

Differentiating between child protection and family support in the Canadian child welfare system's response to intimate partner violence, corporal punishment, and child neglect

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Rates of reported child maltreatment nearly doubled in Canada over the period 1998–2003, an increase that reflects growing awareness of the harmful effects of an expanding array of parental behaviors, including corporal punishment, lack of supervision, and exposure to intimate partner violence (IPV). Some of these situations may benefit from voluntary family support programs outside of the child welfare system. Analyzing a sample of 11,807 investigations, this paper compares cases where the sole concern is exposure to IPV, or hitting a child, or neglect, or other forms of investigated maltreatment. Situations where exposure to IPV or potentially abusive hitting were the sole reason for investigation presented with fewer risk factors and were less likely to lead to ongoing child welfare interventions compared to other maltreatment investigations. While situations involving alleged neglect presented a higher risk profile and elicited a more intensive child welfare response than did exposure to IPV or hitting, opportunities for alternative services were nevertheless identified. The study also found that visible minority families were overrepresented in cases involving hitting and that Aboriginal families were overrepresented in cases involving neglect. Overall the findings support the development of alternative response programs in Canada.

Keywords: Child neglect; Physical abuse, Exposure to intimate partner violence; Aboriginal; Visible minority; Canada; Child welfare legislation.

Le taux de maltraitance chez les enfants a pratiquement doublé au Canada au cours de la dernière décennie, un accroissement qui reflète l'augmentation de la prise de conscience des effets nocifs d'un étalage de plus en plus grand de comportements parentaux, incluant les punitions corporelles, le manque de supervision et l'exposition à la violence du partenaire amoureux (IPV). Quelques-unes de ces situations bénéficient d'un programme de support volontaire en dehors du système de bien-être social pour les enfants. S'appuyant sur un échantillon de 11,807 enquêtes, cette étude compare des cas où seulement l'exposition au IPV, la violence physique ou la négligence sont en cause comparativement à d'autres formes de maltraitance. Les situations où seulement l'exposition au IPV ou l'abus de violence physique étaient les raisons de l'investigation présentaient moins de facteurs de risque et conduisaient à moins d'interventions du service de bien-être pour les enfants que les investigations concernant les autres types de maltraitance. Toutefois, même si les situations impliquant une négligence bénigne présentaient un profil plus élevé de risques et entraînaient une plus forte réponse du service de bien-être aux enfants que l'exposition au IPV ou à la violence physique, diverses possibilités pour des services alternatifs furent identifiées. L'étude montre aussi que les familles des minorités visibles étaient plus nombreuses dans les cas impliquant la violence physique et que les familles autochtones l'étaient davantage dans les enquêtes sur la négligence. L'ensemble des données appuie le développement de programmes alternatifs au Canada.

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Las tasas de maltrato infantil informado prácticamente se han duplicado en Canadá en la última década, un incremento que refleja la creciente concientización acerca de los efectos nocivos de una expansiva gama de conductas parentales, incluido el castigo corporal, la falta de supervisión y la exposición a la violencia hacia la pareja íntima (VPI). Algunas de estas situaciones podrían beneficiarse de programas voluntarios de apoyo a la familia fuera del sistema de protección al menor. Tras analizar una muestra de 11.807 investigaciones, este artículo compara los casos en que la única preocupación es o bien la exposición a VPI, el golpear al niño, o la negligencia, a otras formas de maltrato investigadas. Las situaciones en las que la exposición a la VPI o el golpear de manera potencialmente abusiva era la única razón de investigación presentaban menos factores de riesgo y tenían menos probabilidades de conducir a intervenciones continuadas de protección al menor en comparación con otras investigaciones sobre maltrato. Si bien las situaciones que implicaban una alegación de negligencia presentaban un perfil de riesgo más elevado y provocaban una respuesta de los servicios de protección al menor más intensiva que la exposición a VPI o el castigo corporal, igualmente se identificaron oportunidades de servicios alternativos. El estudio también encontró que las familias visiblemente pertenecientes a minorías estaban sobrerrepresentadas en aquellos casos de castigo corporal y las familias aborígenes estaban sobrerrepresentadas en los casos que involucraban negligencia. En general, los resultados apoyan el desarrollo de programas de respuesta alternativa en Canadá.

Over 3,600,000 reports of child maltreatment were received by child welfare authorities in the United States in 2009, a rate of 48.1 reports per 1,000 children (U.S. Department of Health & Human Services, 2010). Although rates of reported child maltreatment appear to have reached a saturation point in the United States, rates have been increasing rapidly in other jurisdictions. Rates of reported child maltreatment nearly doubled in Canada from 135,261 maltreatment-related investigations in 1998 to 235,315 in 2003, and have remained stable since 2003, with 235,842 reports in 2008, a rate of 39.2 maltreatment-related investigations per 1000 children in 2008 (Trocmé et al., 2010; Trocmé, Fallon, MacLaurin, & Chamberland et al., 2011). Across Australia rates of investigation have followed a similar pattern, with completed investigations doubling from 66,265 in fiscal year 2000–2001 to 131,689 in fiscal year 2009–2010 (Lamont, 2011). To a large extent, this increase can be attributed to changes in reporting and investigation practices, as professionals working with children become more aware of the harmful effects of an expanding array of parental behaviors (Gilbert et al., 2009a; Holzer & Bromfield, 2008; Trocmé, Fallon, & MacLaurin, 2011).

While the evidence for the harmful effects of these dynamics on the development of children is well established (Cicchetti & Toth, 2005; Gilbert et al., 2009b), it does not necessarily follow that child welfare interventions are the only possible response. The United States, Canada and Australia have developed child welfare systems that focus primarily on protection and safety, characterized by mandatory reporting, centralized responses by mandated agencies, and investigations focused on substantiation and risk assessment (Gilbert et al., 2009a). In contrast, in most European jurisdictions child maltreatment allegations are processed by family welfare agencies that provide a broader array of services without having to determine eligibility on the basis of maltreatment

substantiation (Gilbert et al., 2009a). While the introduction of differential response models in North America and Australia (National Quality Improvement Center on Differential Response in Child Protective Services, 2012; Shusterman, Hollinshead, Fluke, & Yuan, 2005; Trocmé & Chamberland, 2003) may attenuate some of the differences, protection-focused jurisdictions continue to investigate a large number of reports, some of which may be more appropriately served through broadly oriented family support programs (Mansell, 2006; National Quality Improvement Center on Differential Response in Child Protective Services, 2012; Waldfogel, 2008).

Past analyses of child welfare investigations conducted in Canada have identified three types of cases that may benefit from family support response programs as an alternative to narrower child protection frameworks. Compared to other forms of maltreatment, investigations where exposure to intimate partner violence (IPV) was the sole reason for the investigation involved children displaying fewer problems and led to a less intrusive response from child welfare services, namely less court involvement and fewer placements in out-of-home care (Black, Trocmé, Fallon, & MacLaurin, 2008; Chiodo, Leschied, Whitehead, & Hurley, 2008). Many physical abuse cases arise in a context of punishment (Trocmé & Durrant, 2003) and are more likely to involve visible minority families who may use corporal punishment as a parenting strategy (Lavergne, Dufour, Trocmé, & Larrivee, 2008); Canadian child welfare authorities have been left to grapple with these investigations in the absence of public education on alternatives to corporal punishment (Durrant & Ensom, 2012) and in the presence of a confusing special provision in the Canadian Criminal Code that allows persons in authority to use “force by way of correction” (Durrant, Trocmé, Fallon, Milne, & Black, 2009). In the case of neglect, concerns have been raised that for many of these families poverty and lack of access to services,

as opposed to maltreatment, is the underlying issue (Swift, 1995); in particular for Aboriginal families, who are dramatically overrepresented in neglect investigations (Blackstock, Trocmé, & Bennett, 2004; Sinha, Trocmé, Blackstock, MacLaurin, & Fallon, 2011).

Using data from the 2008 cycle of the Canadian Incidence Study of Reported Child Abuse and Neglect (Trocmé et al., 2010a), this paper considers to what extent situations where the sole concern is exposure to IPV, hitting, or neglect require a traditional protection response or could be reconceptualized within a less intrusive family support framework. Specifically, we examine the extent to which these three types of cases differ from other investigations in terms of family profiles and the relative intrusiveness of child protective responses.

LITERATURE REVIEW

Exposure to IPV and child maltreatment

Children who witness IPV or are indirectly exposed to IPV are at significant risk of developing a range of short- and long-term difficulties, such as depression, withdrawal, aggression and post-traumatic stress disorder (Holt, Buckley, & Whelan, 2008). Understanding the effects of exposure to IPV, however, is complicated because there is significant variation in the way children are affected and it is difficult to separate out the effects of exposure to IPV and concomitant problems (Herrenkohl, Sousa, Tajima, Herrenkohl, & Moylan, 2008; Wolfe, Crooks, Lee, McIntyre, & Jaffe, 2003). In reviewing the legislative response to exposure to IPV, one of the leading IPV scholars in the US, Jeffrey Edleson, argues that while many of these children may be in need of support, exposure to IPV should not be classified as a form of maltreatment that automatically triggers child protective response (Edleson, 2004). In most cases referral to voluntary services is a more appropriate route, one that the victimized parent is more likely to see as supportive. Edleson argues that referral to child welfare authorities should be limited to situations where there is great risk of harm. Similar concerns have been raised within the Canadian context about the potential unintended negative effects of adding exposure to IPV to child welfare legislation (Nixon, Tutty, Weaver-Dunlop, & Walsh, 2007; Jaffe, Crooks, & Wolfe, 2003). Despite these cautionary warnings, exposure to IPV has been the fastest growing form of investigated maltreatment in Canada, with rates doubling from 1998 to 2003 (Trocmé, Fallon, & MacLaurin, 2011), yet, if no other concerns are noted, these investigations are less likely to lead to services, to court ordered interventions, or to out-of-home placement (Black et al., 2008; English, Edleson, &

Herrick, 2005; Kohl, Edleson, English, & Barth, 2005).

Corporal punishment and child abuse

Compared to other parenting techniques, frequent use of corporal punishment or excessive use of force has been shown across studies to be a less effective disciplinary method (Larzelere & Kuhn, 2005); to be associated with higher levels of aggression, lower levels of moral internalization, and poorer mental health in children and adolescents (Gershoff, 2002); and to increase the likelihood of physical abuse (Clément, Bouchard, Jetté, & Laferrière, 2000; Gershoff, 2002; Kadushin & Martin, 1981; Durant & Ensom, 2012). Child protection statutes define physical abuse in reference to caregiver actions that physically harm a child or that are very likely to harm a child. For professionals working with children, however, the distinction between corporal punishment and physical abuse requiring a report to child welfare authorities is not easily established (Kenny, 2004; Tirosh, Shechter, Cohen, & Jaffe, 2003). The distinction is even more confusing for parents, especially immigrant and visible minority parents who may perceive child welfare statutes as undermining their parental authority (Garb & Goren, 2010; Irfan & Cowburn, 2004; Taylor, Hamvas, & Paris, 2011). This potential confusion may explain to some extent the over-representation of visible minority families reported to Canadian child welfare authorities because of concerns related to physical abuse and punishment (Lavergne, et al., 2008). In most North American jurisdictions the primary responsibility for preventing the inappropriate use of corporal punishment falls by default onto child welfare authorities. Unfortunately, child welfare authorities do not have the mandate or the resources to mount public education and parent training programs that have been successful in other jurisdictions (Durrant, 1999; Taylor et al., 2011).

The connection between poverty and neglect

Unlike exposure to IPV and corporal punishment, neglect has always been explicitly defined in child welfare statutes as an area of primary concern. Child neglect stands out as one of the forms of maltreatment that has the most severe short- and long-term negative effects on the cognitive, emotional, and social development of children (Gilbert et al., 2009b; Hildyard & Wolfe, 2002). The concern of some critics, however, has been that child welfare legislation attributes the primary responsibility for neglect to parents without considering the role that poverty and social deprivation play in creating the

conditions where less than perfect parenting becomes neglectful (Besharov & Laumann, 1997; Pelton, 1994).

The chronic over-representation of Aboriginal children in the child welfare system in Canada has been well documented across all child welfare decision-making points from reports to substantiation and service provision (Auditor General of Canada, 2008; Blackstock, Prakash, Loxley & Wein, 2005; McKenzie, 1997; Royal Commission on Aboriginal Peoples, 1996; Trocmé, Knoke, & Blackstock, 2004). Poverty, inadequate housing, and limited access to services have consistently been shown to be the driving factors underlying the over-representation of cases of child neglect involving Aboriginal children in the Canadian child welfare system (Blackstock et al., 2004; Sinha et al., 2011; Trocmé et al., 2004). Aboriginal families experience extreme levels of poverty and poor housing both absolutely and relative to other Canadians (Loppie-Reading & Wien, 2009; National Council on Welfare, 2008). This is exacerbated by federal funding mechanisms for First Nations children that cover costs related to placement in out-of-home care but provide only minimal funds for in-home interventions that could prevent placement (Blackstock, 2011).

Immigrant or minority families may also be over-represented in the child welfare system due to socioeconomic factors such as parental education and family structure (Alink, Euser, van IJzendoorn, & Bakermans-Kranenburg, 2013 this issue; Euser, van IJzendoorn, Prinzie, & Bakermans-Kranenburg, 2011). Research indicates that minority families are more likely to live in poverty, and less likely to be characterized by sensitive parenting and compliant children, with the connection between ethnicity and attachment security explained by parental sensitivity, income, and parental age (Bakermans-Kranenburg, van IJzendoorn, & Kroonenberg, 2004).

Differentiating between child protection investigations and family support referrals

The response to the expansion in child welfare mandates and the dramatic increase in investigations has varied across jurisdictions. Many jurisdictions have sought to develop differential response service tracks that replace the forensic approach that is typical in child welfare investigations, focusing instead on a family assessment approach and an offer of voluntary services (Waldfoegel, 2008). While the specific structure of these models varies significantly, differential response programs typically involve at least two service streams: a traditional child protection investigation stream and an alternate stream designed for cases that involve lower levels of risk, usually through

a voluntary offer of services (Merkel-Holguin, Kaplan, & Kwak, 2006; Shusterman et al., 2005). Evaluations of the efficacy of these models generally show that the alternate response streams are successful in engaging families in a less adversarial manner and with more services, without compromising the safety of children (Conley, 2007; Conley & Berrick, 2010; Loman & Siegel, 2008), although it should be noted that to date only two evaluations have used randomized designs (National Quality Improvement Center on Differential Response in Child Protective Services, 2012), and concerns about the comprehensiveness of services provided in the alternate track have been raised by some studies (English, Wingard, Marshall, Orme, & Orme, 2000).

In response to rapidly expanding rates of reports of exposure to IPV, physical abuse and neglect (Trocmé & Chamberland, 2003; Trocmé, Fallon, MacLaurin, & Neves, 2005), several Canadian provinces/territories have started to develop differential response options. Alberta and British Columbia have developed alternative family support tracks that focus on engaging lower risk families with voluntary community services (Anselmo, Pickford & Goodman, 2003; Ministry of Children and Family Development, 2011), however, the proportion of cases referred to these family support remains relatively low: less than 8% in British Columbia (Ministry of Children and Family Development, 2011) and 14% to 24% in Alberta (Central Alberta Child and Family Services Authority, 2010; Edmonton and Area Child and Family Services Authority, 2011). Preliminary evaluations of both models indicate that services are being provided in a more supportive fashion without appearing to compromise the safety of children (Marshall, Charles, Kendrick & Pakalniskiene, 2010; Weiden, Nutter, Wells, Sieppert, 2005). Ontario, Canada's largest province, started to deploy a differential response model in 2007; however, Ontario's "customized approach" applies primarily to post-investigation services and does not stream cases at the investigation level (Ministry of Children and Youth Services, 2007). The impact of the Ontario model has not yet been evaluated (Dumbrill, 2006). Manitoba child welfare authorities have opted for a separate "Family Enhancement" (FE) stream which is in the process of being evaluated before it is generalized to the whole province (General Child and Family Services Authority, n.d.). In addition, several jurisdictions have developed a range of post-investigation alternatives, such as court mediation and family group conferencing; however, the vast majority of investigations continue to be processed in Canada through traditional protection models.

The 2008 cycle of the CIS provides an opportunity to examine further what types of investigations conducted

by child welfare authorities in Canada may be appropriately served through differential response service streams, specifically with respect to exposure to IPV, hitting, and neglect. For each of these three investigation categories, we hypothesize that relative to other maltreatment investigations, investigations where the sole concern is exposure to IPV, hitting, or neglect will present with a less severe risk profile and will elicit less intensive mandated child welfare services.

METHODS

The Canadian Incidence Study of Reported Child Abuse and Neglect-2008 (CIS-2008) is the third nationwide study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by child welfare authorities (Trocmé et al., 2010a). The CIS-2008 tracked 15,980 maltreatment-related investigations conducted in a representative sample of 112 child welfare organizations across Canada in the fall of 2008. Information was obtained directly from child welfare workers using a three-page data collection form describing child-, family- and investigation-related information that workers routinely gather as part of their investigation. Maltreatment investigations were classified under five major categories, with 32 specific forms of maltreatment subsumed under each category. Every investigation could be classified under up to three forms of maltreatment, with the first being treated as the primary form. Investigations where no specific incident had been reported and where the concern was risk of future maltreatment were classified as risk-only investigations (Fallon, Trocmé, MacLaurin, Sinha, & Black, 2011).

For the purposes of this paper, maltreatment categories were recoded, first by separating investigations involving only one form of alleged maltreatment from those involving multiple forms, and then classifying single-form cases as exposure to IPV,

hitting a child with a hand or an object, neglect, or all other forms of maltreatment (emotional maltreatment, sexual abuse, and forms of physical abuse that did not involve hitting) (Table 1).

Maltreatment investigations were further classified as being substantiated, suspected, or unfounded. For the purposes of this paper the substantiation status of cases involving multiple forms of maltreatment was determined in terms of the substantiation status of the primary form. For each investigation, workers noted whether any physical harm had been documented. Harm was classified as severe if medical treatment was required. Workers also documented whether the substantiated or suspected maltreatment involved a single incident versus multiple incidents.

Investigation-related variables analyzed in this paper include whether: the family had been previously opened for child welfare services; the case would be transferred to ongoing child welfare services; a referral had been made to a specialized service, including services provided by the child welfare authority or by an external agency; a child welfare court application had been initiated during the investigation; the child had been placed in out-of-home care at any point during the investigation. For the purposes of this paper, the formal child welfare placement categories—kinship foster care, foster care, group home, and residential treatment—were collapsed into a single dichotomous placement variable.

Four caregiver risk factors were included in this analysis: substance abuse (alcohol or drug abuse), mental health, cognitive impairment, and lack of social supports. These were tracked for up to two caregivers. Three sets of child functioning concerns were recoded from a checklist of 18 possible concerns: academic difficulties, internalizing problems (depression, anxiety, suicidal thoughts, or self-harm), and externalizing problems (aggression, running, attention deficit disorder [ADD-ADHD], drug or solvent abuse, or alcohol abuse). Parent and child functioning concerns were collapsed into

TABLE 1
Forms of investigated and substantiated maltreatment in Canada in 2008

	<i>Single form of investigated maltreatment</i>				<i>Multiple forms</i>	<i>Total maltreatment</i>
	<i>Hit with hand or object</i>	<i>Exposure to IPV</i>	<i>Neglect</i>	<i>Other maltreatment</i>		
Investigated maltreatment	15,894	25,783	40,713	25,546	66,476	174,411
Rate per 1000 children	2.64	4.28	6.76	4.24	11.04	28.96
Percentage of investigations	9%	15%	23%	15%	38%	100%
Substantiated maltreatment	5885	16,499	15,973	7743	39,340	85,440
Rate per 1000 children	0.98	2.74	2.65	1.29	6.53	14.19
Substantiation rate	37%	64%	39%	30%	59%	49%

Weighted estimates based on a sample of 11,807 maltreatment investigations

RESULTS

dichotomous categories: noted (the concern was suspected or confirmed) and not noted. A housing problem variable was derived from four housing questions: The family had moved two or more times in the past year, the home was overcrowded, or there were injury or health hazards in the home. Because income information was not available, the extent to which the household regularly runs out of money was used as a proxy measure for poverty. Four categories were used to describe the ethnic or Aboriginal background of the primary caregiver: white, visible minority (Black, Arab/West Asian; South Asian; Chinese; Southeast Asian), Aboriginal, and Other (Latin American and Other).

Since the focus of this paper is on investigations of alleged maltreatment reports, risk-only investigations were excluded from the analyses. Because age ranges for mandated reporting vary by jurisdiction, investigations involving children older than 15 were also excluded, yielding a final sample of 11,807 maltreatment investigations. The unit of analysis is the child maltreatment investigation. To generate national annual estimates in Table 1, two sets of weights were applied. Annualization weights were used to estimate the volume of cases investigated by each study site over the whole year, given that the original sample represents a three month period of activity. To account for the non-proportional sampling design, regional weights were also applied to reflect the size of the child population covered by each site relative to the child population in the region from which the site was sampled. Incidence estimates presented in rates per 1000 were derived by dividing the annual estimates by the total child population in Canada. Differences in case characteristics across the five categories of maltreatment were analyzed using chi-square tests of significance. To avoid inflating the chi-square estimates, tests were done by re-weighting the estimates back down to the original sample size.

More than half of all maltreatment investigations conducted in Canada in 2008 (60%) involved a single form of maltreatment (Table 1). Neglect was the single form of maltreatment that was investigated the most often (23% of all investigations), followed by exposure to IPV, other maltreatment (including emotional maltreatment, child sexual abuse, and other forms of physical abuse), and physical abuse involving hitting with a hand or object. Investigations involving exposure to IPV and multiple forms were substantiated most often, 69% and 62% respectively, whereas investigations involving hitting or other forms of maltreatment were substantiated the least often, 38% and 32% respectively.

Forms of investigated maltreatment varied significantly by ethnic group (Table 2). While 13% of all maltreatment investigations involve visible minority children, a rate that is below the overall proportion of visible minority children across Canada (18%), visible minority children were more than twice as likely to be investigated because of allegations of abuse involving hitting, with 30% of all hitting investigations involving visible minorities. Aboriginal children are over-represented in terms of overall investigations and in particular with respect to investigations where the single concern is neglect: Whereas 6% of children across Canada are Aboriginal, 20% of all investigations and 26% of single neglect investigations involve Aboriginal children.

As shown in Table 3, investigations involving concerns about hitting were more likely to involve some form of physical harm than other forms of maltreatment, although they were less likely to involve severe harm requiring medical intervention. Nevertheless, in 87% of cases involving concerns about hitting, no bruises, scrapes or other physical harm was documented. Cases involving hitting also

TABLE 2
Forms of investigated maltreatment by minority group in Canada in 2008

	<i>Single form of investigated maltreatment</i>				<i>Multiple forms</i>	<i>Total maltreatment</i>	<i>Proportion of all children in Canada^b</i>
	<i>Hit with hand or object</i>	<i>Exposure to IPV</i>	<i>Neglect</i>	<i>Other maltreatment</i>			
<i>Minority group*</i>							
White	55%	65%	63%	77%	64%	65%	73%
Visible minority ^a	30%	14%	9%	8%	12%	13%	18%
Aboriginal	10%	18%	26%	12%	22%	20%	6%
Other	4%	3%	2%	2%	3%	2%	3%
<i>Total maltreatment investigations</i>	15,894	25,783	40,713	25,546	66,476	174,411	

Weighted estimates based on a sample of 11,807 maltreatment investigations.

^a Black, Asian, South Asian, and Arabic.

^b Statistics Canada (2009, 2010). * $p < .001$.

TABLE 3
Forms of investigated maltreatment by harm and duration in Canada in 2008

	Single form of investigated maltreatment				Multiple forms	Total maltreatment
	Hit with hand or object	Exposure to IPV	Neglect	Other maltreatment		
<i>Harm*</i>						
No physical harm	87%	99%	96%	89%	93%	94%
Moderate physical harm	12%	<1%	1%	7%	4%	4%
Severe physical harm	<1%	<1%	2%	4%	2%	2%
<i>Duration*</i>						
Single incident	26%	42%	19%	25%	21%	25%
Multiple incidents	17%	33%	27%	14%	49%	34%
Does not apply (unfounded)	57%	25%	54%	61%	29%	42%
<i>Total maltreatment investigations</i>	15,894	25,783	40,713	25,546	66,476	174,411

Weighted estimates based on a sample of 11,807 maltreatment investigations. * $p < .001$.

differ from other cases in that they are less likely to involve multiple incidents of substantiated or suspected abuse (17%). In investigations where exposure to IPV was the single concern, a very small number of cases (under 1%) involved physical harm or punishment. While harm was relatively rare in single neglect investigations, when it occurred it was more likely to be severe enough to require medical intervention.

Forms of investigations varied significantly by child age. As shown in Table 4, older children, aged four to 15 years, were disproportionately represented in investigations involving being hit with a hand or object, while younger children, under four years, were disproportionately represented in investigations involving exposure to IPV or neglect.

Compared to all other forms of investigated maltreatment, significantly fewer parent and household concerns were noted in investigations where hitting was the sole concern (Table 5). In contrast, child externalizing problems were most likely to be noted in cases involving hitting, and, less dramatically, academic difficulties were also noted more often. A different pattern of concerns was noted in cases where exposure to IPV was the sole reason for investigation: Parent substance abuse and mental health concerns were noted more often; housing, poverty, and child-related concerns were noted the least often. Neglect cases were similar to other forms of maltreatment and multiple forms of maltreatment, with high levels of parent and child concerns and higher levels of housing and financial problems.

The child welfare intervention response (Table 6) was least intensive in cases where hitting was the sole concern: only 11% were open for on-going child welfare service, 1% involved a placement in out-of-home care and 2% led to court proceedings. While the pattern was overall similar in cases of exposure to IPV, nearly twice as many cases (21%) were open for ongoing services, although this proportion remained significantly lower than the proportion of openings noted in neglect and multiple maltreatment cases. In cases of neglect the child welfare response was more intensive: 7% of neglect investigations led to an out-of-home placement during the investigation period and court proceedings were initiated in 4% of cases. Compared to all other forms of maltreatment, neglect cases were most likely to have been previously open for services (68% of cases), although only 25% of neglect cases were open for ongoing services.

DISCUSSION

As hypothesized, in situations where exposure to IPV or potentially abusive hitting were the sole reason for

TABLE 4
Forms of investigated maltreatment by age-group in Canada in 2008

Age group*	Single form of investigated maltreatment				Multiple forms	Total maltreatment	Proportion of children 0–16 in Canada
	Hit with hand or object	Exposure to IPV	Neglect	Other maltreatment			
<1 year	2%	10%	8%	4%	5%	6%	6%
1–3 years	11%	26%	21%	13%	17%	18%	17%
4–7 years	30%	27%	24%	25%	25%	26%	23%
8–11 years	29%	21%	23%	23%	26%	24%	26%
12–15 years	28%	16%	23%	34%	26%	25%	28%
Total maltreatment investigations	15,894	25,783	40,713	25,546	66,476	174,411	6,022,005 ^a

Weighted estimates based on a sample of 11,807 maltreatment investigations.

^a Age and sex for the population of Canada, provinces, territories, census divisions and subdivisions, 2006 Census – 100% data (table). Topic-based tabulations on Statistics Canada Catalogue no. 97-551-XCB2006011, Ottawa, July 17, 2007. * $p < .001$.

TABLE 5
Forms of investigated maltreatment by parent, household and child concerns in Canada in 2008

	Single form of investigated maltreatment			Multiple forms	Total maltreatment	
	Hit with hand or object	Exposure to IPV	Neglect			
Parent substance abuse*	15%	35%	32%	14%	37%	30%
Parent mental health*	10%	23%	21%	16%	32%	24%
Parent cognitive impairment*	2%	3%	8%	3%	9%	6%
Parent lacks support*	21%	30%	34%	22%	42%	33%
Housing problems*	9%	10%	23%	11%	23%	18%
Family runs out of money*	3%	6%	12%	4%	18%	11%
Child externalizing problems*	26%	9%	18%	21%	24%	20%
Child internalizing problems*	15%	8%	13%	18%	23%	17%
Child academic difficulties*	24%	8%	20%	20%	24%	20%
Total maltreatment investigations	15,894	25,783	40,713	25,546	66,476	174,411

Weighted estimates based on a sample of 11,807 maltreatment investigations. * $p < .001$.

TABLE 6
Forms of investigated maltreatment by service response in Canada in 2008

	Single form of investigated maltreatment				Multiple forms	Total maltreatment
	Hit with hand or object	Exposure to IPV	Neglect	Other maltreatment		
Previous openings*	47%	56%	68%	57%	64%	61%
Open for ongoing services*	11%	21%	25%	17%	38%	27%
Referral to specialized services*	41%	58%	44%	45%	63%	53%
Out-of-home placement*	1%	1%	7%	2%	9%	5%
Child welfare court*	2%	2%	4%	5%	10%	6%
Total maltreatment investigations	15,894	25,783	40,713	25,546	66,476	174,411

Weighted estimates based on a sample of 11,807 maltreatment investigations. * $p < .001$.

investigation, workers noted fewer risk factors and they were less likely to result in ongoing child welfare interventions compared to other maltreatment investigations; in contrast, in situations involving alleged neglect as the sole reason for investigation, workers noted a higher number of concerns for the family and child, and required a more intensive child welfare response (transfers to ongoing services, placement, court, and referrals). Visible minority families were over-represented in cases involving hitting and Aboriginal families were over-represented in cases involving neglect. These findings are consistent with previous studies of maltreatment investigations conducted in Canada (Black et al., 2008; Lavergne et al., 2008; Sinha et al., 2011) and clearly identify types of cases where differential service responses could be considered (Sawyer & Lohrbach, 2005; Trocmé & Chamberland, 2003; Waldfogel, 2008). The low rate of ongoing child welfare services in cases of exposure to IPV (21%) and the relatively high rate of referral to specialized services (58%) indicate that child welfare services have already developed differential approaches in these cases.

Investigations where the sole concern was exposure to IPV rarely involved any physical harm to the child; children presented with few signs of internalizing or externalizing disorders, and few housing and income problems were noted. The rate of concerns for substance abuse and mental health problems noted for caregivers in the home were, however, higher in these cases. Cases in which the sole concern of the investigation was parents hitting their children with their hands or an object had a lower risk profile in terms of parent, income and housing risk factors, although concerns were more likely to be noted with respect to academic difficulties and externalizing disorders. Rates of severe harm requiring medical attention were lower than rates reported for other forms of maltreatment, while rates of moderate harm were higher. Nevertheless in 87% of investigations involving hitting, no bruises, marks or other signs of physical harm were noted. The child welfare service response was less intensive—with respect to rates of service provision, out-of-home placement and court—for both types of investigations, compared to other forms of maltreatment.

One of the intriguing findings from the CIS-2008 is the contrast between the number of cases that had been previously opened for services (61% overall) and the relatively small proportion of cases being opened for ongoing child welfare services (27% overall). This imbalance provides further evidence of a potential need to realign reporting and investigation procedures with child welfare mandates and service capacity. Considering this possible imbalance and the fact that the majority of reports about hitting are being made by

schools (schools made 24% of all reports, but reported 60% of cases where hitting was the sole concern) and the majority of exposure to IPV reports are being made by the police (the police made 22% of all reports, but were responsible for 62% of reports about exposure to IPV¹), a compelling argument can be made that schools and police need different referral protocols as well as better access to alternative family and child support services (Jaffe et al., 2003; Nixon et al., 2007). The significant over-representation of visible minority families in cases where hitting is the sole concern also implies a need for public education programs designed to change attitudes and practices related to corporal punishment, rather than responding on a case-by-case basis through an investigatory process that is unlikely to change parenting practices (Durrant, 1999; Taylor et al., 2011). The Canadian Criminal Code's caregiver use of force provision only adds to this confusion, especially for new immigrant families who are trying to adapt their traditional parenting practices in a new environment (Durrant et al., 2009).

Investigations where possible neglect was the sole concern were found to involve a more complex set of factors. As expected, poverty and housing problems were noted more often in these instances and Aboriginal families were more than four times more likely to be reported for neglect than non-Aboriginal families. These cases presented with more concerns noted for both the child and the caregiver as compared to cases involving exposure to IPV or hitting, and elicited a more intensive child welfare service response, which is consistent with other studies using the CIS (Blackstock et al., 2004; Sinha et al., 2011; Trocmé et al., 2004). Unlike the large number of reports from the police with respect to exposure to IPV and from schools with respect to hitting, neglect cases are reported from a range of professional and community sources. Nevertheless, even though the service provision rate in neglect cases is higher than for most other forms of maltreatment, three-quarters of neglect investigations were not opened for ongoing services while over two-thirds (68%) of investigations involved families who were already known to the child welfare system. While the development of differential response services in cases of neglect will need to go beyond changes to reporting protocols, the significant over-representation of Aboriginal families (Sinha et al., 2011) and the limited access to prevention services in these communities (Blackstock, 2011) point to important service gaps that need to be addressed beyond the limited scope of child welfare services (Sinha et al., 2011; Trocmé, Knoke, & Blackstock, 2004).

Limitations

While the CIS provides a unique opportunity to examine the child welfare service response to reported maltreatment across Canada, a number of limitations of the study must be taken into consideration in interpreting these findings. The data collected are assessments provided by the investigating child welfare workers and are not independently verified. Participating child welfare workers were, however, trained by the research team to ensure a certain level of consistency in the application of the study definitions. The study only examined cases that were open for investigation by child welfare and did not track screened-out reports, nor could it track internal reports on already open cases. Annual counts are weighted estimates based on the sampled organizations' annual case volume statistics, which do not control for seasonal variations and include an unknown proportion of duplicate reports; the unit of analysis is therefore the child maltreatment investigation.

The study only tracked services provided during the investigation and does not include longer term follow-up; it would be important to gather such information in future studies given the relatively large number of cases that appear to be diverted to other community services in cases involving exposure to IPV. Because this paper is designed to examine patterns across very different types of maltreatment, the analyses are descriptive and limited to bivariate comparisons. More in-depth analysis of each of these three forms of maltreatment and of the service response to Aboriginal and visible minority communities is necessary and will be done in future studies. For instance, multivariate analyses will be used to explore to what extent the over-representation of Aboriginal families can be explained by poverty-related factors, parent-risk factors or discrimination, or to examine the interplay between community, parent and child-related factors associated with higher rates of placement in cases of neglect.

CONCLUSIONS

The rapid expansion of child welfare service across Canada, and in jurisdictions that have followed a similar protection driven approach (Gilbert et al., 2009a), is forcing service providers and policy makers to consider alternate service delivery models that may be more appropriately designed to address the needs of some of the children and families that are currently being reported to child welfare authorities

¹Sources of reports are described in Table 3-4b of the CIS-2008 Major Findings report (Trocmé et al., 2010a). A table of the breakdown of sources of report by maltreatment type as described in this paper is available from the first author.

(Waldfoegel, 2008). This paper draws attention to several such examples and points to the importance of developing services beyond the child welfare system. In cases of reports primarily coming from school personnel about children who are hit by parents, usually without any injury being noted, and often children from visible minority families, it may be more appropriate to develop targeted public education campaigns about alternative parenting methods. In cases where exposure to IPV is the sole concern, most of which are reported by the police with physical harm or emotional harm to the child being very rarely noted, specialized family violence services may be better equipped to provide a first line of response, thus giving the victimized parent more control over the referral process and avoiding any perception that the victimized parent may be responsible for the child's exposure to IPV (Sawyer & Lohrbach, 2005). While in cases of neglect the CIS documented more problems at the level of the child and the family, the dramatic over-representation of Aboriginal families living in poverty requires closer examination of the community services and supports that could be provided, either as an alternative to child welfare services or in conjunction with them.

Exposing children to IPV, hitting them to correct their behavior, or failing to attend to their needs are serious problems that extended families, communities, and social services must respond to; however, these are not necessarily situations where a child protection investigation is the only possible response. The challenge is to develop alternative service options that are best suited for engaging families and generating community support without diluting the need for some type of response (English et al., 2000) and without losing sight of the fact that in some of these cases a traditional protection response is required (Sawyer & Lohrbach, 2005). The emergence of differential response models in several Canadian jurisdictions may prove to be well suited to address the increasingly broad range of situations referred to Canadian child welfare authorities; however, evaluation of the efficacy of these new models is required to ensure that children are being adequately supported and protected.

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