



## Troubled teens and challenged caregivers: Characteristics associated with the decision to provide child welfare services to adolescents in Ontario, Canada



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### A B S T R A C T

Although studies have documented the pronounced and negative impact of adolescent maltreatment on short and long-term development, there is limited research about the risk factors and experiences of adolescents who are reported to the child welfare system. This study addresses this knowledge gap by using data from the provincially representative Ontario Incidence Study of Reported Child Abuse and Neglect (OIS-2013) to identify the characteristics of the alleged maltreatment, functioning concerns, caregiver risk factors, and socioeconomic conditions associated with the decision to provide ongoing child welfare services to adolescents and their families. In 2013, there were an estimated 34,968 investigations of maltreatment-related concerns involving adolescents and 26.5% of these cases were transferred to ongoing services. A number of factors were associated with this decision, including: adolescents' race/ethnicity, internalizing problems, and difficulties in the quality of the relationship with their primary caregiver; investigations involving potential abandonment, exposure to intimate partner violence, and co-occurring maltreatment; and caregivers' social isolation, mental health concerns, and substance abuse. A multivariable tree-classification found that the presence of internalizing problems was a primary factor influencing the decision to provide ongoing child welfare services, followed by caregiver social isolation, relationship difficulties between the caregiver and the adolescent, caregiver mental health concerns, and co-occurring maltreatment. The results suggest that adolescents investigated by Ontario child welfare authorities are experiencing troubling circumstances coupled with their caregivers' challenges, which may be impacting their relationships to the point that it determines their need for ongoing child welfare services.

### 1. Introduction

The link between child maltreatment and persistent physical, psychological, social, and behavioural consequences has been well documented (Gilbert et al., 2009; Perepletchikova & Kaufman, 2010; Teicher, Samson, Anderson, & Ohashi, 2016). Researchers have suggested that the assessment, treatment, and impact of maltreatment should be informed by a number of factors, including and especially the child's developmental context (Belsky, 1993; Wulczyn, Barth, Yuan, Harden, & Landsverk, 2005). The developmental needs and challenges of adolescents who are maltreated and experience involvement with the child welfare system is an understudied area of child welfare research (Simmel, 2012). Maltreatment occurring during adolescence is strongly associated with high rates of adjustment problems in late adolescence and early adulthood, including an increased risk for delinquency, substance abuse, suicidal thoughts, and early pregnancy (Smith, Ireland, &

Thornberry, 2005; Thornberry, Henry, Ireland, & Smith, 2010). The vulnerability of adolescents investigated for child protection concerns warrants further exploration into the risk factors, decisions, and services that ultimately determine their continued involvement in the child welfare system.

#### 1.1. Incidence of adolescent maltreatment

Maltreatment incidence study data in North America suggest that while adolescents may be somewhat less likely to be reported than other age groups, especially very young children, they represent a substantial proportion of children who are served by the child welfare system (Fallon et al., 2015; Trocme et al., 2010; U.S. Department of Health and Human Services [HHS], 2017). Across Canada in 2008, there were an estimated 34.3 child protection investigations for every 1000 adolescents in the population and investigations involving

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adolescents aged 12 to 15 years comprised 25% of all investigations (Trocmé et al., 2010). In Ontario in 2013, adolescents constituted a similar proportion of all investigated children (23%), but the rate of investigation was slightly higher (45.5 investigations per 1000 adolescents; Fallon et al., 2015). Importantly, many adolescent maltreatment investigations involve late-onset reported maltreatment, meaning that this is the adolescent's first contact with the child welfare system (Wulczyn et al., 2005). The reasons for an investigation also tend to shift for adolescents compared to other age groups. In Canada, one study using data from the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2008) found that maltreatment investigations involving adolescents (compared to younger children), were more likely to involve physical abuse, sexual abuse, and emotional maltreatment and less likely to involve neglect, exposure to intimate partner violence, and risk of maltreatment (Fast, Trocmé, Fallon, & Ma, 2014). This comports with research in the United States, which suggests that rates of reported physical and sexual abuse increase during adolescence (Simmel, 2011; Wulczyn et al., 2005).

It is unclear as to whether investigation rates reflect actual incidence of maltreatment for this population and some argue that the true incidence of adolescent maltreatment is far higher than what is reported or investigated (Finkelhor, Ormrod, Turner, & Hamby, 2005; Raissian, Dierkhising, Geiger, & Schelbe, 2014). Research studying the discrepancies between CPS records and self-reports for adolescents who have experienced maltreatment have found that self-report prevalence is four to six times higher than that of agency documents for physical, sexual, and psychological abuse (Everson et al., 2008). Additional research has documented adolescents' reluctance to report maltreatment, largely due to their concerns about negative repercussions for themselves and their families, ineffective responses from professionals, and a loss of control during the disclosure process (Ungar, Tutty, McConnell, Barter, & Fairholm, 2009).

### 1.2. Circumstances and outcomes of investigations involving adolescents

In addition to shifts in the patterns of maltreatment during adolescence, the circumstances of adolescents coming into contact with the child welfare system appear to be related to behavioural concerns about the adolescent and the caregiver's capacity to respond to such issues (Simmel, 2010, 2011; Wulczyn et al., 2005). In a longitudinal study using data from Quebec, Esposito et al. (2013) found that among older children and adolescents aged 10 to 17 who are eventually placed into foster care, maltreatment investigations were initiated due to behavioural problems (e.g., violence towards self and others, substance abuse, and running away). In the United States, Simmel (2010) found that there were three distinct groups of adolescents reported for maltreatment, which were characterized by different combinations of caregiver and adolescent risk factors as well as by maltreatment type. One group had higher concentrations of caregiver-level risk factors (e.g., poor parenting skills, high stress, and low support), while a second group was more likely to exhibit adolescent-level risk behaviours (e.g., aggression, externalizing behaviours, and internalizing behaviours). A third group had relatively low levels of both caregiver- and adolescent-level risk factors, but had more adolescents who were reported for sexual abuse.

With respect to the outcome of the investigation, the likelihood of deeper child welfare service involvement appears to increase during adolescence, but it is associated with the same adolescent and caregiver risk factors that bring adolescents into contact with the system (Fast et al., 2014; Jonson-Reid, 2002). Fast et al. (2014) found that internalizing functioning concerns, caregiver functioning concerns, and Indigenous status were associated with the decision to provide ongoing child welfare services. In general, placement into foster care appears to be associated with adolescent behaviour problems (Esposito et al., 2013; Fast et al., 2014; Wulczyn et al., 2005). One study found that in addition to adolescent behavioural problems, being older (ages 14–17

vs. ages 10–13), being referred by the police, experiencing multiple investigations, and neighborhood-level socioeconomic disadvantage were associated with placement in foster care (Esposito et al., 2013). Given the emotional and behavioural vulnerability of adolescents entering foster care, it is not surprising that they are at increased risk for challenging outcomes with both short and long term implications for their health and well-being, including: placement into more restrictive settings (James, Landsverk, Leslie, Slymen, & Zhang, 2008), placement instability (James, 2004), running away (Courtney & Zinn, 2009), greater need for mental health services (Farmer, 2010), involvement in the youth justice system (Baskin & Sommers, 2010), and early parenting (King, 2017; King, Putnam-Hornstein, Cederbaum, & Needell, 2014).

### 1.3. The current study

Research regarding the experiences of adolescents who experience child welfare investigations during this critical developmental period is relatively limited. Incidence study data suggest that rates and severity of maltreatment shift as school-age children become adolescents and that the effect of maltreatment during this period has a significant and marked effect on adolescent and early adult outcomes. How the child welfare system responds to the risks and needs presented by this population can determine adolescents' trajectories into adulthood.

The age of mandatory protection has been under age 16 for Ontario adolescents, and although some child welfare services continued to be offered beyond the age of protection depending on the child's status as a former youth in care, investigations into allegations of maltreatment for this group have not been required by law (Ontario Association of Children's Aid Societies, 2014). In December 2016, the Ontario Ministry of Children and Youth Services (MCYS) initiated a repeal and overhaul of the existing Child and Family Services Act (CFSA, which is the legislation governing the child welfare system in Ontario) to improve service accountability and accessibility while introducing culturally appropriate and child-centered care (Legislative Assembly of Ontario, 2017). As of January 2018, the new CFSA extends the age of protection to under 18 years to safeguard vulnerable youth from homelessness, human trafficking, and unsafe living conditions (Legislative Assembly of Ontario, 2017). Given this major shift in policy and practice, an understanding of the concerns presented by adolescents and how the current system responds to them is warranted. The purpose of the current study is to address this need by exploring the characteristics of adolescents investigated for child protection concerns in Ontario and determining the factors that are associated with receiving further supports and services after an investigation.

## 2. Methods

Data from the most recent cycle of the Ontario Incidence Study of Reported Child Abuse and Neglect (OIS-2013) were used for this analysis (Fallon et al., 2015). The primary objective of the OIS is to produce a provincial estimate of the incidence of child maltreatment in Ontario and to document investigation-level decision-making. The dataset contains information collected during the course of a child maltreatment investigation. A cluster sampling design was used to first select a representative sample of 17 out of 46 child welfare agencies in Ontario and then to sample cases within these offices (Fallon et al., 2015). Cases opened for investigation at the randomly selected sites between October 1 and December 31, 2013 were eligible for inclusion. In larger agencies, opened cases were randomly subsampled (capped at 250 cases). The final sample selection stage involved identifying children who had been investigated as a result of concerns related to possible maltreatment or risk of maltreatment. Child welfare workers responsible for those investigations were asked to complete a data collection form, which included over forty questions about risk factors and demographic characteristics of the child and family, as well as factors related to maltreatment concerns and decisions during the investigation (see

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