Child Investigations	217,319	28,611	13.17	161,242	247,647
Incidence per 1,000	45.68	6.01	13.17	33.89	52.05

¹ Rust, K., & Kalton, G. (1987). Strategies for collapsing strata for variance estimation. *Journal of Official Statistics*, 3 (1): 69-81.

APPENDIX H: TABLE 3-3**Primary Category of Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Physical Abuse	25,257	3,756	14.87	17,895	32,619
Incidence per 1,000	5.31	0.79	14.87	3.76	6.86
Sexual Abuse	2,935	784	26.70	1,399	4,471
Incidence per 1,000	0.62	0.17	26.70	0.30	0.94
Neglect	30,366	3,959	13.04	22,607	38,125
Incidence per 1,000	6.38	0.83	13.04	4.75	8.01
Emotional Maltreatment	15,369	2,697	17.55	10,084	20,654
Incidence per 1,000	3.23	0.57	17.55	2.12	4.34
Exposure to Domestic Violence	29,370	3,943	13.42	21,642	37,097
Incidence per 1,000	6.17	0.83	13.42	4.55	7.79

APPENDIX H: TABLE 3-4**Single and Multiple Categories of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Physical Abuse Only	18,218	3,175	17.43	11,994	24,441
Incidence per 1,000	3.83	0.67	17.43	2.52	5.14
Sexual Abuse Only	2,517	773	30.71	1,002	4,031
Incidence per 1,000	0.53	0.16	30.71	0.21	0.85
Neglect Only	25,553	3,663	14.34	18,373	32,734
Incidence per 1,000	5.37	0.77	14.34	3.86	6.88
Emotional Maltreatment Only	11,495	2,103	18.30	7,373	15,618
Incidence per 1,000	2.42	0.44	18.30	1.55	3.29
Exposure to Domestic Violence Only	25,653	3,551	13.84	18,694	32,613
Incidence per 1,000	5.39	0.75	13.84	3.93	6.85
Physical and Sexual Abuse	122	31	25.06	62	182
Incidence per 1,000	0.03	0.01	25.06	0.02	0.04
Physical Abuse and Neglect	1,828	289	15.81	1,261	2,394
Incidence per 1,000	0.38	0.06	15.81	0.26	0.50
Physical Abuse and Emotional Maltreatment	3,278	660	20.13	1,985	4,572
Incidence per 1,000	0.69	0.14	20.13	0.42	0.96
Physical Abuse and Exposure to Domestic Violence	2,274	565	24.84	1,167	3,381
Incidence per 1,000	0.48	0.12	24.84	0.25	0.71

APPENDIX H: TABLE 3-4 (continued)
Single and Multiple Categories of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Sexual Abuse and Neglect Incidence per 1,000	350 0.07	106 0.02	30.24 30.24	142 0.03	557 0.11
Sexual Abuse and Emotional Maltreatment Incidence per 1,000	111 0.02	49 0.01	44.40 44.40	14 0.00	207 0.04
Sexual Abuse and Exposure to Domestic Violence Incidence per 1,000	– –	– –	– –	– –	– –
Neglect and Emotional Maltreatment Incidence per 1,000	3,942 0.83	715 0.15	18.13 18.13	2,542 0.54	5,343 1.12
Neglect and Exposure to Domestic Violence Incidence per 1,000	2,484 0.52	484 0.10	19.49 19.49	1,535 0.32	3,432 0.72
Emotional Maltreatment and Exposure to Domestic Violence Incidence per 1,000	2,979 0.63	538 0.11	18.08 18.08	1,923 0.41	4,034 0.85
Physical Abuse, Sexual Abuse and Neglect Incidence per 1,000	– –	– –	– –	– –	– –
Physical Abuse, Sexual Abuse and Emotional Maltreatment Incidence per 1,000	– –	– –	– –	– –	– –
Physical Abuse, Sexual Abuse and Exposure to Domestic Violence Incidence per 1,000	– –	– –	– –	– –	– –
Physical Abuse, Neglect, and Emotional Maltreatment Incidence per 1,000	700 0.15	299 0.06	42.76 42.76	113 0.03	1,287 0.27
Physical Abuse, Neglect and Exposure to Domestic Violence Incidence per 1,000	224 0.05	87 0.02	38.63 38.63	54 0.01	394 0.09
Physical Abuse, Emotional Maltreatment and Exposure to Domestic Violence Incidence per 1,000	749 0.16	232 0.05	31.02 31.02	294 0.06	1,205 0.26

APPENDIX H: TABLE 3-4 (continued)**Single and Multiple Categories of Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Sexual Abuse, Neglect and Emotional Maltreatment Incidence per 1,000	–	–	–	–	–
Sexual Abuse, Neglect and Exposure to Domestic Violence Incidence per 1,000	–	–	–	–	–
Sexual Abuse, Emotional Maltreatment and Exposure to Domestic Violence Incidence per 1,000	–	–	–	–	–
Neglect, Emotional Maltreatment and Exposure to Domestic Violence Incidence per 1,000	717	209	29.18	307	1,127
	0.15	0.04	29.18	0.06	0.24

APPENDIX H: TABLE 4-1(a)**Physical Harm in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Physical Harm	93,076	11,446	12.30	70,641	115,511
Physical Harm	10,222	1,589	15.54	7,108	13,336

APPENDIX H: TABLE 4-1(b)**Nature of Physical Harm, by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Physical Harm	93,076	11,446	12.30	70,641	115,511
Bruises, Cuts and Scrapes	7,463	1,159	15.53	5,192	9,735
Burns and Scalds	210	81	38.58	51	368
Broken Bones	162	57	35.00	51	273
Head Trauma	371	156	42.16	64	678
Fatality	–	–	–	–	–
Other Health Condition	2,400	453	18.86	1,513	3,288

APPENDIX H: TABLE 4-2**Emotional Harm in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Emotional Harm	81,992	10,782	13.15	60,860	103,124
Incidence per 1,000	17.23	2.27	13.15	12.79	21.67
Emotional Harm	20,959	2,552	12.17	15,958	25,960
Incidence per 1,000	4.41	0.54	12.17	3.36	5.46

APPENDIX H: TABLE 4-3**Duration of Maltreatment in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Single Incident	32,673	4,778	14.63	23,307	42,039
Incidence per 1,000	6.87	1.00	14.63	4.90	8.84
Less than Six Months	17,793	2,078	11.68	13,720	21,866
Incidence per 1,000	3.74	0.44	11.68	2.88	4.60
More than Six Months	36,328	4,693	12.92	27,129	45,527
Incidence per 1,000	7.64	0.99	12.92	5.71	9.57
Unknown	15,413	2,290	14.86	10,923	19,902
Incidence per 1,000	3.24	0.48	14.86	2.30	4.18

APPENDIX H: TABLE 5-1(a)**Previous Case Opening in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Previous Openings	38,500	5,560	14.44	27,602	49,397
Incidence per 1,000	8.09	1.17	14.44	5.80	10.38
One Previous Opening	21,243	2,745	12.92	15,864	26,623
Incidence per 1,000	4.46	0.58	12.92	3.33	5.59
2-3 Previous Openings	20,433	2,321	11.36	15,884	24,983
Incidence per 1,000	4.29	0.49	11.36	3.33	5.25
More than 3 Previous Openings	21,773	3,256	14.95	15,392	28,154
Incidence per 1,000	4.58	0.68	14.95	3.24	5.92
Unknown Record	1,313	308	23.44	710	1,916
Incidence per 1,000	0.28	0.07	23.44	0.15	0.41

APPENDIX H: TABLE 5-1(b)**Time Since Case Was Last Closed in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Previous Openings	38,500	5,560	14.44	27,602	49,397
Less than 3 Months	11,395	1,928	16.92	7,616	15,174
3-6 Months	13,796	1,695	12.29	10,473	17,119
7-12 Months	13,863	1,867	13.46	10,205	17,522
13-24 Months	9,868	1,340	13.58	7,242	12,494
More than 24 Months	14,182	1,754	12.37	10,744	17,621

APPENDIX H: TABLE 5-2**Ongoing Child Welfare Services in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Case to Be Closed	57,321	7,763	13.54	42,106	72,536
Incidence per 1,000	12.05	1.63	13.54	8.85	15.25
Case to Stay Open	45,885	5,769	12.57	34,578	57,191
Incidence per 1,000	9.64	1.21	12.57	7.26	12.02

APPENDIX H: TABLE 5-3**Referrals to Support Services in Substantiated Child Maltreatment Investigations, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Referrals	37,367	5,116	13.69	27,340	47,394
In Home Parenting Support	15,197	2,891	19.03	9,530	20,864
Parent Support Group	15,475	2,069	13.37	11,419	19,530
Other Family/Parent Counseling	31,230	3,543	11.35	24,286	38,175
Drug/Alcohol Counseling	15,395	2,274	14.77	10,939	19,852
Welfare/Social Assistance	5,100	779	15.28	3,573	6,627
Food Bank	5,185	938	18.09	3,346	7,024
Shelter Services	4,766	677	14.21	3,439	6,094
Domestic Violence Services	17,650	2,472	14.01	12,805	22,494
Psychiatric/Psychological Services	11,555	1,867	16.16	7,896	15,215
Special Education Referral	958	297	31.00	376	1,541
Recreational Program	2,221	569	25.63	1,105	3,336
Victim Support Program	6,259	942	15.05	4,413	8,104

APPENDIX H: TABLE 5-3 (continued)**Referrals to Support Services in Substantiated Child Maltreatment Investigations, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Medical/Dental Services	4,638	507	10.93	3,644	5,632
Child/Daycare	4,628	966	20.87	2,735	6,521
Cultural Services	3,261	671	20.57	1,946	4,576
Other Referral	8,819	1,284	14.56	6,302	11,335

APPENDIX H: TABLE 5-4**Out-of-Home Placement in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Placement Required	85,733	10,747	12.54	64,669	106,796
Incidence per 1,000 Children	18.02	2.26	12.54	13.59	22.45
Placement Considered	3,983	544	13.66	2,917	5,049
Incidence per 1,000 Children	0.84	0.11	13.66	0.62	1.06
Informal Kinship Care	5,249	901	17.16	3,484	7,014
Incidence per 1,000 Children	1.10	0.19	17.16	0.73	1.47
Child Welfare Placement:					
Kinship Foster Care	1,275	354	27.76	582	1,969
Incidence per 1,000 Children	0.27	0.07	27.76	0.12	0.42
Other Family Foster Care	4,976	950	19.09	3,114	6,838
Incidence per 1,000 Children	1.05	0.20	19.09	0.66	1.44
Group Home	1,410	499	35.41	431	2,389
Incidence per 1,000 Children	0.30	0.11	35.41	0.09	0.51
Residential/ Secure Treatment	602	130	21.68	346	85
Incidence per 1,000 Children	0.13	0.03	21.68	0.08	0.18

APPENDIX H: TABLE 5-5**Applications to Child Welfare Court and Mediation/Alternative Response in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Court Considered	89,344	10,951	12.26	67,879	110,809
Incidence per 1,000 Children	18.78	2.30	12.26	14.27	23.29
Application Considered	6,655	1,327	19.94	4,053	9,256
Incidence per 1,000 Children	1.40	0.28	19.94	0.85	1.95
Application Made	7,261	1,499	20.64	4,323	10,198
Incidence per 1,000 Children	1.53	0.32	20.64	0.91	2.15
No Mediation/Alternative Response	91,954	11,268	12.25	69,868	114,039
Incidence per 1,000 Children	19.33	2.37	12.25	14.69	23.97
Referral to Mediation/Alternative Response	3,736	877	23.48	2,016	5,455
Incidence per 1,000 Children	0.79	0.18	23.48	0.43	1.15

APPENDIX H: TABLE 5-6**Police Investigations and Charges Laid in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Police Investigation	83,845	10,876	12.97	62,529	105,161
Incidence per 1,000 Children	17.62	2.29	12.97	13.14	22.10
Police Investigation, No Charges Laid	12,199	1,444	11.84	9,368	15,029
Incidence per 1,000 Children	2.56	0.30	11.84	1.97	3.15
Police Investigation, Charges Considered	2,263	312	13.80	1,651	2,876
Incidence per 1,000 Children	0.48	0.07	13.80	0.35	0.61
Police Investigation, Charges Laid	4,962	897	18.08	3,204	6,721
Incidence per 1,000 Children	1.04	0.19	18.08	0.67	1.41

APPENDIX H: TABLE 6-3**Child Age and Sex in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Males 0-15 Years of Age	52,765	6,953	13.18	39,136	66,393
Females 0-15 Years of Age	50,533	5,914	11.70	38,942	62,125
Males <1 Years of Age	3,688	585	15.86	2,542	4,834
Females <1 Years of Age	3,301	461	13.97	2,397	4,205
Males 1-3 Years of Age	7,901	1,133	14.34	5,681	10,122
Females 1-3 Years of Age	7,918	983	12.41	5,992	9,845
Males 4-7 Years of Age	12,810	1,760	13.74	9,360	16,260
Females 4-7 Years of Age	12,242	1,426	11.65	9,446	15,037
Males 8-11 Years of Age	16,500	2,248	13.62	12,094	20,905
Females 8-11 Years of Age	13,020	1,845	14.17	9,403	16,636
Males 12-15 Years of Age	11,865	1,745	14.70	8,446	15,285
Females 12-15 Years of Age	14,052	2,029	14.44	10,075	18,029

APPENDIX H: TABLE 6-4(a)**Child Functioning (Physical, Emotional and Cognitive) in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Developmental Delay	10,401	1,436	13.80	7,588	13,215
Learning Disability	15,661	1,929	12.32	11,881	19,441
Physical Disability	2,056	385	18.72	1,301	2,810
Substance Abuse-Related Birth Defect	2,876	679	23.62	1,545	4,208
Other Health Condition	4,474	565	12.64	3,366	5,582
Specialized Education Services	12,083	1,624	13.44	8,900	15,265
Depression or Anxiety	17,967	2,324	12.93	13,413	22,522
Self-harming Behaviour	4,539	719	15.84	3,129	5,948
Psychiatric Disorder	3,946	710	17.98	2,555	5,337
Positive Toxicology at Birth	1,123	327	29.14	481	1,764

APPENDIX H: TABLE 6-4(b)**Child Functioning (Behavioural) in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Negative Peer Involvement	13,705	1,905	13.90	9,972	17,438
Alcohol Abuse	4,032	518	12.84	3,018	5,047
ADD/ADHD	13,127	1,675	12.76	9,844	16,409
Drug/Solvent Abuse	4,620	733	15.86	3,185	6,056
Violence Towards Others	11,720	1,642	14.01	8,502	14,938
Running	6,013	833	13.85	4,381	7,644
Irregular School Attendance	13,653	2,245	16.44	9,253	18,053
Inappropriate Sexual Behaviour	5,001	892	17.84	3,252	6,749
Youth Criminal Justice Act Involvement	2,309	478	20.70	1,372	3,246
Other Behavioural or Emotional Problems	27,762	3,545	12.77	20,814	34,710

APPENDIX H: TABLE 6-5**Aboriginal Heritage of Investigated Children in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Non-Aboriginal	88,215	10,829	12.28	66,989	109,440
First Nations, Status	10,095	2,918	28.91	4,376	15,815
First Nations, Non-Status	2,016	583	28.93	873	3,159
Metis	1,796	762	42.39	304	3,289
Inuit	769	38	4.89	696	843
Other Aboriginal	397	113	28.56	175	619

APPENDIX H: TABLE 7-1**Household Structure in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Two Parent-Biological	32,957	4,642	14.09	23,859	42,056
Two Parent-Blended/Step	16,245	1,957	12.05	12,410	20,080
Biological Parent and Other	3,493	670	19.17	2,181	4,806
Lone Mother	40,751	5,499	13.49	29,973	51,528
Lone Father	4,418	930	21.05	2,595	6,240
Other	5,434	1,016	18.70	3,442	7,426

APPENDIX H: TABLE 7-3**Siblings of Children in Child Maltreatment Investigations in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Sibling	24,636	3,335	13.54	18,099	31,174
One Sibling	38,443	5,148	13.39	28,352	48,533
Two Siblings	24,163	2,962	12.26	18,357	29,969
Three Siblings	11,121	1,522	13.68	8,138	14,104
Four or More Siblings	4,934	837	16.97	3,293	6,575

APPENDIX H: TABLE 7-4**Investigated Siblings in Substantiated Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Sibling	24,636	3,335	13.54	18,099	31,174
One Sibling, Not Investigated	5,702	1,089	19.10	3,567	7,836
One Sibling, Investigated	32,741	4,236	12.94	24,439	41,043
Two or More Siblings, None Investigated	4,221	713	16.88	2,824	5,617
Two or More Siblings, At Least One Other Investigated	35,998	4,145	11.51	27,874	44,122

APPENDIX H: TABLE 7-5**Household Source of Income in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Full-Time Employment	58,737	7,461	12.70	44,113	73,362
Part-time/Multiple Jobs/ Seasonal Employment	12,833	1,571	12.24	9,753	15,913
Benefits/Employment Insurance/Social Assistance	24,904	3,970	15.94	17,123	32,684
Unknown	5,940	1,112	18.73	3,759	8,120
No Source of Income	869	307	35.35	267	1,472

APPENDIX H: TABLE 7-6**Housing Type in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Own Home	33,015	4,406	13.35	24,379	41,651
Rental Accomodation	44,684	5,147	11.52	34,596	54,773
Public Housing	13,006	2,207	16.97	8,680	17,331
Shelter/Hotel	1,304	285	21.83	746	1,862
Other	3,061	494	16.15	2,092	4,029
Unknown	8,228	1,886	22.92	4,531	11,925

APPENDIX H: TABLE 7-7**Housing Conditions by Primary Category of Substantiated Child Maltreatment, in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Safe Conditions	87,473	10,672	12.20	66,557	108,389
Unsafe Conditions	9,499	1,902	20.02	5,772	13,226
Unknown	6,319	1,376	21.77	3,622	9,016

APPENDIX H: TABLE 7-8**Family Moves Within the Last Twelve Months in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Moves in Last Twelve Months	50,700	5,957	11.75	39,024	62,375
One Move	17,288	2,137	12.36	13,098	21,477
Two or More Moves	11,486	1,768	15.39	8,021	14,951
Unknown	23,300	3,789	16.26	15,875	30,726

APPENDIX H: TABLE 7-10**Custody Dispute in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
No Custody Dispute	88,971	11,415	12.83	66,598	111,345
Custody Dispute	11,228	1,275	11.36	8,729	13,727
Unknown	3,098	829	26.76	1,473	4,722

APPENDIX H: TABLE 8-1**All Referral Sources (Non-Professional and Professional) in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Non-Professional Referral Sources					
Parent	10,925	1,289	11.80	8,398	13,452
Child (Self)	2,288	566	24.72	1,180	3,397
Relative	4,127	607	14.71	2,937	5,316
Neighbour/Friend	4,189	754	18.01	2,710	5,667
Other Referral Sources	5,226	940	17.99	3,384	7,069
Anonymous	3,061	713	23.29	1,664	4,458
Professional Referral Sources					
Police	32,079	4,315	13.45	23,622	40,536
School Personnel	21,814	3,541	16.23	14,873	28,754
Health Professional	7,290	968	13.29	5,392	9,188
Mental Health Professional	2,683	391	14.58	1,916	3,449
Other Child Welfare Service	4,622	682	14.75	3,285	5,958
Community Agency	9,636	1,851	19.21	6,009	13,263

APPENDIX H: 8-2(a)**Unsubstantiated and Malicious Reports of Child Maltreatment in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Substantiated Reports	103,298	12,662	12.26	78,480	128,115
Suspected Reports	28,053	4,243	15.12	19,737	36,368
Unsubstantiated Non-Malicious Reports	58,626	8,975	15.31	41,035	76,217
Unsubstantiated Malicious Reports	10,744	1,985	18.48	6,853	14,634
Unsubstantiated Reports, Malicious Intent Unknown	15,120	2,806	18.56	9,620	20,620

APPENDIX H: TABLE 8-3**Relative Size of Child Welfare Agency/Office Involved in Substantiated Child Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Small (< 350 cases/year)	11,666	4,630	39.69	2,591	20,741
Medium (350-949 cases/year)	24,325	10,082	41.45	4,565	44,085
Large (950-2,000 cases/year)	22,780	7,272	31.93	8,526	37,034
Very Large (>2,000 cases/year)	44,527	11,881	26.68	21,240	67,814

APPENDIX H: TABLE 8-4**Urban/Rural Location of Child Welfare Agency/Office in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Large Metropolitan Service Area	64,196	15,183	23.65	34,437	93,955
Mixed Urban and Rural Service Area	32,261	8,955	27.76	14,710	49,813
Primarily Rural Service Area	6,840	5,688	83.16	0	17,989

APPENDIX H: TABLE 8-5**Job Position of Investigating Worker in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
Intake and Investigation Specialists	68,815	10,682	15.52	47,878	89,752
Generalists with Mixed Intake and Ongoing Service Caseloads	15,611	5,432	34.80	4,964	26,257
Other	3,677	1,557	42.34	626	6,729

APPENDIX H: TABLE 8-6**Years of Child Welfare Experience of Investigating Workers in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
<1 Year	2,550	699	27.42	1,179	3,920
1 to 2 Years' Experience	21,574	4,954	22.97	11,863	31,284
3 to 4 Years' Experience	25,400	4,583	18.04	16,417	34,382
5 to 6 Years' Experience	14,947	3,429	22.94	8,227	21,667
More than 6 Years' Experience	22,468	5,167	23.00	12,340	32,596

APPENDIX H: TABLE 8-7**Highest Completed Educational Level of Investigating Workers in Substantiated Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

Variable	Estimate**	Standard Error	Coefficient of Variation	Confidence Interval	
				Lower	Upper
MSW	7,752	2,016	26.00	3,801	11,703
BSW	54,652	9,229	16.89	36,564	72,740
MSc	2,324	864	37.17	631	4,018
BA/BSc	19,393	4,144	21.37	11,270	27,516
College Diploma or Certificate	6,190	1,929	31.16	2,409	9,972

Endnotes

* Estimate of child maltreatment investigations.

** Estimate of substantiated child maltreatment investigations.

Appendix I

SUPPORTING DATA FOR ADDITIONAL REPORT FINDINGS

The following are the data tables for the special variables mentioned throughout this report.

APPENDIX I: TABLE 1(a)
Mean Number of Children Under 19 per Household in Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

Number of Children	Child Investigations
One Child	50,792
Two Children	82,810
Three Children	54,050
Four Children	25,104
Five Children	8,509
Six Children	2,334
Seven Children	837
Eight Children	209
Nine Children	–
Total Children Under 19	224,654
Mean Number of Children Under 19 per Household in Child Maltreatment Investigations*	2.00

* The mean number of children per household was calculated by dividing the number of children under 19 living in the households by the total number of households.

APPENDIX I: TABLE 1(b)
Mean Number of Investigated Children per Household in Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003

Number of Children	Child Investigations
One Child	71,830
Two Children	74,126
Three Children	42,817
Four Children	20,810
Five Children	5,562
Six Children	2,064
Seven or More Children	110
Total Child Investigations	217,319
Mean Number of Investigated Children per Household in Child Maltreatment Investigations*	1.66

* The mean number of investigated children was calculated by dividing the number of children investigated by the total number of families.

APPENDIX I: TABLE 2**Investigated Children Under One Year of Age, Experiencing Head Trauma in Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

	Head Trauma	No Head Trauma	Total
Number of Children Less than One Year Old	124	13,907	14,031
Percentage	1%	99%	100%

APPENDIX I: TABLE 3**Parents Involved as Alleged Perpetrators in Child Maltreatment Investigations, in Canada, Excluding Quebec, in 2003**

	Child Investigations	Percentage
Either Parent Involved as Alleged Perpetrator	177,900	82%
Neither Parent Involved as Alleged Perpetrator	39,419	18%
Total Child Investigations	217,319	100%

APPENDIX I: TABLE 4**Parents as Perpetrators of Primary Substantiated Physical Abuse for Two-Parent Families in Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

	Physical Abuse Investigations	Percentage
Mother as Alleged Perpetrator in Two-Parent Families	6,969	51%
Father as Alleged Perpetrator in Two-Parent Families	9,145	67%
Total Two-Parent Families Investigated for Physical Abuse	13,735	

APPENDIX I: TABLE 5**Parents as Perpetrators of Primary Substantiated Neglect for Two-Parent Families in Child Maltreatment Investigations in Canada, Excluding Quebec, in 2003**

	Neglect Investigations	Percentage
Mother as Perpetrator in Two-Parent Families	11,684	91%
Father as Perpetrator in Two-Parent Families	9,321	73%
Total Two-Parent Families	12,785	

APPENDIX I: TABLE 6**Age and Sex of Victims of Substantiated Child Maltreatment in Canada in 2003***

		Number of Substantiated Cases		Incidence per 1,000 Children	
		Canada, Excluding Quebec	All of Canada	Canada, Excluding Quebec	All of Canada
0-15 Years	All Children	103,298	114,798	21.71	18.70
	Females	50,533	56,218	21.79	18.77
	Males	52,765	58,580	21.64	18.63
0-3 Years	Females	11,219	12,714	22.04	19.49
	Males	11,590	13,165	21.76	19.29
< 1 Year	Females	3,301	3,917	27.32	25.31
	Males	3,688	4,466	29.07	27.45
1 Year	Females	2,295	2,620	17.94	16.02
	Males	2,343	2,573	17.51	15.04
2 Years	Females	3,039	3,333	23.66	20.28
	Males	2,636	2,934	19.59	17.06
3 Years	Females	2,584	2,844	19.61	16.76
	Males	2,923	3,192	21.28	18.06
4-7 Years	Females	12,242	13,501	21.44	18.20
	Males	12,810	14,407	21.26	18.47
4 Years	Females	2,570	2,824	18.94	16.06
	Males	3,029	3,300	21.15	17.79
5 Years	Females	3,645	3,979	25.42	21.39
	Males	3,293	3,606	21.91	18.59
6 Years	Females	3,329	3,636	22.89	19.24
	Males	3,098	3,648	20.08	18.31
7 Years	Females	2,698	3,062	18.41	16.04
	Males	3,390	3,853	21.90	19.16
8-11 Years	Females	13,020	14,384	21.00	17.77
	Males	16,499	18,127	25.31	21.35
8 Years	Females	3,641	3,981	24.25	20.28
	Males	4,528	4,900	28.67	23.79
9 Years	Females	3,517	3,909	22.74	19.30
	Males	4,293	4,774	26.58	22.60
10 Years	Females	2,924	3,204	18.71	15.66
	Males	3,827	4,256	23.16	19.73
11 years	Females	2,938	3,290	18.47	15.96
	Males	3,851	4,196	23.02	19.40

APPENDIX I: TABLE 6 (continued)**Age and Sex of Victims of Substantiated Child Maltreatment in Canada in 2003***

		Number of Substantiated Cases		Incidence per 1,000 Children	
		Canada, Excluding Quebec	All of Canada	Canada, Excluding Quebec	All of Canada
12-15 Years	Females	14,052	15,619	22.70	19.72
	Males	11,866	12,881	18.21	15.48
12 Years	Females	3,045	3,374	19.66	16.98
	Males	3,071	3,376	18.91	16.19
13 Years	Females	3,654	4,151	24.01	21.35
	Males	3,453	3,740	21.60	18.35
14 Years	Females	3,511	3,899	22.66	19.72
	Males	2,802	3,042	17.24	14.68
15 Years	Females	3,842	4,195	24.46	20.86
	Males	2,540	2,724	15.23	12.80

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*Based on a sample of 7,328 substantiated child maltreatment investigations.

