

Schools Reporting Child Welfare Concerns in Ontario

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Abstract:

Objectives: Currently, there is a dearth of literature surrounding what the profile looks like of a child referred to child welfare services by a school professional.

Methods: The Ontario Incidence Study of Reported Child Abuse and Neglect was the first provincial incidence study to track cases of child abuse and neglect (Trocmé, McPhee, & Hay, 1994). The past five cycles (OIS-1993, OIS-1998, OIS-2003, OIS-2008, and OIS-2013), spanning twenty years, offer a unique opportunity for comparisons to be made over time. This study conducted a secondary analysis of the OIS to examine the profile of cases referred by school personnel to child welfare agencies across twenty years.

Results: Physical abuse is consistently the most commonly reported type of maltreatment by school professionals. Substantiated investigations resulting from school referrals have remained relatively low across all of the OIS cycles.

Discussion: The relatively low percentage of substantiated school referrals across the cycles of the OIS further validate the literature that shows school referrals to be significantly more likely to be unsubstantiated than other professional referrals (King, 2011; King & Scott, 2014; U.S. Department of Health and Human Services, 2007). Substantiation rates have not been above 30% for the past 10 years, and have never been higher than 40%. Further research is needed to offer concrete explanations for this trend.

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Conflict of Interest:

Authors declare no conflict of interest.

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Introduction

School professionals have a unique vantage point for identifying signs of child maltreatment (Gilbert et al., 2009; Hawkins & McCallum, 2001; Hinkelman & Bruno, 2008; King & Scott, 2014). This distinct perspective comes with the professional responsibility to report any suspicions of child abuse and neglect (Hawkins & McCallum, 2001). In North America, almost every jurisdiction has an extensive legislative framework that place school professionals under the duty to report suspected child abuse or neglect (Gallagher-Mackay, 2014). For example, in Ontario, section 72 of the Child and Family Services Act requires that anyone who has reasonable grounds to suspect that a child may be in need of protection must report the information to a Children's Aid Society (CFSA, 1990).

In addition to these legal requirements, educators often feel a moral obligation to report due to their personal loyalties to the safety of their students; consequently, school professionals contribute a large portion of reports to child-protection agencies (Gallagher-Mackay, 2014; Gilbert et al., 2009; King & Scott, 2014). For example, King and Scott noted that educators represented 35.8% of all total child maltreatment referrals, reported by the Canadian Incidence Study of Reported Child Abuse and Neglect – 2003 (Fallon et al., 2005).

Reporting Practices by Teachers and School Personnel

There are studies that show the reluctance of professionals to report suspected child maltreatment (e.g., Tufford, Mishna & Black, 2011). Despite the higher frequency of reports made by school professionals compared to other sources of referral, there is evidence that this group may be underreporting abuse and neglect worldwide (Gallagher-Mackay, 2014; Gilbert et al., 2009; Greco, Guilera, & Pereda, 2017; Cerezo & Pons-Salvador, 2004; Webster, O'Toole, O'Toole & Lucal, 2005). For example, one third of the teachers in Webster et al.'s

study (2005) underreported incidences of child abuse in their responses to vignettes and interview questions about child maltreatment cases. Moreover, in an interview-based study of educators' noncompliance to duties to report, Gallagher-Mackay (2014) found that most of the informants explained that teachers often avoided reporting cases of suspected child maltreatment on a regular basis. These trends, therefore, fit with past studies' findings that teachers often fail to uphold their responsibility to report suspected child maltreatment (Abrahams, Casey, and Daro, 1992; Gallagher-Mackay, 2014; National Center on Child Abuse and Neglect, 1992).

Understanding the various barriers that affect educators' reporting of child maltreatment can help explain underreporting. In Gilbert et al.'s (2009) review of professional practices and policies in sectors that contribute to the recognition of child maltreatment, they found that school professionals receive inadequate training and therefore have limited awareness of signs of child maltreatment and reporting procedures. Left feeling unprepared and uncertain about what defines reasonable grounds for suspicion, teachers are sometimes hesitant to report suspected child maltreatment cases (Gilbert et al., 2009; Hinkelman & Bruno, 2008; Kenny, 2004; King & Scott, 2014; Webster et al., 2005). In a review of the critical components of professional interventions, Hinkelman and Bruno (2008) reported that teachers feel unprepared to intervene effectively and appropriately as a result of unclear guidelines for reporting the alleged maltreatment. This lack of understanding also applies to a general confusion surrounding maltreatment indicators, as indicators for psychological abuse and neglect are also characteristics of other childhood dysfunctions (Gilbert et al., 2009). A further barrier to reporting is the fear amongst school professionals about damaging the teacher-child relationship, or the teacher-parent relationship (Gilbert et al., 2009; Hinkelman & Bruno, 2008; Webster et al., 2005). Finally, there is a lack of support available to teachers who are making allegations (Gallagher-Mackay, 2014; Gilbert et al., 2009). Gallagher-Mackay (2014) found that teachers require advice and moral support before and after making a call to child welfare services. However, this vital support depends on school culture and resources, such as regular access to a social worker which over a third of Ontario schools do not have (Gallagher-Mackay, 2014).

Characteristics of School Referrals

When school professionals do report maltreatment concerns, common characteristics have been identified. In comparison to cases reported by other professionals, those reported by educators are found to contain more child risk factors, such as child emotional or behavioural problems, and fewer caregiver and family risk factors, such as caregiver mental health problems (King & Scott, 2014). This confirms the theory that professionals are more likely to report cases of maltreatment that contain risk factors consistent with their vantage point (King, 2011).

Educators are also over-represented in referrals for physical abuse, with approximately two-thirds (61.6%) of all professional referrals originating from school staff (King & Scott, 2014). In contrast, they are less represented in referrals for neglect, sexual abuse, emotional maltreatment, and exposure to intimate partner violence (King & Scott, 2014). School professionals struggle to identify indicators of maltreatment and fear the consequences

of misreporting, therefore it has been suggested that educators are most comfortable in reporting maltreatment that is visible and not subjective in nature (Cooper, 2000).

Studies also show that school referrals are significantly less likely to be substantiated during an investigation (King, 2011; King & Scott, 2014; U.S. Department of Health and Human Services, 2007). In King and Scott's (2014) study of suspected maltreatment referrals in Canada in 2003, they found that maltreatment referrals by educators were not substantiated 45.3% of the time, while referrals from other professionals were not substantiated 28.4% of the time (King, 2011).

Research Objectives

Currently, there is a dearth of literature surrounding what the profile looks like of a referral to child welfare services by a school professional. The Ontario Incidence Study of Reported Child Abuse and Neglect was the first provincial incidence study to track cases of suspected child abuse and neglect (Trocmé, McPhee, & Hay, 1994). The past five cycles (OIS-1993, OIS-1998, OIS-2003, OIS-2008, and OIS-2013), spanning twenty years, offer a unique opportunity for comparisons to be made over time. This study conducted a secondary analysis of the OIS to examine the profile of suspected maltreatment cases referred by school personnel to child welfare agencies across twenty years.

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.

Table 1. Ontario Incidence Study of Reported Child Abuse and Neglect Sites and Sample Sizes

	OIS-1993	OIS-1998	OIS-2003	OIS-2008	OIS-2013
Site Selection	15/51	13/53	16/53	23/53	17/46
Case Selection	1898	2193	4175	4415	3118
Investigated Children	2447	3053	7172	7471	5265
Number of Children per Family	1.29	1.39	1.72	1.69	1.69
Estimate of Child Maltreatment Investigations	46,683	64,658	128,108	128,748	125,281

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 weighting process derived provincial annual incidence estimates from the OIS data. 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 within 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 data were 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. 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 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.

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, placement in out of home care, use of child welfare court, 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 an additional community based service (e.g., parent support group, in-home family or parent counselling, drug or alcohol counseling, etc.).

Analytic Plan

SPSS Statistics version 24 was used to conduct the analysis. Incidence rates of child maltreatment-related investigations 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. For incidence rates based on age category, the same process was followed but the estimates were divided by the population of children in the given age group. 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 the rates of children referred to the child welfare system by school professionals, the profiles of the children and families referred, and the associated service decisions and referrals made across cycles of the OIS. Statistical tests of significance were used to assess differences in school referral 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

Referral Sources

Table 2 presents information on incidence of investigations by referral source in Ontario. Between 1993 and 2013, the incidence of professional referrals more than doubled (from 16.78 per 1000 children in 1998 to 37.93 per 1000 children in 2003), and the incidence of school referrals increased significantly at this time (from 6.51 per 1000 children in 1998 to 13.42 per 1000 children in 2003). Between 2003 and 2008, the incidence rate for school-initiated investigations remained relatively stable. However, between 2008 and 2013, there was a smaller, yet still significant, increase (from 13.6 per 1000 children in 2008 to 16.3 per 1000 children in 2013).

Table 2: Incidence of Referral by Referral Sources in Ontario: 1993, 1998, 2003, 2008 & 2013

	OIS-1993			0	IS-199	98 OIS-2003					S-200	8	OIS-2013		
	Esti- mate	%	Rate per 1,000	Esti- mate	%	Rate per 1,000	Esti- mate	%	Rate per 1,000	Esti- mate	%	Rate per 1,000	Esti- mate	%	Rate per 1,000
Professional				39,563	61.2	16.78	90,685	70.8	37.93	91,517	71.1	38.42	93,802	74.9	39.92
School	10,939	23	5	15,336	23.7	6.51	32,071	25.0	13.42	32,372	25.1	13.6	38,284	30.6	16.3
Non-Professional				18,493	28.6	7.85	26,610	20.8	11.13	29,722	23.1	12.5	25,465	20.3	10.84
Anonymous / Other				7,893	12.2	3.35	7,409	5.8	3.1	10,937	8.5	4.6	9,104	7.3	3.87
Total				64,658		27.43	128,108		53.59	128,748		54.05	125,281		53.32

 $^{^{\}wedge}\,Based\ on\ samples\ of\ 2,463\ (OIS-1993),\ 1,822\ (OIS-1998),\ 4,159\ (OIS-2003),\ 6,506\ (OIS-2008),\ and\ 5,798\ (OIS-2013)\ investigations\ with\ information\ about\ referral\ sources.$

Child Functioning Concerns and Referrals

Table 3 presents information on the top three child functioning concerns each year for investigations involving schools as the source of referral. Data was not collected on child functioning concerns in the 1993 OIS cycle and direct comparisons over time are difficult since the classifications of functioning concerns differed between cycles. However, there are similarities among the subsequent four cycles. In 1998 and 2003, behavioural problems were the most common concern. In 2008 and 2013, academic difficulties were the most common concern. Academic difficulties was defined as including learning disabilities that are usually identified in school as well as any special education program for learning difficulties, special needs, or behaviour problems. In 2003, learning disability and special education services were the second and third most common concerns. Similarly, ADD/ADHD and intellectual/developmental disability were the second and third most common concerns in 2013. Depression/ anxiety, and negative peer involvement were the second and third most common in 1998. This is paralleled in 2008, when aggression and depression were the second and third most common concerns.

Table 3: Incidence of Top 3 Most Frequent School Referrals by Child Functioning Concerns in Ontario: 1993, 1998, 2003, 2008 & 2013*

	OI	S-1993		OIS	-1998		OIS	5-2003		OIS	5-2008		OIS	OIS-2013			
	Concern	Freq	%	Concern	Freq	%	Concern	Freq	%	Concern	Freq	%	Concern	Freq	%		
1st				Behav- oural Problem	5203	33.9	Other Behav- oural / Emotional problems	8435	26.3	Academic difficulties	8858	27.4	Academic difficulties	9254	24.2		
2nd				Depression Anxiety	2244	14.6	Learning Disability	7210	22.5	Aggession	5709	17.6	ADD/ ADHD	6239	16.3		
3rd				Negative Peer Involve- ment	2064	13.5	Special Educ. Services	6166	19.2	Depression	5532	17.1	Intellect- ual / Develop- mental disabilities	5601	14.6		

^{*} Rates are not included because child functioning is not a population measure.

Maltreatment & Services Profile

Table 4 provides incidence rates for school referrals by allegation type. Physical abuse is consistently the most commonly reported type of maltreatment by school professionals. Among the 1993, 1998 and 2003 cycles, the estimated number of physical abuse investigations steadily increased, rising from 6564 cases in 1993, to 9045 cases in 1998, finally to 18292 cases in 2003. In 2008, this number dropped to 12247 cases but increased to 17118 cases in 2013. A large proportion of school referrals to child welfare in 2008 and 2013 were based on suspected risk of future maltreatment, although the incidence decreased in 2013. This shift caused a decrease in incidence rates of physical abuse, neglect, and emotional maltreatment between 2003 and 2008. From 1993 to 2003, physical abuse represented almost two-thirds of investigations (62% of cases in 1993, 59% of cases in 1998, and 57% of cases in 2003). The percentage of school referrals regarding physical abuse decreased to 38% in 2008, and increased slightly in 2013 to 45%. However, it has been significantly higher than other forms of maltreatment every year, followed distantly by neglect.

Table 4: Incidence of School Referrals by Allegation Type in Ontario: 1993, 1998, 2003, 2008 & 2013

	OIS-1993			OIS-	OIS-1998			OIS-2003			OIS-2008			OIS-2013		
	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000	
Physical Abuse	6564	72	3	9045	59	3.84	18292	57	7.65	12247	38	5.14	17118	44.7	0.73	
Sexual Abuse	1955	19	0.89	790	5.2	0.34	1444	4.5	0.6	1211	3.7	0.5	1448	3.8	0.06	
Neglect	1589	15	0.73	3909	25.5	1.65	8110	25.3	3.39	5832	18	2.45	6865	17.9	0.29	
Emotional Maltreatment	350	3.3	0.16	1593	10.4	0.68	2621	8.2	1.1	1808	5.6	0.76	3816	10	0.16	
Other Maltreatment	133	1.3	0.06					5								
Exposure to Domestic Violence						-	1604		0.67						-	
Exposure to Intimate Partner Violence										1523	4.7	0.64	2796	7.3	0.12	
Risk										9749	30	4.09	2476	16.3	0.27	

The proportions of school referrals regarding neglect increased from 15% of total investigations in 1993 to 25% in 1998. It did not change significantly between 1998 and 2003. In 2008, the percent of neglect investigations dropped to 18% and remained there in 2013. The incidence of school referrals based on other forms of maltreatment, such as sexual abuse, emotional maltreatment, or exposure to intimate partner violence, are far less common. In 1993, sexual abuse represents 19% of school referrals but drops to 5% or lower for every subsequent OIS cycle.

Service Decisions and Referrals

Table 5 provides information on the service dispositions made at the conclusion of the child investigation. Substantiated investigations resulting from school referrals have remained relatively low across all of the OIS cycles. The proportions of school referrals that were substantiated increased from 30% in 1993 to 35.8% in 1998, with no significant change in 2003. In 2008, it decreased slightly to 24%, but went back up to 29.5% in 2013. The incidence rate for cases transferred to ongoing services steadily increased from 1993 to 2013, from 1.33 per 1000 children in 1993 to 2.75 per 1000 children in 2013. The greatest increase was between 1998 and 2003, when the rate increased from 1.6 per 1000 children to 2.55 per 1000 children. Incidence rates of formal placements decreased over time, from 0.28 per 1000 children in 1993 to 0.11 per 1000 children in 2008. However, by 2013, the rate was back up to 0.27 per 1000 children.

Table 5: Incidence of School Referrals by Service Decisions in Ontario: 1993, 1998, 2003, 2008 & 2013

	OIS-1993			OIS-1998			OIS-2003			OIS-2008			OIS-2013		
	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000	Estimate	%	Rate per 1,000
Substantiation	3121	30	1.43	5484	35.8	2.33	11558	36	4.83	2497	24	1.05	9455	29.5	4.02
Transfer to Ongoing Services	2903	27	1.33	3765	24.8	1.60	6089	19	2.55	6078	19	2.55	6458	17.2	2.75
Placement (formal)	612	5.6	0.28	528	3.4	0.22	421	1.3	0.18	262	0.8	0.11	632	1.7	0.27

Discussion

Several important findings emerge from the OIS data concerning school referrals to Ontario child welfare services in the past twenty years. The increase in incidence rates for school-initiated investigations for nearly all variables between 1998 and 2003 is consistent with the near doubling of investigated maltreatment rates between these cycles of the OIS (Fallon et al., 2015). Changes in legislation and shifts in investigation standards likely led to this increase more so than an increase in the rate of maltreatment (Fallon et al., 2015). However, the incidence of school referrals remained stable.

In 2008, the OIS was modified so that it could capture cases of both maltreatment and risk of future maltreatment. The risk of future maltreatment stream allowed workers to identify cases in which the child had not yet been maltreated, but where there was significant concern for future maltreatment due to risk factors in the household. This introduction of risk only cases shifted the profile of school referral investigations as risk became a highly common maltreatment concern in 2008 (see Table 4). However, physical abuse and neglect are still the primary maltreatment concerns for every year.

The finding that, for school referrals, the most commonly reported child functioning concerns are education-related is consistent with the theory that professionals are more likely to report cases of maltreatment that contain risk factors consistent with their profession (King, 2011). Academic difficulties were the primary child functioning concern in OIS-2008 and 2013 (see Table 3). Other common concerns from school referrals include behavioural problems, learning disabilities, and depression. Given school professionals'

unique relationship with their students, they are able to identify these kinds of concerns more frequently. Furthermore, the OIS data indicates that the incidence rates of physical abuse are significantly higher than any other maltreatment type (see Table 4). This reinforces past findings that educators are over-represented in referrals for physical abuse, and are less represented in referrals for neglect, sexual abuse, emotional maltreatment, and exposure to domestic violence (King & Scott, 2014).

The relatively low percentage of substantiated school referrals across the cycles of the OIS confirms the findings that school referrals are significantly more likely to be unsubstantiated than other professional referrals (King, 2011; King & Scott, 2014; U.S. Department of Health and Human Services, 2007). Substantiation rates have not been above 30% for the past 10 years, and have never been higher than 40%. One possible explanation for these findings is that educators have a broader definition of child maltreatment than other professional groups, and therefore may report more subtle and chronic forms of maltreatment that fall below the threshold for formal child welfare involvement (King 2011). Further research is needed to offer concrete explanations for this trend.

Recommendations

There may be benefits to reporting suspected child maltreatment: according to rates of recurrence in a sample of Ontario child protection agencies, approximately 88% of investigations do not recur within 12 months (Fallon, Filippelli, Black, Trocme & Esposito, 2017). However, given that investigations referred by school personnel are rarely substantiated, it is understandable why school professionals are reluctant to report. Put in the context of the damaging effects that referrals can have on a child's relationships (McTavish et al., 2016; Gilbert et al., 2009; Hinkelman & Bruno, 2008; Webster et al., 2005); low substantiation rates may further deter school professionals from taking the risk associated with reporting. Also for those referrals that are substantiated, there is a paucity of evidence linking mandatory referrals and child protection contact to improved child well-being (Afifi et al., 2018; McTavish et al., 2016). Overall, these deliberations demonstrate the ways in which low substantiation rates can further reinforce teachers' hesitancy to report.

Granted, these considerations do not change the legal obligations that school professionals have to report. However, by developing a broader understanding of why some school professionals choose not to report, it is possible to envision solutions that will improve the school referral process more generally. For starters, there is a clear need to develop strategies to mitigate the risk of harm to children and families caused by the referral process (McTavish et al., 2016; Gilbert et al., 2009; Hinkelman & Bruno, 2008; Webster et al., 2005). Likewise, low substantiation rates indicate the need for initiatives to promote increased communication between the education and child welfare systems. One option could be that the child welfare sector implement a true differential response model or better screening; whereby referrals from schools could be redirected to other resources in the community instead of being investigated. However, it is important to note that schools are consistently reporting suspected physical abuse, which may make it difficult to implement a differential response model.

Further possible steps include the provision of additional strategies for teachers to address perceived barriers (King & Scott, 2014; King, 2011). Suggested solutions include standardized training for recognizing maltreatment and clear, concise guidelines for reporting (Kenny, 2004; Crenshaw, Crenshaw & Lichtenberg, 1995; Webster et al., 2005). Mathews et al. (2017) conducted a randomized control trial with a sample of 762 childcare providers. They found that, compared to the control group, participants in the online educational program displayed significantly higher overall knowledge of the duty to report child abuse and neglect and improved attitudes towards reporting (Mathews et al., 2017). More attention, therefore, should be paid to educating school professionals within Ontario about identifying signs of child maltreatment that warrant substantiation.

While there is extensive research indicating school professionals' lack of support when making allegations (Kenny, 2004; Crenshaw, Crenshaw & Lichtenberg, 1995; Webster et al., 2005), greater attention should be paid to understanding what this support would look like. Gallagher-McKay explains that a possibility could be to ensure that schools connect school professionals to social workers, and other resources, when in need of advice and support related to the reporting process (2014). Likewise, Gallagher-McKay points to the need to develop a culture within the school that provides contextualized support for the school professional. Further effort should be attributed to understanding and developing these needed structural changes to Ontario's education system.

Limitations

There are several limitations of this study. For one, this study is specific to child maltreatment investigations in Ontario, and has limited generalizability for populations outside of this Canadian province. With that being said, these results are consistent with other research, including findings from the United States (U.S. Department of Health and Human Services, 2007) and the Canadian Incidence Study of Reported Child Abuse and Neglect (King, 2011; King & Scott, 2014). The Ontario Incidence Study also has specific limitations as a data set. In particular, there are several variations between the OIS-2013 and the OIS-2003, OIS-1998, and OIS-1993 data sets, such as changes in reporting procedures and maltreatment definitions. For this reason, the OIS-2013 report advises researchers to avoid making direct comparisons between these reports (Fallon et al., 2015). As this article does make these comparisons, it is worth taking caution when interpreting the comparisons made between these cycles in this article. Other limitations of this data set include the fact that data is limited to the initial stage of investigations and only tracks decisions made within the first 30 days. In addition, data relies on assessments provided by the investigating child welfare workers, and these assessments are not independently verified.

Conclusion

This paper offers a comprehensive profile of school referrals to child welfare services. Using the OIS data, we were able to establish a preliminary outline of which child-related concerns are most prevalent among school professionals and how these referrals are processed within the system. Teachers play an extremely formative role in the lives of every

child in Ontario and are capable of identifying maltreatment that would have otherwise gone unnoticed. Not only are teachers legally mandated to report suspected maltreatment, they care deeply about their students and are invested in their lives. However, results suggest that despite their unique vantage points, their referrals are less likely to be substantiated than other professional referrals. To improve the child welfare and education system, attention should be paid to the recommendations listed above. Children referred to child welfare services represent one of the most vulnerable populations in Ontario, and school professionals' roles in connecting at-risk youth to the services they need are essential to this population's safety and future success.

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