

## Non-English/non-French Speaking Caregivers Involved with the Canadian Child Welfare System: Findings from the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2008)

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### Abstract:

**Objective:** The objective is to provide a profile of non-English/non-French speaking families investigated by child welfare, with primary caregiver language acting as a proxy for immigration. This analysis examines the impact of language on service disposition. **Methods:** Multivariate analysis was conducted to determine whether primary caregiver language impacts the decision to transfer a case to ongoing services at the conclusion of the investigation, after controlling for clinical factors. **Results:** Investigations involving non-English/non-French speaking caregivers were more likely to identify physical abuse as the primary maltreatment form, more likely to indicate the caregiver has few social supports and is a victim of domestic violence, and more likely to report no primary source of income than investigations involving non-immigrant caregivers. When controlling for clinical factors, investigations involving these caregivers were significantly less likely to be transferred to ongoing services. However, when controlling for language and clinical factors, investigations of physical abuse were significantly less likely to be opened for ongoing services than investigations of all other maltreatment types. **Conclusions and Implications:** The findings suggest that there is an interaction between primary caregiver language and maltreatment type in predicting transfers to ongoing services. Given the lower risk profiles of non-English/non-French speaking families, although concerns of social isolation and domestic violence were more likely to be noted, a possible explanation is that these families are overrepresented in investigations of physical abuse. The potential utility of parenting education programs tailored immigrant families as one avenue to address the problem of abusive discipline, merits research attention.

### Keywords:

Non-English/non-French speaking caregivers, child welfare, immigrant families, cultural parenting practices, family resilience

Immigrant children and families represent one of the largest and growing populations in high-income countries. Statistics Canada (2007) reported that in

2006, approximately 6.2 million individuals were born outside of Canada, representing one fifth (19.8%) of the overall population. This is the highest ratio

reported in 75 years. In 2006, 223,200 newcomers were children under the age of 15, representing one fifth (21%) of the foreign-born population in Canada. Nearly 1.1 million recent immigrants came to Canada between 2001 and 2006, increasing Canada's foreign-born population by 13.6%, an increase that was four times higher than that of the Canadian-born population (3.3%). There is, however, a lack of empirical knowledge on the intersection of immigration and child welfare. Child welfare systems may be more involved with children and families from diverse racial/ethnic backgrounds with a wide array of values and beliefs, although information about this important sub-population is relatively lacking (Alaggia & Maiter, 2006). In Canada, many physical abuse investigations arise from a context of corporal punishment (Trocmé & Durrant, 2003), and are more likely to involve visible minority families who may use corporal punishment as a disciplinary strategy (Lavergne, Dufour, Trocmé, & Larrivee, 2008). It is noteworthy that these investigations come to the attention of the Canadian child welfare system in the absence of any public education on community standards in positive parenting, parenting alternatives to corporal punishment, and a confusing special provision in the Canadian Criminal Code that allows individuals in authority to use "force by way of correction" (Durrant, Trocmé, Fallon, Milne, & Black, 2009).

Acculturation is defined as the adjustment process of individuals who are new to a culture (Lakey, 2003). Children in immigrant families may be at higher risk of maltreatment due to adversities stemming from familial stress involved in the migration and acculturation experience, as well as country-of-origin traumatic experiences, as with extreme poverty, war, and victimizations (Dettlaff, Vidal de Haymes, Velazquez, Midell, & Bruce, 2009; Pine & Drachman, 2005; Roer-Strier, 2001; Segal & Mayadas, 2005). For these families, new challenges may include stress related to differences in culture, language and traditions (Dettlaff, 2010), feelings of isolation and discrimination (Alaggia & Maiter, 2006), and adjustment to new informal and formal help systems (Alaggia & Maiter, 2006). Immigrant families are at increased risk of poverty due to a greater likelihood of unemployment and underemployment following

settlement (Beiser, Hou, Kaspar, & Noh, 2000). High levels of acculturative stress are associated with an increased risk for family conflict and violence (Cunradi, Caetano, & Shafer, 2002).

Research has examined the intersection of diverse cultural values and beliefs and child welfare involvement (i.e., Chang, Rhee, & Weaver, 2006; Dettlaff, 2010; Reisig & Miller, 2009; Rhee, Chang, Weaver, & Wong, 2008; Maiter, Alaggia, & Trocmé, 2004; Maiter, & Stalker, 2010; Maiter, Stalker, & Alaggia, 2009). Studies indicate that differential cultural values and beliefs regarding parenting practices are prevalent among immigrant families involved with child welfare (e.g., Dettlaff, 2010; Reisig & Miller, 2009). One study found that immigrant Korean families were more likely than non-immigrant families to be substantiated for physical abuse, however most children (70.6%) were not placed out-of-home (Chang, Rhee, & Weaver, 2006). Immediate child welfare response, cases referred by police, repeated incidences of abuse, single- or step-parent households and biological mothers identified as the perpetrator significantly predicted out-of-home placements. Similarly, another study indicated that allegations of physical abuse were most prevalent among investigations of immigrant Chinese families (Rhee et al., 2008). Approximately 26.4% of substantiated cases were placed out-of-home. Police referrals and emergency response at intake significantly predicted out-of-home placements. A Canadian study found that South Asian parents do not differ from the overall population in their reported attitudes about appropriate parenting practices (Maiter et al., 2004). While the results of the study are non-representative, the findings indicate that the parents considered persistent and excessive use of physical discipline to be inappropriate, as well as endorsing the need for proper supervision of children. In addition, parents reported that parenting practices that may have negative emotional consequences for children were inappropriate.

Research has questioned a contribution of racial bias to the identification and reporting of suspected maltreatment to child welfare services, in addition to decisions about the substantiation of investigated maltreatment (Lavergne et al., 2008). A recent

Canadian study compared child maltreatment investigations among Caucasian, Aboriginal, and other visible minority children in Canada in 2003 (CIS-2003). Asian children were reported more often for physical abuse, comprising 14% of the investigations. This proportion is 1.6 times greater than their representation in census data. Moreover, Asian children were also substantiated more often for physical abuse. An examination of characteristics of the caregivers of Asian children and household profiles as noted by child welfare workers indicated that the identified risk factors of child maltreatment among the caregivers and household concerns were significantly less of a burden in comparison to Aboriginal and Caucasian caregivers. As such, other factors such as racial bias and divergent parenting practices may contribute to the observed disproportion of Asian families identified and reported to the child welfare system.

While research has found that workers did not identify child functioning or caregiver concerns as critical factors impacting child welfare involvement (e.g. Lavergne et al., 2008), other research has demonstrated that these factors are the most important predictors of case substantiation (e.g. Trocmé, Knoke, Fallon, & MacLaurin, 2009). Perhaps child functioning or caregiver concerns are less documented among particular populations. As such, further research is needed to examine the assessment of reports of suspected child maltreatment, worker understanding of child and caregiver concerns, worker-client relationship, and barriers to service as workers may not have a comprehensive understanding of the complex issues that immigrant caregivers may be experiencing. Workers may conduct an assessment of reported incidents of suspected child maltreatment without examining the context of the caregivers' situation. This includes difficulties in attaining employment, underemployment, not working in their profession, working long hours at precarious work, financial and economic hardship, language barriers, and mental and physical health issues (Maiter et al., 2009).

There is a demonstrated need for support and social services for immigrant families. Immigrant caregivers involved with the Canadian child welfare

system expressed feelings of isolation, betrayal and hopelessness, financial and economic hardship, language difficulties, and a struggle to provide for their families due to problems related to employment, discrimination and childcare (Earner, 2007; Maiter et al., 2009). Moreover, the loss of resources, threats to a sense of competence, and challenges to self-esteem were identified as factors impacting family life and parenting practices. Immigrant caregivers reported that unfamiliar culture and norms impacted their sense of competence, while low proficiency in English led to difficulties in communication which further exacerbated their adjustment struggles and challenges in interacting with the child welfare system (Maiter et al., 2009). Furthermore, South Asian immigrant caregivers involved with child welfare in Canada expressed the need to be more informed about the purposes of child welfare involvement and expectations from the worker and agency (Maiter & Stalker, 2010). These parents reported experiences of mutual cultural misunderstanding with their worker and language barriers to services. While the theoretical and research literature suggests that several factors influence child welfare involvement among immigrant families, limited research has examined which factors determine service provision at the conclusion of maltreatment related investigations. Given the complexity of issues experienced by immigrant families, their distinct needs must be reflected in the child welfare system to facilitate the provision of effective services and, in turn, to promote positive outcomes. In order to address the dearth in the literature, this study uses a national child welfare dataset to examine the profile of Canadian child maltreatment investigations involving caregivers whose primary language (language spoken at home) is neither of Canada's two official languages, English or French, with language acting as a proxy for immigration and settlement. Language has previously been used as a proxy measure for acculturation among immigrants (e.g., English, Kharrazi, & Guendelman, 1997; Lee, Nguyen, & Tsui, 2011; Yu, Huang, Schwalberg, Overpeck, & Kogan, 2003). The 2011 Census (Statistics Canada, 2012) defines 'immigrant languages' as languages (other than English, French and Aboriginal languages) whose presence in Canada is originally due to immigration. Furthermore, in



2006, 70.2% of the foreign-born population reported a language other than English or French as their mother tongue (Statistics Canada, 2007).

The aim of the proposed research is to examine the case characteristics and service disposition of child maltreatment-related investigations involving non-Aboriginal primary caregivers whose primary language is neither English nor French, in comparison to English speaking primary caregivers involved with child welfare. This study provides a basis for exploring the experiences of immigrant families involved with child welfare. The objectives of the proposed study include (1) to provide knowledge on the characteristics and trajectories of non-English/non-French speaking caregivers and their children in comparison to English-speaking families involved with the child welfare system as a foundation for further research and (2) to determine whether caregiver language influences child welfare service disposition at the conclusion of a child maltreatment related investigation.

## Methods

Secondary analysis of the third cycle of the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2008; PHAC, 2010) dataset was conducted to address the research questions. This unique dataset contains information about key clinical factors collected during the course of a child maltreatment investigation (Trocmé et al., 2010a). Its primary objective was to produce a national estimate of the incidence of child maltreatment in Canada in 2008 (Trocmé et al., 2010a). Using a multi-stage sampling design, a representative sample of 112 child welfare sites was selected from 412 child welfare service areas in Canada (Trocmé et al., 2010b). A stratified cluster sampling design was used to select a representative sample of child welfare offices and then to sample cases within these offices. Cases opened for service at the randomly selected sites between October 1st and December 31st were eligible for inclusion (Trocmé et al., 2010b). Three months was considered to be the optimum period to maintain participation and compliance with study procedures. The final sample selection stage involved identifying children who had been investigated as a result of concerns related to possible maltreatment. Maltreatment related

investigations that met the criteria for inclusion in the CIS include situations where there were concerns that a child may have already been abused or neglected, as well as situations where there was no specific concern about past maltreatment but risk of future maltreatment were being assessed. In most jurisdictions, cases are open at the family level, which meant that procedures were developed to determine which specific children in each family had been investigated for maltreatment related reasons. In jurisdictions outside of Québec, children eligible for inclusion in the final study sample were identified by having child welfare workers indicate on the data collection instrument which children were being investigated because of maltreatment-related concerns (i.e., investigation of possible past incident(s) of maltreatment or assessment of risk of maltreatment). In Québec, the identification of maltreatment-related investigations was completed by including all “retained” cases with maltreatment-related case classification codes.

## Sample

These procedures yielded a final sample of 15,980 children aged 0 to 15 investigated because of maltreatment related concerns. In the current analysis, the language of the primary caregiver is the focus because it is most likely that these caregivers, as opposed to a secondary caregiver, would be interacting directly and most often with the child protection system. Information was missing about primary caregiver language in 299 cases, and therefore these cases were not included in the analysis. Child maltreatment related investigations from Québec were excluded from the analysis, as the child welfare system in Québec has a distinct approach to service delivery and therefore would skew the results, reducing the sample to 14,351 investigations. Investigations involving primary caregivers whose primary language was French were excluded from the analysis, as the number of these investigations (n=452) was too small. Investigations involving Aboriginal caregivers were excluded from the present analysis due to differing service options, reducing the sample by 3,250 (n=10,334). This study focused on investigations involving primary caregivers whose primary language was not English or French (n=1,006), the official

languages in Canada, in comparison to English-speaking primary caregivers investigated by child welfare (n=9,328). Two sets of weights are applied in order to derive national annual estimates. First, results are annualized to estimate the volume of cases investigated by each study site over the whole year. To account for the non-proportional sampling design, regional weights are then applied to reflect the size of each site relative to the child population in the region from which the site was sampled. CIS estimates cannot be unduplicated because annualization weights are based on unduplicated service statistics provided by the study sites. Therefore, estimates for the CIS refer to child maltreatment investigations. The final weighted sample for child maltreatment investigations involving a non-Aboriginal, non-English/non-French speaking primary caregiver is 13,862. The final weighted sample for investigations involving a non-Aboriginal, English speaking primary caregiver is 156,604.

### *Measures*

The information was collected using a three-page data collection instrument. Data collected by this instrument included the following: type of investigation (maltreatment or risk only), functioning concerns for the children and their caregivers, income, number of moves, household hazards, and information about short-term service dispositions. Workers were asked to specify the primary language of the caregiver(s) in the home at the time of the investigation. This included a primary caregiver and may have included a second caregiver. Workers could indicate that the primary caregiver spoke English, French, or "Other".

### *Outcome variable*

Transferred to Ongoing Services: Workers were asked to indicate whether the investigation would be opened for ongoing child welfare services at the conclusion of the investigation. The decision to transfer a case to ongoing services is a dichotomous variable.

### *Predictor Variables*

Key clinical variables representing an ecological model of child maltreatment were included in the model to determine the relative contribution of clinical variables. Clinical variables were chosen

based on empirical literature of factors related to child maltreatment or risk of child maltreatment. These included child functioning concerns, caregiver risk factors, and household characteristics. The operational definitions and codes used in the analysis are provided in Table 1 (following page).

### *Analysis Plan*

All analyses were conducted using SPSS, version 20.0. Descriptive analyses were conducted to explore the characteristics of child welfare investigations involving non-Aboriginal caregivers whose primary language is neither English nor French, in comparison to English speaking families investigated by child welfare. Pearson chi-squares were conducted to examine bivariate associations between the predictor variables and service disposition. All bivariate analyses tests of significance were done using the sample weight, which adjusts for inflation of the chi-square statistic by the size of the estimate, by weighting the estimate back down to the original sample size. Logistic regression was conducted to determine the impact of language and significant predictors in the decision to transfer a case to ongoing services at the conclusion of the investigation. Unweighted data were used in the multivariate model. Only significant predictor variables at the bivariate level ( $p < .05$ ) were included in the multivariate model. The choice of cutoff point for the decision to provide ongoing services was set at 0.23, which reflects the proportion of investigations transferred to ongoing services for this sample.

### *Results*

The results revealed important descriptive information about the characteristics of child welfare investigations in Canada (excluding Québec) in 2008, involving non-English/non-French speaking caregivers and their families, in comparison to English speaking caregivers and their families. Non-English/non-French speaking caregivers belonged to a variety of ethno-racial groups in comparison to English speaking caregivers. The caregiver was identified as white in 88% of the investigations involving an English speaking primary caregiver (an estimated 137,133 investigations). A minority of caregivers was identified as Black (7%, an estimated 10,393 investigations).

Table 1. Variable Definitions

Outcome Variable	Measurement	Description
Transferred to Ongoing Service	Dichotomous variable Transfer to ongoing service (1) Close case (0)	Workers were asked to indicate whether the investigation would be opened for ongoing child welfare services at the conclusion of the investigation
<b>Predictor Variables</b>		
Primary Caregiver	Dichotomous variable English (0) Non-English or Non-French (1)	Workers were asked to specify the primary language of the primary caregiver
Primary Caregiver Age	Categorical variable 18 years and under (1) 19 to 21 years (2) 22 to 30 years (3) 31 to 40 years (4) 41 years and up (5)	Workers were asked to indicate the age category of the primary caregiver
Primary Caregiver Ethno-racial Group	White (1) Black (2) Latin American (3) Arab/West Asian (e.g., Armenian, Egyptian) (4) South Asian (e.g., East Indian, Pakistani) (5) Chinese (6) Southeast Asian other than Chinese (e.g., Filipino, Indonesian) (7) Other (8)	Workers were asked to note the ethno-racial group of the primary caregiver, from a list of eight categories
Primary Caregiver Risk Factors	Dichotomous variable	Workers could note up to nine risk factors for the factors for the primary caregiver. Risk factors included: alcohol abuse, drug/solvent abuse, cognitive impairment, mental health issues, physical health issues, few social supports, victim of domestic violence, perpetrator of domestic violence, and history of foster care/group home. Caregiver functioning variables were dichotomous variables with a suspected or confirmed concern coded as 'noted' and no and unknown coded as 'not noted'.
Child Functioning	Dichotomous variable Suspected or confirmed concern (1) No or unknown (0)	Workers could note up to eighteen functioning concerns for the investigated child, indicating whether the concern had been confirmed, suspected, was not present or it was unknown to the worker. For this analysis, these functioning concerns included: attachment issues, intellectual/developmental disability, failure to meet developmental milestones, FAS/FAE, positive toxicology at birth, and physical disability.
No Second Caregiver in the Home	Dichotomous variable No second caregiver in the home (1) Second caregiver in the home (0)	Workers were asked to describe up to two caregivers in the home. If there was only one caregiver described there was no second caregiver in the home
Primary Income	Categorical variable Full time employment (1) Part time/seasonal employment (2) Other benefits/unemployment (3) No income (4)	Workers were asked to indicate the primary source of the primary caregiver's income
Household Hazards	Dichotomous variable At least one household hazard (1) No household hazards (0)	Workers were asked to note if the following hazards were present in the home at the time of the investigation: accessible weapons, accessible drugs, production/trafficking of drugs, chemicals/solvents used in drug production, other home injury hazards, and other home health hazards
Household Regularly Runs out of Money	Dichotomous variable Noted (1) Not Noted (0)	Workers were asked to note if the household regularly runs out of money
Number of Moves	Categorical variable No moves (0) One move (1) Two or more moves (2)	Number of moves reflects the number of moves the household had experienced in the past six months.
Maltreatment Type	Physical abuse (1) Sexual abuse (2) Neglect (3) Emotional maltreatment (4) Exposure to intimate partner violence (IPV) (5) Risk (6)	Workers could indicate up to three forms of investigated maltreatment on the data collection instrument, from 32 possible maltreatment codes as defined in the CIS-2008 Study Guidebook. This analysis focused on the primary maltreatment concern of the investigation. The maltreatment codes were collapsed into five categories. Risk was added as a sixth maltreatment category
Level of Substantiation	Categorical variable Unsubstantiated (1) Suspected (2) Substantiated (3)	Workers were asked to indicate the level of substantiation at the conclusion of the investigation.

In investigations involving non-English/non-French speaking caregivers, 21% of investigations (an estimated 2,969 investigations), the primary caregiver was South Asian, and in 18% (an estimated 2,493), the primary caregiver was Latin American. Primary caregivers were identified as Arab or West Asian in 15% (2,013) of investigations, Chinese in 11% (1,496) of investigations, and Southeast Asian other than Chinese in another 11% (1,508) of investigations. In 9% of investigations (an estimated 1,189), the primary caregiver was Black. In investigations involving non-English/non-French speaking caregivers, the most common caregiver functioning concern identified was few social supports (38% of caregivers, an estimated 5,279). The next most common caregiver functioning concern identified was victim of domestic violence (31% of caregivers, an estimated 4,302). Mental health issues were noted in 14% of investigations (an estimated 1,895). The investigating worker rarely identified alcohol or drug abuse as a concern in primary caregivers, nor did they frequently identify cognitive impairment or history of foster care/group home. Investigations involving non-English/non-French speaking primary caregivers, compared to investigations involving English speaking primary caregivers, were more likely to indicate few social supports and victim of domestic violence.

At least one child functioning concern was identified in 27% of investigations involving a non-English/non-French speaking caregiver (an estimated 3,775), with the most common functioning concern identified as academic difficulties (13% of investigations, or an estimated 1,789). Investigating workers identified depression, anxiety, or withdrawal as a child functioning issue in 9% of investigations (1,189), and intellectual or developmental disability as an issue in 8% of investigations (1,049). Aggression was identified in 7% of investigations (estimated 983). Workers were less likely to identify a child functioning concern in investigations involving non-English/non-French speaking caregivers in comparison to English speaking caregivers. Of the investigations involving a non-English/non-French speaking caregiver, 23% of investigations (estimated 3,173) involved families with a lone caregiver. In a small minority of investigations, the worker identified at least one hazard present in the household (3% or an estimated 371 investigations)

or identified that the household regularly ran out of money (6% or an estimated 699). Most investigations involved families that had not moved in the past six months (65% or 6,325). Approximately 37% of the investigations involved caregivers with no reported source of income. Investigations involving English-speaking caregivers were more likely to involve single-parent homes. At least one household hazard was reported more frequently for these investigations.

Of all investigations involving non-English/non-French speaking caregivers, physical abuse was identified as the overriding concern in almost half of cases (36%, or an estimated 4,976). Exposure to IPV was identified as the primary concern in almost one quarter of investigations (19%, or an estimated 2,669), and neglect was the primary concern in 17% of investigations (2,300). In a small proportion of maltreatment investigations in this sample, the overriding concern was emotional maltreatment (4%), or sexual abuse (3%). In approximately 21% of the investigations (an estimated 2,965), the primary concern was risk. Allegations of child maltreatment were substantiated in almost half of the investigations (46% or an estimated 341). In 17% of investigations (an estimated 2,292), the case was transferred to ongoing services. Investigations involving non-English/non-French speaking primary caregivers, compared to investigations involving English speaking primary caregivers, were more likely to identify physical abuse as the primary maltreatment form. There were no differences found in substantiation between investigations involving non-English/non-French speaking primary caregivers in comparison to investigations involving English speaking primary caregivers. The results of bivariate analysis indicate that non-English/non-French speaking primary caregivers were significantly less likely to be transferred to ongoing services when compared to English speaking primary caregivers. (See Table 2 for full results on the clinical concerns of investigations involving non-English/Non-French primary caregivers in comparison to English speaking primary caregivers.)

The logistic regression models are presented in Table 3. Only clinically relevant and statistically significant predictors associated with the decision to transfer an

Table 2. Clinical Concerns of Maltreatment-Related Investigations Involving non-English/non-French and English Speaking Caregivers in Canada (excluding Québec) in 2008 (n = 10,334)

	Non-English/Non-French		English	
	Frequency	%	Frequency	%
<b>Child Functioning Concerns</b>				
Depression/Anxiety/Withdrawal	1,189	8.6%	21,658	13.8%
Suicidal Thoughts	307	2.2%	4,648	3.0%
Self-Harming Behaviour	203	1.5%	4,716	3.0%
ADD/ADHD	648	4.7%	16,408	10.5%
Attachment Issues	552	4.0%	14,818	9.5%
Aggression	983	7.1%	20,807	13.3%
Running (Multiple Incidents)	149	1.1%	5,286	3.4%
Inappropriate Sexual Behaviour	196	1.4%	5,492	3.5%
Youth Criminal Justice Act Involvement	147	1.1%	3,203	2.0%
Intellectual/Developmental Disability	1,049	7.6%	15,622	10.0%
Failure to Meet Developmental Milestones	569	4.1%	8,747	5.6%
Academic Difficulties	1,789	12.9%	28,111	18.0%
FAS/FAE	-	-	2,486	1.6%
Positive Toxicology at Birth	-	-	1,177	0.8%
Physical Disability	212	1.5%	2,465	1.6%
Alcohol Abuse	-	-	3,500	2.2%
Drug/Solvent Abuse	133	1.0%	4,949	3.2%
At Least One Child Functioning Concern	3,775	27.2%	58,169	37.1%
<b>Primary Caregiver Risk Factors</b>				
Alcohol Abuse	163	1.2%	16,289	10.4%
Drug/Solvent Abuse	-	-	16,303	10.4%
Cognitive Impairment	224	1.6%	8,320	5.3%
Mental Health Issues	1,895	13.7%	34,713	22.2%
Physical Health Issues	624	4.5%	12,311	7.9%
Few Social Supports	5,279	38.1%	45,417	29.0%
Victim of Domestic Violence	4,302	31.0%	45,193	28.9%
Perpetrator of Domestic Violence	741	5.3%	11,130	7.1%
History of Foster Care/Group Home	-	-	8,289	5.3%
At Least One Functioning Concern	7,551	54.5%	93,081	59.4%
<b>No Second Caregiver in the Home</b>	3,173	22.9%	61,136	39.0%
<b>Primary Income</b>				
Full-time	4,255	30.7%	57,133	36.5%
Part-time/Seasonal	1,465	10.6%	19,212	12.3%
Other Benefits/Unemployment	2,999	21.6%	49,808	31.8%
No Income	5,143	37.1%	30,452	19.4%
<b>At Least One Household Hazard</b>	317	2.7%	10,580	6.8%
<b>Household Regularly Runs Out of Money</b>	699	6.1%	14,994	11.0%
<b>Number of Moves</b>				
No Moves	6,325	4.68%	81,553	65.1%
One Move	2,688	27.5%	32,711	26.1%
Two or More Moves	754	7.7%	11,803	8.8%
<b>Type of Maltreatment</b>				
Physical Abuse	4,976	35.9%	30,642	19.6%
Sexual Abuse	355	2.6%	6,528	4.2%
Neglect	2,300	16.6%	39,202	25.0%
Emotional Maltreatment	598	4.3%	11,199	7.2%
Exposure to Intimate Partner Violence	2,669	19.3%	28,591	18.3%
Risk	2,965	21.4%	40,443	25.8%
<b>Level of Substantiation</b>				
Unfounded	4,743	43.5%	50,501	43.5%
Suspected	1,115	10.2%	13,299	11.4%
Substantiated	5,039	46.2%	52,361	45.1%
<b>Transferred to Ongoing Services</b>	2,292	16.6%	37,325	23.8%

Estimates under 100 are not reported because they are too small to be reliable



Table 3. Logistic Regression Predicting Transfers to Ongoing Services at the Conclusion of a Maltreatment-Related Investigation Involving Non-English/Non-French and English Speaking Primary Caregivers in Canada (Excluding Québec) in 2008 (n = 10,334)

Predictor	B	SE	Adj. OR		
<b>Model 1</b>					
Non-English/Non-French primary language	-0.36***	0.10	0.70		
<b>Model 2</b>					
Non-English/Non-French primary language	-0.30**	0.10	0.74		
At least one child functioning concern	0.78***	0.05	2.18		
<b>Model 3</b>					
Non-English/Non-French primary language	-0.30**	0.10	0.74		
At least one child functioning concern	0.74***	0.05	2.09		
At least one caregiver risk factor	1.59***	0.07	4.90		
<b>Model 4</b>					
Non-English/Non-French primary language	-0.23*	0.10	0.80		
At least one child functioning concern	0.74***	0.05	2.10		
At least one caregiver risk factor	1.40***	0.07	4.05		
Primary source of income (full-time)					
Part-time/seasonal	0.26**	0.09	1.30		
Other benefits/unemployment	0.42***	0.07	1.52		
No income	0.08	0.09	1.08		
No second caregiver in the home	-0.20**	0.06	0.82		
Number of moves (none)					
One move	0.13*	0.06	1.14		
Two or more moves	0.47***	0.09	1.59		
At least one household hazard	0.87***	0.09	2.38		
<b>Model 5</b>					
Non-English/Non-French primary language	-0.20	0.10	0.82		
At least one child functioning concern	0.77***	0.06	2.15		
At least one caregiver risk factor	1.38***	0.07	3.96		
Primary source of income (full-time)					
Part-time/seasonal	0.26**	0.09	1.30		
Other benefits/unemployment	0.41***	0.07	1.50		
No income	0.07	0.09	1.07		
No second caregiver in the home	-0.21*	0.06	0.81		
Number of moves (none)					
One move	0.13*	0.06	1.13		
Two or more moves	0.45***	0.09	1.57		
At least one household hazard	0.85***	0.09	2.35		
Maltreatment type (Physical Abuse)	-0.21**	0.08	0.81		
-2LL Model	Model 1 9477.46	Model 2 9241.36	Model 3 8566.44	Model 4 8370.29	Model 5 8362.51
Model Chi Square	15.57***	251.67***	926.59***	1122.74***	1130.52***
df	1	2	3	10	11
Nagelkerke R Square	0.003	0.04	0.16	0.19	0.19
Classification Rate					59.2%

\* p < 0.05    \*\* p < 0.01    \*\*\* p < 0.001

investigation to ongoing services were entered into the models. The final model (R<sup>2</sup>=0.19) correctly classified 59% of the investigation. The results of models one through four indicate that when controlling for child, caregiver, and household variables, investigations involving non-English/non-French speaking primary caregivers were significantly less likely to be transferred to ongoing services when compared to investigations involving English speaking primary caregivers. However, the results of the final model

revealed that when controlling for child, caregiver, household, and maltreatment type, the effect of primary caregiver language as a predictor was diminished and investigations of physical abuse were significantly less likely to be opened for ongoing services.

### Discussion

According to Cunradi et al. (2002), high levels of acculturative stress are associated with an increased risk for family conflict and violence. This

is observed in the primary type of maltreatment identified in the current study. Similar with Chang et al. (2006) and Rhee et al. (2008), physical abuse was the overriding concern in a majority of the cases (36% of investigations, or an estimated 4,976 investigations), and exposure to IPV was the primary concern in almost one fifth of investigations (19% of investigations, or an estimated 2,669 investigations) in the current study. Thirty eight percent (an estimated 5,279 investigations) of primary caregivers were noted to lack social supports, and 23% of investigations (estimated 3,173 investigations) involved families with a lone caregiver. Consistent with the literature about acculturation, the families in the current study have stressors that include limited social support, financial challenges, and child academic difficulties in the presence of family violence. Disjointed social supports may be consequence of migratory displacements and/or family separation due to complicated and prolonged immigration processes. Furthermore, the effects of lost social supports and fragmented family members may contribute to challenging financial circumstances. Immigrants have been identified as one of five groups most likely to experience persistent poverty in Canada (Hatfield, 2004). With 17% of investigations (an estimated 2,300 investigations) in the current study identifying neglect as the primary concern, it is crucial that child welfare considers and carefully examines the underlying sources for this type of maltreatment, and calls into question what is being assessed to differentiate poverty versus harm of omission that is classified as neglect.

According to Euser, van IJzendoorn, Prinzie, and Bakermans-Kranenburg (2011), immigrant families of low socioeconomic status and associated with low parental education were at increased risk for child maltreatment. The educational attainments of the caregivers are not measured, however, the most common child functioning concern identified in the current study is academic difficulties (13% of investigations, or an estimated 1,789 investigations). This is a concern for the social mobility of young children and adolescents that may not be granted opportunities otherwise, through education and knowledge obtainment. In addition, parent-child conflict that may arise as a result of high parental expectations of academic success and child academic

difficulties has not been examined in these child welfare cases. The linguistic barriers are even more pronounced when we consider that the majority of child welfare workers are White (94%) and identify English as their primary language (97%) (Fallon, MacLaurin, Trocmé, & Felstiner, 2003). The interventions of child welfare providers need to be sensitive to these differences, particularly with in communication with families. According to Maiter and Stalker (2010), South Asian immigrant parents involved with the child welfare system expressed the need to be more informed about the purposes of child welfare involvement and expectations from the worker and agency. This need for information is particularly important in the transfer to ongoing services. The cultural-linguistic gaps may be exponentially experienced given the reduction in federal government funding to settlement programs (“Immigrant Settlement Funds Cut for Ontario”, 2010). Families involved in the child welfare system may experience greater difficulties in understanding and navigating the complexities of social service and court involvement. These results suggest that there is an interplay between primary caregiver language and maltreatment type in predicting transfers to ongoing services. Non-English/Non-French speaking primary caregivers were significantly less likely to be opened for ongoing services, even when controlling for child functioning, caregiver risk factors, and household characteristics.

When controlling for primary caregiver language and child, caregiver, and household characteristics, investigations where the primary form of maltreatment is identified as sexual abuse, neglect, emotional maltreatment, exposure to intimate partner violence, and risk were 1.25 times more likely to be opened for ongoing services, than investigations where the primary form of maltreatment is identified as physical abuse. The hypothesis that non-English/non-French speaking families are overrepresented in investigations of physical abuse involving corporal punishment merits further consideration. Child welfare statutes define physical abuse as caregiver actions that physically harm a child or that are very likely to harm a child. However, the difference between corporal punishment and physical abuse requiring a child welfare report is not clearly

established (Lavergne, et al., 2008; Tirosh, Shechter, Cohen, & Jaffe, 2003), particularly when immigrant caregivers do not understand the purpose of child welfare involvement and expectations of them as caregivers (Maiter & Stalker, 2010). This potential confusion may explain, to some extent, the overrepresentation of visible minorities. Much more needs to be explored to further understand their experiences and how to provide socio-cultural-linguistically appropriate services to meet the needs of this population. There is a dearth of literature on immigrant families in the Canadian child welfare system and the current study is an attempt to begin to address the gap in the available empirical research literature. The findings in this study offer much needed research in the intersecting area of immigration and child welfare.

### Limitations

The CIS-2008 did not explicitly collect information on migration, and therefore language of the primary caregiver was used as a proxy measure for newcomer/immigrant status. Primary caregiver language may not be an adequate proxy measure for immigrant. As such, the results of this study cannot be generalized to all immigrant children and families living in Canada. There were no data collected on the specific languages spoken at home by caregivers. The CIS-2008 did not collect data on languages spoken by children subject of the investigation or the ethno-racial groups of the children. Data from the CIS-2008 were collected directly from the investigating worker and were not independently verified. These data only represent the concerns that presented during the initial investigation, which usually lasts an average of six weeks. Additional concerns for the child and the caregiver could arise after the initial investigation. The analysis used a proxy measure of poverty. No educational data was collected in the CIS-2008.

### Implications

The current study described the profile of caregivers whose primary language is neither English nor French, as a proxy measure for immigration and settlement. The results are indicative of the extant literature on the impact of migration and acculturation on immigrant children and families.

Families were mostly investigated for concerns of family violence and neglect. However, the impact of language appears to have been diminished in the decision to provide ongoing services when maltreatment type was considered. Physical abuse cases were significantly less likely to be opened in comparison to investigations of all other maltreatment types. Primary caregivers lack social support and experience financial challenges, however most of the cases were closed at the conclusion of the investigation. Investigations involving a non-English/non-French speaking caregiver were less likely to be opened for ongoing service even when considering child, caregiver and household risk factors.

Much more needs to be explored to further understand their experiences and how to provide socio-cultural-linguistically appropriate services to meet the needs of this population. The findings of this study provide a foundation for professionals among various systems who work directly or indirectly with immigrant families in Canada. This study highlights the need for interventions that promote resiliency among newcomer and immigrant caregivers and their children involved with the child welfare system. The need for parenting education programs designed to change attitudes and practices related to abusive discipline warrant consideration. There is a dearth of literature on immigrant families in the Canadian child welfare system and the current study is an attempt to begin to address the gap in the available empirical research literature.

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