Opportunities for Prevention & Intervention:

Lessons from the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2008)

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Outline

• Introduction to Canadian Incidence Study (CIS): 10 years of Canadian data

• Profile of young children and their caregivers in the CIS

• Current service provision patterns

• Intervention opportunities

• Prevention strategies
Canadian Incidence Study

- Core objectives:
  - Determine rates of investigated and substantiated maltreatment
  - Document forms and severity of maltreatment
  - Examine selected health determinants
  - Monitor short-term investigation outcomes
  - Compare rates and characteristics across cycles (93, 98, 03, 08)
  - Specific to CIS-08: distinguish maltreatment incident investigations and risk assessments

CIS-2008 Sample

- Site selection (n=112)
  - Sampled from 413 child welfare organizations
  - Stratified by site, YiT & Aboriginal delegation

- Case selection (n=9,933)
  - Opened Oct 1 to Dec 31, exp at 250
  - Family case counts, child case count in Quebec

- Identify investigated children (n=15,980)
  - Investigated because of maltreatment concerns
  - Excludes: >1, non-invest siblings & other concerns
Methodological Considerations

• Limited to reports investigated by child welfare
• Information collected directly from investigating child welfare workers
• No post-investigation follow-up
• Not designed to evaluate services
• Methodological changes across cycles
• Weighted national annual estimates
Changes in Rates of Investigations in Canada, USA & Australia: 98, 03 & 08

Measures of Child Maltreatment

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<td>1-&lt;5</td>
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<td>Investigations</td>
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Comparing Canada to the US (rate per 1,000 children)
Home Visiting Programs in Canada

- Great deal of variation in purpose and scope of programs
- Universal (e.g., Alberta) and targeted approaches (e.g., British Columbia)
- Evaluation is necessary

Program Components

- Screening
  - Whole population or subsets

- Voluntary services
  - Visits may occur immediately after hospital discharge or later
  - Visits may be one part of a broader program
  - Time frame and number of visits varies

- Objectives
  - Promote optimal child development
  - Increase family resiliency
  - Increase formal and informal social support through provision of coordinated services
  - Prevent more intensive service involvement
Research Literature

- Nurse-Family Partnership (NFP) Program developed by David Olds
  - Extensive and rigorous evaluation
  - Goals: to improve pregnancy outcomes, child health and development, and economic self sufficiency of the family
  - Observed outcomes:
    - 48% reduction in child abuse and neglect
    - 56% reduction in emergency room visits (accidents/poisonings)
    - 59% reduction in arrests at child age 15
    - 67% reduction in behavioral and intellectual problems at child age 6
    - 72% fewer convictions of mothers at child age 15

Research Literature

- Wide variability in home visiting programs (e.g., objectives, content, staffing)
- Systematic reviews report mixed results across various outcome measures
- Mechanisms underlying effectiveness of home visiting programs in improving child and family outcomes are not well understood
Rate of Infant Investigation

Filicides (<12) in Canada
Referral Source for Infant Investigations

- Other
- Anonymous
- Police
- Day care centre
- Child welfare service
- School
- Hospital
- Health / Social services
- Neighbour/friend
- Relative
- Parent

Primary Caregiver Concerns in Infant Investigations

- 18 Years of age or younger
- History of foster care/group home
- Perpetrator of DV
- Victim of DV
- Few social supports
- Physical health issues
- Mental health issues
- Cognitive impairment
- Drug/solvent abuse
- Alcohol abuse
Child Functioning Concerns in Infant Investigations

- Other
- Physical disability
- Positive toxicology at birth
- FAS/FAE
- Failure to meet milestones
- Intellectual/developmental disability
- Attachment issues

Household Concerns in Infant Investigations

- Household runs out of money
- One or more household hazard
- Two + moves
- One move
- Home overcrowded
Summary

- 25% of investigations referred from hospitals
- 23% of investigations referred from police
- 40% of infants are identified to the child welfare system for a concern about their future welfare
- 40% of their primary caregivers were identified as victims of domestic violence
- 45% of households with infants have moved within the past year
- 7% of infants have positive toxicology at birth

Multivariate Analysis

- 2 main types of referrals: hospital & police
- Classification analysis
- Examining the relationship of clinical predictors to service provision
- Binary logistic regressions
Conclusion

• Threefold increase in infant investigations

• Large % of risk cases

• From one perspective, the rapid increase in infant cases speaks to effective early identification of high risk cases and an opportunity for intervention

• What interventions need to be targeted by whom to these families?

• North American child welfare continues to be driven by case finding, the challenge of providing effective services remains

• Home visitation raises concerns in cases where domestic violence is present