Child Maltreatment in Canada: An Understudied Public Health Problem

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ABSTRACT

Child maltreatment is a major public health problem associated with impairment in childhood, adolescence, and extending throughout the lifespan. Within Canada, high-quality child maltreatment studies have been conducted and are critical for informing prevention and intervention efforts. However, compared to other parts of the world (e.g., United States, United Kingdom, the Netherlands, and Mexico), the number of studies conducted in Canada is far fewer and the data used to study this important public health problem are less diverse. Importantly, to date, representative data on child maltreatment from the general population at the national level in Canada do not exist. This means that many questions regarding child maltreatment in Canada remain unanswered.

Key words: Child abuse; child neglect; Canada; prevalence; public health, national survey

La traduction du résumé se trouve à la fin de l’article.

The World Health Organization defines child maltreatment as physical and emotional mistreatment, sexual abuse, neglect and negligent treatment of children, child exploitation and exposure to intimate partner violence (IPV). Child maltreatment is a major public health problem associated with impairment in childhood, adolescence, and extending throughout the lifespan. Within Canada, high-quality child maltreatment studies have been conducted and are critical for informing prevention and intervention efforts. However, child maltreatment is an understudied public health problem in Canada. Compared to other parts of the world (e.g., United States, United Kingdom, the Netherlands, and Mexico), the number of studies conducted in Canada is limited and the data are less diverse. For example, Canadian data sources have included representative and non-representative community samples, hospital and clinical samples, school-based samples, as well as data from protective services, shelters, and legal/police records. One notable survey was the Ontario Mental Health Supplement (OHSUP) conducted in 1990; examination of these data indicated that a childhood history of slapping and spanking and physical and/or sexual abuse was associated with increased odds of psychiatric disorders in adulthood. Importantly, to date, national-level representative child maltreatment data from the general population in Canada do not exist. This means that current data sources are only able to provide information on the incidence of child maltreatment reported to child welfare agencies and prevalence estimates from a small number of provincial- and community-level samples in Canada. Apart from the recent Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) (see next section), many of these estimates are out of date (e.g., OHSUP), leaving many questions regarding child maltreatment in Canada unanswered.

Canadian Incidence Study of Reported Child Abuse and Neglect

The most recent Canadian child maltreatment data are from the CIS, a national sample of child maltreatment investigations by child welfare collected in 2008 (previous cycles collected in 1998 and 2003). These data indicate that the rate of child maltreatment investigations in Canada in 2008 was 39.2 per 1,000 children. Thirty-six percent of the total investigations were substantiated cases of child maltreatment (14.2 per 1,000 children). Among the substantiated child maltreatment cases, incidence rates for the primary category of maltreatment were as follows: 4.9 per 1,000 children for exposure to IPV (34% of cases), 4.8 per 1,000 children for neglect (34% of cases), 2.9 per 1,000 children for physical abuse (20% of cases), 1.2 per 1,000 children for emotional maltreatment (9% of cases), and 0.4 per 1,000 children for sexual abuse (3% of cases). It should be noted that these data are only representative of cases of child maltreatment reported to child welfare agencies and do not include child maltreatment that is reported to other authorities or maltreatment that goes unreported. In addition, season variation may be present since data were collected over a three-month period.

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Prevalence of child maltreatment in Canada

Although national Canadian prevalence estimates of child maltreatment do not exist, prevalence estimates have been calculated in a variety of Canadian community samples. Statistics Canada data from the 2005 Canadian Community Health Survey (CCHS-3.1) indicated that 7.4% of individuals aged 12 years and older living in Manitoba or Saskatchewan affirmed having ever been “physically abused by someone close to you” as a child or teenager, before moving out of the house.4,8 Although these data do provide some insight into physical violence in childhood within the Canadian context, the non-validated and non-specific nature of this one-item assessment of physical abuse limits the utility of these data. More specifically, this measure does not provide a definition or example of what is considered physical abuse, which creates uncertainty as to what is being measured. Additionally, sexual abuse, neglect, emotional maltreatment, and exposure to IPV were not included in the CCHS-3.1, further limiting the assessment of child maltreatment in these data.

Another study using data from Statistics Canada’s 1999 Canadian General Social Survey of Canadian provinces found that 2% of adult males and 8% of adult females who were in or had recently been in an intimate relationship retrospectively reported being sexually abused in childhood (measured as unwanted sexual touching, fondling, rape, and attempted rape before the age of 18 years).9 In a representative military sample from the CCHS-Canadian Forces Supplement (CCHS-CFS), the prevalence of physical abuse (i.e., were you ever badly beaten by your parents or the people who raised you) reported among both males and females was 6% and the prevalence of exposure to IPV during childhood (i.e., did you ever witness serious physical fights at home, like your father beating up your mother) was 12% among males and 15% among females.10 Again, measures of child maltreatment were limited in this survey due to non-validated, non-specific questions. In a representative 2006 adult community sample from Quebec, 10% of males and 22% of females reported a history of child sexual abuse (i.e., unwanted sexual touching or intercourse before the age of 18), 15% of males and 12% of females reported a history of minor physical abuse (i.e., spanking often or very often), 18% of males and 12% of females reported a history of severe physical abuse (i.e., being hit harder than a spanking at least once), 8% of males and 11% of females reported a history of emotional maltreatment (i.e., threats, humiliation, or ridicule often or very often), and 19% of males and 17% of females reported exposure to IPV in childhood (i.e., witnessed at least rarely interparental violence).11 The prevalence of self-reported child maltreatment in Canada varies from study to study, which may reflect differences in samples and limited and inconsistent assessment of child maltreatment. These inconsistencies limit study comparability. The main limitations of many of these studies are poor measures of child maltreatment, the lack of representative data, and often inadequate measures of developmental, mental and physical health outcomes.

Lack of nationally representative child maltreatment research in Canada

With a dearth of representative Canadian data, it is often necessary to generalize data from other countries to the Canadian context. Although research from other countries is informative, relying on these data assumes that the data are generalizable to Canada. If this assumption is incorrect, it is uncertain whether knowledge gained from other countries will lend to helping maltreated children in
Canada. For the ultimate goal of promoting the mental health and well-being of children and families in Canada, the collection of representative Canadian data is imperative. Canadian data are necessary for understanding the prevalence and incidence of child maltreatment in Canada; the Canadian contexts in which violence is most likely to occur; poor mental health, physical health, developmental and social correlates related to child maltreatment; how to prevent the occurrence and reoccurrence of child maltreatment; how to effectively help children recover and thrive after experiencing maltreatment; as well as what makes some children and families more resilient.

Feasibility of future child maltreatment data collection in Canada

To date, the assessment of child maltreatment in nationally representative Canadian surveys has been limited to a few poorly worded and non-specific items inquiring about violence exposure or parenting behaviors. Canada has the mechanisms already in place to collect high-quality child maltreatment data through national surveys such as the Survey of Young Canadians (SYC), the Health Behaviour in School-Aged Children (HBSC) cross-national study, and the CCHS, making child maltreatment data collection feasible. These surveys have the sophisticated research designs necessary for the collection of nationally representative data on child maltreatment in Canada, but to date, valid and reliable assessments of multiple types of child maltreatment have not been included. A short, reliable and valid measurement of child maltreatment, such as the Childhood Experiences of Violence Questionnaire (CEVQ), could easily be included in these existing surveys and would provide the first estimates of child maltreatment at the national level in Canada. With regard to ethical concerns for child maltreatment data collection, a recent review indicated that few participants experienced distress when participating in trauma-focused research; negative emotions resulting from research participation often do not last long; and many participants viewed such research as beneficial to society. Furthermore, it has been argued that not asking about maltreatment may create other concerns such as placing an inflated importance on other variables due to the unmeasured variance through the exclusion of child maltreatment. There has been some noted support for population-based child maltreatment data collection in Canada and efforts to include child maltreatment in future CCHS surveys have been initiated, but not finalized. Strategies for including high-quality assessments of child maltreatment in these surveys need to continue to be discussed to facilitate future and ongoing data collection. Table 1 provides solutions for overcoming barriers and challenges for the inclusion of child maltreatment data into nationally representative Canadian surveys.

CONCLUSION

Child maltreatment is an understudied public health problem in Canada. More research using representative Canadian data is necessary to further our understanding of child maltreatment in Canada. To date, nationally representative data on child maltreatment do not exist. To advance our understanding of child maltreatment within the Canadian context, high-quality research using nationally representative Canadian data is essential.

REFERENCES