Examining the Impact of Policy and Legislation on the Identification of Neglect in Ontario: Trends Over-Time

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Examining the Impact of Policy and Legislation on the Identification of Neglect in Ontario: Trends Over-Time

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Abstract:

Objectives: Reported neglect investigations were compared across a 20-year time frame using data from the five cycles of the Ontario Incidence Study of Reported Child Abuse and Neglect (OIS-1993 to 2013) in order to discuss the impact of significant policy changes on the Ontario child welfare system’s response to child neglect.

Methods: Each OIS cycle used a multi-stage sampling design. A representative sample was selected from all mandated child welfare organizations. Cases were selected over a three-month period and then weighted to produce provincial estimates. The information was collected directly from child welfare workers at the conclusion of the investigation using a three-page data collection instrument.

Results: Changes in rates of reported neglect vary by form but overall there has been a significant increase in reported neglect in Ontario since 1993. There was a decline in investigations involving permitting criminal behaviour, which was the most investigated form of neglect in 1993 and least investigated in 2013. Physical and medical neglect increased dramatically between 1998 and 2003. Transfers to ongoing services for neglect investigations remained relatively stable despite the doubling of neglect investigations.

Conclusion and Implications: Transfer to ongoing services did not increase consistently with the investigation rate. This could be reflecting a significant resource gap, whereby the number of children and families receiving ongoing child welfare services is determined by capacity rather than need or it could mean that referral processes are
mistakenly identifying situations that do not need child welfare services. Further analysis is required to understand these trends.

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**Conflict of Interest:**

The authors declare no conflicts of interest.

**Keywords:**

neglect, child welfare, child protection

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**Introduction**

Using data from five cycles of the Ontario Incidence Study of Reported Child Abuse and Neglect (OIS-1993, OIS-1998, OIS-2003, OIS-2008, OIS-2013) this paper will compare neglect investigations across cycles of the study, to examine trends related to forms of neglect and the Ontario child welfare system's response to the identification of alleged neglect (Trocmé, McPhee, & Tam, 1995; Trocmé et al., 2002; Fallon et al., 2005; Fallon et al., 2012; Fallon et al., 2015). Neglect is one of the most frequently occurring child welfare concerns in Canada, cited in 34% of all substantiated child maltreatment cases (Trocmé et al., 2010). Persistent neglect has profound and long-term impacts on children that can result in a wide range of issues such as developmental delays, eating difficulties, inability to be soothed, aggression, depression, anxiety and other emotional functioning issues (Perry, 2002). Children who experience neglect are often younger and in more chronic situations (Mayer, Lavergne, Tourigny, & Wright, 2007). The definitions of child neglect are varied (Bundy-Fazioli, Winokur, & DeLong-Hamilton, 2009; Fallon, Trocmé, & Van Wert, 2014). In general, neglect is seen as a failure to provide basic physical, emotional or educational needs or to protect a child from harm regardless of whether harm is the intended consequence (Leeb, Paulozzi, Melanson, Simon, & Arias, 2008). Neglect can occur either through specific acts of the caregiver or a failure to act on the part of the caregiver (Fallon et al., 2014). In general, research in the U.S. has documented that sociodemographic conditions, including and especially poverty, are significant drivers of neglect (Ethier, Couture, & Lacharité, 2004).

Resilience is identified as arising from the “ordinary protective processes” that shelter human development in the face of diverse threats (Masten, Cutuli, Herbers, & Reed, 2009, p. 117). The greatest risk to children arises when these protective processes are undermined (Masten et al., 2009). The pervasive nature of childhood neglect chronically undermines such protective processes and has grave implications for an individual’s ability to demonstrate
resilience. In addition to deficiency in environmental supports, when basic needs are not met over an extended period of time individual energy is drawn away from typical daily activities, such as school and social relationships, and absorbed by more basic concerns. Neglect erodes and depletes available individual resources leaving a child with few reserves from which to draw upon. When this occurs in childhood typical development is impacted. The earlier in a child’s life this occurs the more profound the consequences (Landry, Smith, Swank, & Guttentag, 2008; van der Kolk, 2005). Understanding how the child welfare system responds to a child who has been identified for a concern regarding neglect is vital in identifying the need for specific interventions that can ameliorate negative outcomes of neglect.

The first incidence study to take place in Canada occurred in the province of Ontario in 1993 (Trocmé, McPhee, & Tam, 1995). Since 1993, the Ontario Incidence Study of Reported Child Abuse and Neglect (OIS) has been conducted in 5 year increments (OIS-1993, OIS-1998, OIS-2003, OIS-2008 and OIS-2013). The primary objective of the OIS study has remained consistent for the past twenty years: to produce an estimate of reported child abuse and neglect. During this time there have been a number of definitional and methodological changes to the study’s procedures in response to a changing child welfare practice and policy environment. Nonetheless, data from the Ontario Incidence Study of Reported Child Abuse and Neglect provides one of the few ways to track the incidence of reports of neglect in Ontario. The incidence of reported child abuse and neglect in Ontario doubled between 1998 and 2003. In 1998 there was an estimated 64,658 child maltreatment investigations conducted or 27.43 per 1000 children. In 2003 the number of investigations had increased to 128,108 or 53.59 per 1,000 investigations. Since 2003 the rate of investigation has remained stable (Fallon et al., 2015).

**Ontario Policy Changes**

Several major legislative and policy changes have occurred over the past 20 years in the Ontario child welfare system. In the 1990s, a series of inquests into the deaths of children whose families had been receiving child welfare services took place resulting in criticism of a focus on family preservation. This marked a shift from a family centred model to one with a greater focus on the immediate safety of the child. Partially in response to this changing emphasis in practice, standardized decision-making tools were adopted in Ontario and in 1998, and risk assessment tools were integrated into practice (Commission, 2012).

In 2000, the Ontario Child and Family Service Act (CFSA) expanded the definition of children in need of protection, and the paramount purpose of the Act, to promote the safety, well-being and best interests of children, was clarified. The inclusion of neglect as grounds for intervention was made more explicit and the threshold for intervention in cases involving “risk of likely harm” was clarified. This, coupled with an emphasis on duty to report resulted in an unprecedented increase in the number of child welfare investigations between 1998 and 2003 (Trocmé et al., 2005).

Since the year 2000, the government of Ontario and the child welfare sector have jointly implemented significant changes to the province’s child welfare system (Ontario Association of Children's Aid Societies, 2014). In 2006, the Ontario Child Welfare Transformation Agenda
The Transformation Agenda launched major policy changes, intended to foster a more balanced approach to child welfare practice by protecting children while promoting well-being and strengthening family and community capacity (Ministry of Children and Youth Services (MCYS), 2005). The Transformation Agenda’s guiding principles for policy development and implementation included a focus on outcomes as well as building and sustaining research capacity (MCYS, 2005). In 2009, the Ontario Minister of Children and Youth Services established the Commission to Promote Sustainable Child Welfare (the Commission) to develop and implement changes to the child welfare system (Commission, 2012). Policy directions from the Transformation Agenda and the Commission have underscored the importance of preventing the deterioration of child and family circumstances through early identification, support and/or family preservation for at-risk and vulnerable children.

The objective of this paper is to present descriptive data about the incidence of reported neglect in Ontario over a 20-year time-frame in order to determine the impact on significant policy changes on reported neglect. Specifically, there are three main research questions addressed in this study:

1. Has there been an increase in the incidence of reported neglect in Ontario since 1993?
2. Has there been an increase or decrease of any of the eight specific forms of neglect measured in the OIS?
3. Have there been changes in the child welfare response to neglect investigations, specifically substantiation, transfers to ongoing services, child welfare court, placement in out of home care, policy involvement and referrals to external/internal services?

Methods

Each Ontario Incidence Study of Reported Child Abuse and Neglect used a multi-stage sampling design. First a representative sample of child welfare sites was selected from a sampling frame that includes all mandated child welfare organizations in Ontario. The second sampling stage involved selecting cases opened in the study sites during the three-month period from October 1 to December 31 in the year the study took place. A three-month duration was considered optimal to ensure high participation rates and good compliance with study procedures. Screened-in investigations were evaluated by study staff to ensure that they met the OIS definitions of maltreatment and in 2008 and 2013 the definition of maltreatment was expanded to include risk of maltreatment. See Table 1 for the number of agencies and investigations in each study year.

Weighting

In each OIS cycle, the sample was weighted with regionalization and annualization weights to derive estimates of the provincial annual rates and characteristics of maltreatment investigations in Ontario. Data were weighted for bivariate analysis. The regionalization weight was developed to estimate the number of investigations completed within the
three-month data collection period by child welfare organizations across Ontario. The regionalization weight includes three components: (1) a sample weight that adjusts for the disproportional selection of agencies from the province, (2) a subsampling weight that accounts for random subsampling of investigations in agencies that investigated more than 250 cases during the three-month data collection period, and (3) an agency size correction, designed to adjust for variations in the size of agencies within a stratum. The annualization weight is used to estimate annual investigation volume based on the investigation volume during the three-month data collection period. The annualization weight is the ratio of all investigations conducted by a sampled agency during 2008 to investigations conducted by the sampled agency during the case selection period (Fallon et al., 2015).

Data collection instruments

In each cycle, the information was collected using a three-page data collection instrument consisting of an Intake Face Sheet, a Household Information Sheet and a Child Information Sheet. This data collection instrument was completed by the investigating worker or the worker with primary responsibility for the investigation. The Intake Face Sheet collected information about the report or referral and partially identifying information about the child and household relationships. The Household Information Sheet collected detailed information on up to two caregivers living in the home, caregiver functioning, housing situation, and referrals to other services. The Child Information sheet documented up to three different forms of maltreatment and gathers information on child functioning, court activity and out-of-home placement.

Because of changes in investigation mandates and practices over the last fifteen years, the OIS-2008 was redesigned to separately track maltreatment investigations versus cases opened only to assess the risk of future maltreatment. Before the OIS-2008, cases that were only being assessed for risk of future maltreatment were not specifically included. Following the 2003 cycle of the OIS, validation tests demonstrated that child welfare workers were coding cases that did not involve specific incidents of abuse or neglect as “maltreatment investigations”, because of the risk of future maltreatment (Fallon, et al., 2011). This led to the inclusion of a “risk investigation only” category in the 2008 cycle, under which 26% of all investigations fell (Fallon, et al., 2012). For the OIS-2008 and OIS-2013, investigating
Table 2. Ontario Incidence Study: Definitional Changes Forms of Neglect 1993-2013

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<tbody>
<tr>
<td><strong>Failure to Supervise: Physical Harm</strong></td>
<td>The child has suffered or is at substantial risk of suffering physical harm caused by the caretaker’s failure to supervise and protect the child</td>
<td><strong>Added:</strong> Includes situations where a child is harmed or endangered as a result of the caregiver’s actions</td>
<td>No Change</td>
<td><strong>Removed:</strong> The word substantial to describe risk</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>Failure to Supervise: Sexual Abuse</strong></td>
<td>The child has been or is at substantial risk of being sexually molested or sexually exploited where the caretaker knows or should have known of the possibility of sexual molestation and fails to protect the child adequately</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>Physical Neglect</strong></td>
<td>The child has suffered or is at substantial risk of suffering physical harm caused by the caretaker’s failure to care and provide for the child adequately. This includes inadequate nutrition/ clothing and unhygienic/dangerous living conditions. Note that there must be evidence or suspicion that the caregiver is at least partially responsible for the situation.</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>Medical Neglect</strong></td>
<td>The child requires medical treatment to cure or prevent or alleviate physical harm or suffering and the child’s caretaker does not provide or refuses or is unavailable or unable to consent to the treatment</td>
<td>No Change</td>
<td><strong>Added:</strong> This includes dental services when funding is available</td>
<td>No Change</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>Failure to Provide Treatment</strong></td>
<td>The child suffers from or is at risk of suffering from (1) emotional harm demonstrated by severe anxiety, depression, withdrawal or self-destructive or aggressive behaviour, or (2) a mental, emotional or developmental condition that, if not remedied, could seriously impair the child’s development, and the caretaker does not provide, or refuses, or is unavailable, or unable to consent to treatment to remedy or alleviate 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 failure to thrive</td>
<td>No Change</td>
<td><strong>Added:</strong> Parent awaiting service should not be included in this category</td>
<td>No Change</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>Permitting Criminal Behaviour</strong></td>
<td>A child has committed a criminal offence (1) with the encouragement of the child’s caretaker or because of the caretaker’s failure or inability to supervise the child adequately, or (2) services or treatment are necessary to prevent a recurrence and the child’s caretaker does not provide or refuses or is unavailable or unable to consent to those services or treatment</td>
<td>No Change</td>
<td><strong>Removed:</strong> (2) services or treatment are necessary to prevent a recurrence and the child’s caretaker does not provide or refuses or is unavailable or unable to consent to those services or treatment</td>
<td>No Change</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>Abandonment</strong></td>
<td>The child’s parent has died or is unable to exercise custodial rights and has not made adequate care provisions for care and custody or the child is in residential placement and the parent refuses or is unable to resume custody</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
</tr>
<tr>
<td><strong>Educational Neglect</strong></td>
<td>Caretakers knowingly permit chronic truancy (5+ days a month) or fail to enroll child or repeatedly keep at home, etc. If a child is experiencing mental emotional or developmental problems associated with school and treatment is offered but caretakers are not cooperating with treatment classify case under failure to provide treatment as well</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
<td>No Change</td>
</tr>
</tbody>
</table>
workers were asked to complete a data collection instrument for both types of cases. For cases involving maltreatment investigations, workers described the specific forms of maltreatment that were investigated and whether the investigation was substantiated. While this change provides important additional information about risk only cases, it has complicated comparisons with early cycles of the study.

The definitions used to describe the eight forms of neglect remained relatively consistent across cycles. The definitions used to describe the service dispositions made at the conclusion of a child maltreatment investigation have also remained consistent across cycles. See Table 2 for a description the definition of the forms of neglect used in the analysis.

In each cycle for each investigation, workers were asked about several decisions they routinely make at the conclusion of child maltreatment investigation: substantiation, transfers to ongoing services, use of child welfare court, placement in out of home care and whether there was police involvement in the investigation. Although there have been some minor changes, the definitions of these service dispositions have been relatively consistent. The decision to substantiate maltreatment meant that the balance of evidence indicated that abuse or neglect has occurred. Investigating workers were asked whether the investigated case would remain open for further child welfare services after the initial investigation. Placement in out of home care included, informal kinship care (kinship out of care and customary care), foster care (kinship in care and non-family foster care), and group home/residential (group home and residential/secure treatment). For the purposes of this analysis, only formal care was assessed. Use of child welfare court meant that an application to child welfare court was submitted. Workers indicated whether police were involved in the investigation regardless of whether or not charges were laid. Workers also indicated whether they had made a referral for any family member to a service external or internal to the child welfare authority.

**Analytic Plan**

SPSS Statistics version 23 was used to conduct the analysis. Incidence rates were calculated by first dividing the child maltreatment estimate by the population of children 15 years of age and under in Ontario using Census Canada counts and multiplying by 1000 to produce a rate per 1,000 children. Although each cycle of the OIS produced estimates that are based on a relatively large sample of child maltreatment-related investigations, sampling error is primarily driven by the variability between the participating agencies. Sampling error estimates were calculated to reflect the fact that the survey population had been randomly selected from across the province. Sampling errors were calculated by determining the sampling variance and then taking the square root of this variance. The sampling variance and sampling error calculated were an attempt to measure this variability. The sampling variability that was calculated was the variability due to the randomness of the cluster selected. Thus, the measured variability is due to the cluster.

Analyses focused on changes in the rates of neglect investigations and the associated service dispositions across cycles of the OIS. Statistical tests of significance were used to assess differences in neglect investigations for the variable of interest. Statistical significance was calculated to examine whether there had been a change in the incidence for the variable of interest from the previous OIS cycle.
Results

Table 3 presents a summary of the incidence of reported neglect in Ontario by form. Between 1998 and 2003 the incidence of reported neglect investigations almost doubled, from a rate of 9.69 per 1,000 children in 1998 to 17.33 per 1,000 children in 2003. The rate of reported neglect investigations has remained fairly consistent since 2003 with no statistically significant differences between the 2008 and 2013 cycles.

Within forms of neglect, there have been several changes over time. The incidence of investigations involving a concern of failure to supervise leading to physical harm doubled between 1993 and 1998. In 1993, 2.40 per 1,000 children were involved in this type of investigation versus 4.98 per 1,000 children in 1998. The incidence of failure to supervise investigations has remained stable since 1998 with no statistically significant differences in subsequent cycles. Investigations involving failure to supervise leading to sexual abuse quadrupled between 1998 and 2003, from a rate of .30 per 1,000 children in 1998 to 1.27 per 1,000 children in 2003. In 2008, the rate for investigations involving failure to supervise leading to sexual abuse declined to one similar to that of 1998 cycle (.50 per 1,000 children).


<table>
<thead>
<tr>
<th></th>
<th>OIS-1993</th>
<th>Rate per 1,000</th>
<th>Estimate</th>
<th>Rate per 1,000</th>
<th>Estimate</th>
<th>Rate per 1,000</th>
<th>Estimate</th>
<th>Rate per 1,000</th>
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<th>Rate per 1,000</th>
<th>Estimate</th>
<th>Rate per 1,000</th>
</tr>
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<tbody>
<tr>
<td>All Neglect Investigations</td>
<td>13,933</td>
<td>6.36</td>
<td>23,175</td>
<td>9.69</td>
<td>41,424</td>
<td>17.33†</td>
<td>28,908</td>
<td>12.09</td>
<td>26,768</td>
<td>11.2</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Failure to supervise: Physical Harm</td>
<td>5,258</td>
<td>2.43</td>
<td>11,753</td>
<td>4.98†</td>
<td>17,471</td>
<td>7.31</td>
<td>12,490</td>
<td>5.24</td>
<td>11,067</td>
<td>4.71</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Failure to supervise: Sex Abuse</td>
<td>655</td>
<td>0.33</td>
<td>715</td>
<td>0.30</td>
<td>3,034</td>
<td>1.27†</td>
<td>1,192</td>
<td>.50†</td>
<td>1,599</td>
<td>0.68</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Permitting Criminal Behaviour</td>
<td>6,236</td>
<td>2.85</td>
<td>5,106</td>
<td>2.17</td>
<td>500</td>
<td>2.1†</td>
<td>405</td>
<td>0.17</td>
<td>236</td>
<td>.10*</td>
<td></td>
<td></td>
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<tr>
<td>Physical Neglect</td>
<td>631</td>
<td>0.29</td>
<td>1,721</td>
<td>0.63†</td>
<td>11,863</td>
<td>4.96‡</td>
<td>9,156</td>
<td>3.84</td>
<td>7,869</td>
<td>3.35</td>
<td></td>
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</tr>
<tr>
<td>Medical Neglect</td>
<td>421</td>
<td>0.19</td>
<td>415</td>
<td>0.18</td>
<td>3009</td>
<td>1.26†</td>
<td>1,761</td>
<td>0.74</td>
<td>1,775</td>
<td>0.76</td>
<td></td>
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<tr>
<td>Failure to Provide Psychiatric Treatment</td>
<td>524</td>
<td>0.24</td>
<td>1,561</td>
<td>0.66*</td>
<td>755</td>
<td>.32*</td>
<td>1,069</td>
<td>0.45</td>
<td>1,551</td>
<td>0.66</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Abandonment</td>
<td>1,392</td>
<td>0.64</td>
<td>1,423</td>
<td>0.60</td>
<td>3840</td>
<td>1.61†</td>
<td>2,131</td>
<td>.89†</td>
<td>1,863</td>
<td>0.79</td>
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<tr>
<td>Educational Neglect</td>
<td>475</td>
<td>0.22</td>
<td>481</td>
<td>0.20</td>
<td>951</td>
<td>.40†</td>
<td>704</td>
<td>0.30</td>
<td>808</td>
<td>0.34</td>
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*p<.05.
† p<.01
‡ p<.001
Investigations where the primary focus is permitting criminal behaviour have had a dramatic decline. In 1993, the incidence of investigations involving permitting criminal behaviour was 2.85 per 1,000 children, the highest incidence of any form of neglect investigated. In 2013, investigations involving permitting criminal behaviour were .10 per 1,000 children, the lowest incidence of any form of investigated neglect. The dramatic decline began in 2003 when the rate changed from 2.17 per 1,000 children in 1998 to .21 per 1,000 children in 2003.

Both physical and medical neglect increased dramatically between 1998 and 2003. Physical neglect increased eight-fold from a rate of .63 per 1,000 children in 1998 to 4.96 per 1,000 children in 2003. Medical neglect increased seven-fold from a rate of .18 per 1,000 children in 1998 to 1.26 per 1,000 children in 2003 with no statistically significant differences in subsequent cycles from the 2003 incidence rate for both physical and medical neglect.

Investigations involving failure to provide psychiatric or psychological treatment increased nearly three-fold from a rate of .24 per 1,000 children in 1993 to .66 per 1,000 children in 1998. This rate fell to .32 per 1,000 children in 2003 and remained consistent for subsequent cycles of the OIS. Investigations involving abandonment doubled between 1998 (.60 per 1,000 children) to a rate of 1.61 per 1,000 children in 2003. In 2008, the incidence of abandonment investigations declined to .89 per 1,000 children and remained consistent in 2013. The incidence of educational neglect doubled between 1998 and 2003 – from a rate of .20 per 1,000 children to a rate of .40 per 1,000 children in 2003 and has remained consistent since 2003.

Table 4 describes the service dispositions (substantiation, transfers to ongoing services, placement in formal child welfare care, use of child welfare court, police involvement,

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<tr>
<td><strong>Service Disposition</strong></td>
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<tr>
<td>Substantiation</td>
</tr>
<tr>
<td>Transfer to Ongoing Services</td>
</tr>
<tr>
<td>Child Welfare Court</td>
</tr>
<tr>
<td>Placement (Formal)</td>
</tr>
<tr>
<td>Police Involvement</td>
</tr>
<tr>
<td>Referral (Internal/External Service)</td>
</tr>
</tbody>
</table>

*p<.05.
† p<.01
‡ p<.001
referral to an external or internal service) made at the conclusion of a neglect investigation over time. The incidence of substantiated neglect investigations doubled between 1998 (3.07 per 1,000 children) and 2003 (6.55 per 1,000 children). Transfers to ongoing services for neglect investigations increased from .66 per 1,000 children in 1993 to 2.84 per 1,000 children in 1998 but has essentially been stable in subsequent cycles of the OIS. The use of child welfare court is similar across cycles; the lowest incidence was in 1993 (.34 per 1,000 children) and the highest was .76 per 1,000 children in 2003. The incidence of placement in neglect investigations has also remained relatively stable with the exception of a doubling of the incidence of placement between 1993 (.32 per 1,000 children) and 1998 (.73 per 1,000 children). Police involvement in neglect investigations had the highest rate of police involvement in 2003 (2.05 per 1,000 children) before declining in 2008 (1.29 per 1,000 children). Neglect investigations involving referrals to an external or internal service had the highest rate in 2003 (10.90 per 1,000 children) before declining to 5.17 per 1,000 children in 2008.

**Discussion and Implications**

There are several significant findings when examining the change in the incidence of the Ontario child welfare system’s response to a concern for neglect. In general, the increase in neglect investigations between 1998 and 2003 is consistent with the overall increase in the rate of report of child maltreatment in Ontario (Trocmé et al, 2005). Within the specific forms there are some findings that require a more in-depth analysis. The addition of the risk category to the data collection instrument in 2008 has clearly impacted two forms of neglect: failure to supervise leading to sexual abuse and failure to provide psychiatric or psychological maltreatment. In 2008, investigations involving both of these categories dramatically declined.

In Ontario in 2008 an estimated 41,723 investigations were categorized as risk investigations (Fallon et al, 2010). With the addition of the risk category to the data collection instrument, workers were able to better describe situations in which children have not yet been harmed, but are at risk of harm because of the combination of risk factors in the household. A toddler who has been repeatedly left unsupervised in a potentially dangerous setting may be considered to have been neglected, even if the child has not yet been harmed. Placing a child at risk of harm is considered maltreatment. In contrast, risk of maltreatment refers to situations where a specific incident of maltreatment has not yet occurred, but circumstances, for instance parental substance abuse, indicate that there is a significant risk that maltreatment could occur in the future. It may be that in situations where workers are assessing the caregiver’s ability to provide treatment or to protect a child from sexual abuse, the focus is not on an incident of neglect, rather the likelihood that the child will be harmed in the future because of an inability to access the resources needed for the child’s behaviour or emotional needs.

The dramatic decline in permitting criminal behaviour warrants further investigation. It appears that the Ontario child welfare system no longer intervenes in situations where the child, through omission or commission, is encouraged to permit a criminal offence. Interestingly the most dramatic decline was in 2003, prior to workers being able to describe the investigation as a risk assessment. There has been a parallel decline in youth court cases; in 2013 – 2014 there was the lowest number of completed youth court cases since this data

The pronounced increase in the rate of physical and medical neglect investigations between 1998 and 2003 far exceeded the overall increase in the rate of neglect investigations. The introduction of standard decision-making tools and removal of the word “substantial” from the “likely risk of harm” in 2000 from the CFSA likely resulted in the identification of situations where there was a concern that children did not have their basic or medical needs met by their caregivers. This represents a threat to an individual’s ability to demonstrate resilience and an opportunity for the child welfare system to both identify need and provide instrumental support.

Despite the enormous variation in the rates of specific forms of neglect, the service dispositions examined are surprisingly stable over time, including transfers to ongoing services, use of child welfare court and placement. This finding could be interpreted in two very different ways. On one hand it could point to a significant resource gap in Ontario, whereby the number of children and families who receive child welfare services beyond investigation is determined by service capacity rather than service need. Within the time period of this analysis, overall funding for child welfare has become an increasing concern. In 2005/2006, the Multi-year Child Welfare Funding Model (CWFM) replaced the Funding Framework introduced in 1998/99 (Commission to Promote Sustainable Child Welfare, 2011). The CWFM was implemented in tandem with the policy changes of the Transformation Agenda, allowing for year to year changes in volume among child protection service agencies (Commission to Promote Sustainable Child Welfare, 2011). However, the Commission noted that while the Transformation Agenda encouraged options to support children within their families of origin, the ability to adequately provide this support varied across the province, and were dependent on the financial situation and priorities of individual child protection services (Commission to Promote Sustainable Child Welfare, 2011). A 2015 review by the Office of the Auditor General of Ontario identified that in 2013/14, child protection services received 4.5% less funding than the total funding they received in 2012/13; resulting in staff reduction and program discontinuation (Office of the Auditor General of Ontario, 2015).

Alternatively, referral and investigation processes could be mistakenly identifying a number of situations that do not need child welfare services. The policy changes of the late 1990’s and early 2000’s which specified “risk of likely harm” as a situation requiring further investigation and a more explicit definition of neglect as grounds for intervention, were likely contributors to the substantial increase in the incidence of reported neglect investigations between 1998 and 2003. With the relative stability of substantiation and transfers to ongoing services it is not clear if the increase of reported neglect investigations reflect appropriate referrals to child welfare. The Auditor General’s report in 2015, found that despite reduced staff and discontinued programs, as a result of the reduction in overall funding, the ability to deliver legally mandated protection services was not affected (Office of the Auditor General of Ontario, 2015).

How funding and policy changes have influenced the Ontario child welfare system’s response to child neglect is difficult to interpret given that the most significant increase in
substantiated neglect investigations and neglect investigations that resulted in a placement in out of home care were between 1993 and 1998, well before the major policy shifts described. The challenge facing child welfare is to protect children while avoiding the unnecessary stress and cost of investigation or ongoing child protection involvement in those situations which are not appropriate for child welfare services. These issues are inextricably linked, efforts to minimize one will generally impact the other (Mansell, Ota, Erasmus, & Marks, 2011). Concerns are emerging that child protection cases are being prematurely closed (Office of the Auditor General of Ontario, 2015). Further analysis of the families and children who have been previously referred to child welfare services is necessary in order to not only understand the nature of their issues but also what services have been provided to them.

Strength and Limitations

The OIS is an excellent source of information for this type of analysis, since it reflects data on children about the initial investigation stage. The OIS collects information directly from a provincial sample of child welfare workers at the point when an initial investigation regarding a report of possible child abuse or neglect is completed. The scope of the study is therefore limited to the type of information available to workers at that point. The study only documents situations that are reported to and investigated by child welfare agencies. The study does not include information about unreported maltreatment nor does it include cases that are only investigated by the police.

Similarly, the OIS does not include reports that are made to child welfare authorities but are screened out before they are investigated. While the study reports on short-term outcomes of child welfare investigations, including substantiation status, initial placements in out of home care, and court applications, the study does not track longer term service events that occur beyond the initial investigation. There have been some definitional changes to the variables used in this analysis which could result in error of the measurement of these constructs over time.

Conclusion

This paper provided a description of the rates of reported neglect in Ontario using a representative study conducted every five years. Changes in rates of reported neglect vary by form but overall there has been a significant increase in reported neglect in Ontario since 1993. Despite nearly two decades of significant policy changes, surprisingly little is known about the services provided to children and the subsequent impact on children’s service outcomes and trajectories. Significant resources are required to support the promotion of evidence-based practice and these data assist researchers and service providers to better understand child welfare services and their role in promoting resilience in children and families.

References


