Centre for Urban Health Solutions Survey Research Unit Methodology Bits

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The Researcher's Role in Addressing Abuse and Neglect

It is unclear for many in the research field what to do when they suspect a case of abuse and/or neglect. Knowing when and how to make a report when abuse is suspected can be a difficult process to navigate. This edition of Methodology Bits serves to introduce the topic within the research context in the province of Ontario. Each case is unique so in times of uncertainty, it is recommended you seek guidance from your Principal Investigator, Research Ethics Board (REB), and/or a relevant community organization.

When researchers suspect abuse

Suspicions of abuse and neglect may be encountered in a variety of research activities (i.e. telephone recruitment, outreach activities, interviewing). The researcher in contact with study participants should understand their role in addressing abuse and neglect (starting by seeking direction from the Principal Investigator and REB); as well as understand the limitations of confidentiality.

Important considerations

- Questions to ask yourself if you suspect abuse: What about this situation makes me feel uncomfortable? Why? What makes me feel like someone might be in danger?
- Our own upbringing and prejudices surrounding race, economic status, etc. can influence how we see behaviours of others. Be mindful of this as you assess the situation
- Be mindful of history and context. For example, Indigenous families were unjustly dismantled through Canada's colonization. The lasting effects of this has led to an over representation of Aboriginal children in the Ontario child welfare system (18% but only comprise 3% of population).¹

Limits of Confidentiality

When must confidentiality be broken?

- Suspected Child Abuse and Neglect is <u>always</u> reportable under section 72 of the Children and Family Service Act of Ontario for children who are, or appear to be, under the age of 16.
- Suspected Elder Abuse and Neglect is <u>not always</u> reportable. Suspected abuse and neglect of a person living in long-term care or retirement home is <u>always</u> reportable.

When must confidentiality be maintained?

 Suspected (or known) Intimate Partner Violence (IPV) is not reportable unless there are children living within the home. It is not the researcher's obligation to report IPV, as persons experiencing IPV should decide if and when to report to police.

Who can I talk to about the situation?

- Seek guidance from your Principal Investigator, a senior coordinator or manager, and/or the REB.
- Community agencies can be helpful resources for both you and participants.
- For seniors, the 'Seniors Safety Line' (24 hour) at 1-866-299-1011 will help to determine if the situation is reportable.
- For IPV, the following organizations can provide support and/or make local referrals within Ontario if needed: Assaulted Women's Helpline at 1-866-863-0511 (24 hour, toll free); Toronto Rape Crisis Centre / Multicultural Women Against Rape 416-597-8808 (24 hour, and serves everyone); and FEMAIDE 1-877-336- 2433 (24 hour, toll free) which offers services in French for women seeking support for domestic and/or sexual violence.
- For information about child abuse and neglect, refer to 'What do I do if I need to report?' (Page 2)
- When a participant/person is in immediate danger that will result in serious harm, you should call 911.



Possible signs of abuse and neglect

Physical – i.e. hitting, restraining. Signs: bruising, fractures, restraint marks.

Emotional/Psychological – i.e. threats, exerting control. Signs: fearfulness.

Sexual – i.e. unwanted fondling, rape, sexual remarks, explicit video/photo. Signs: bruised thighs, swollen genitals, unexplained STIs.

Financial – i.e. loss of monetary control. Signs: eviction, not being able to pay bills, unexplained money, missing possessions.

Neglect – i.e. not providing necessities of life (intentional or unintentional). Signs: confinement, malnourishment, unsafe environment.

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What do I do if I need to report?

- Child Abuse and/or Neglect: Though reporting cannot be delegated to another team member, your coordinator/manager or Principal Investigator can support you through the reporting process. Report immediately by calling the Children's Aid Society (CAS) of Toronto at 416-924-4640. If outside of Toronto, contact your local CAS branch by visiting: www.oacas.org/childrens-aid-child-protection/locate-achildrens-aid-society/.
- When making a report, ask the organization who receives the report whether you should disclose to the involved that a report has been made.
- Even if you have made a report in the past or you are aware that someone else has made previous reports, you must still assess the current need to report.
- CAS can provide a consultation to help you determine if the situation is reportable, without disclosing confidential information.
- If you belong to a professional body (i.e. college of physicians, nurses, occupational therapists, etc.) you may have specific reporting requirements that you must follow.

Additional information

- The organization(s) you are reporting to have their own guidelines and follow-up procedures. The agency's intake worker can help to determine if any involvement is needed on the part of the organization that it is being reported to (i.e. Senior's Safety Line, Children's Aid Society).
- Provided the report is made on reasonable grounds (not for malicious reasons) one cannot be found liable if civil action is taken against the person who made the report.
- In some cases, such as elder abuse, an older person may decline intervention from authorities.
- Your report is only one piece of the broader story. The organization may or may not investigate your report, but rather collect information.

¹Ontario Association of Children's Aid Societies. (2014). The Voice of Child Welfare in Ontario. Ontario Child Welfare Report, p.4 & 14.

² Fung, A., et al. Immigration Status Matters: A Guide to Addressing Immigration Status Issues for Children and Youth in Care. (2014).Ontario Association of Children's Aid Societies ³ Caregiver's Support Guide, North Simcoe Muskoka, Community Care Access Centres, p. 18.

⁴ Eithier, L., Couture, G., & Lacharité, C. (2004). Risk Factors Associated with the Chronicity of High Potential for Child Abuse and Neglect, Journal of Family Violence, Vol. 19 (1), p. 14. Additional resources: Fallon, B., et al. (2015). Ontario Incident Study of Reported Child Abuse and Neglect – 2013 (OIS-2013). Toronto, ON. Child Welfare Research Portal.

Have community resources ready

It is good practice to provide all research participants with an REB approved Community Agency Resource Sheet upon completing an interview – regardless of whether any suspicions of abuse are present. This resource sheet should be population specific if possible. Example resources could include: emergency shelters, affordable housing, crisis support lines, elder care supports (i.e. Community Care Access Centres), CAS, respite services, immigration services, food banks, etc. Familiarizing yourself with these agencies before including them on a contact list is recommended (i.e. user fees; do they provide services in multiple languages?). Abuse is linked to social conditions such as poverty, lack of social supports or knowledge about community resources.^{3,4} Access to resources can also benefit those who carry out (or at risk of carrying out) adverse behaviours towards others.

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Working with the Research Ethics Board

- The REB overseeing the project should also be contacted.
- The REB should be informed if further participation has been terminated by the research team. When this is done, can depend on institutional policies (i.e. when study closure occurs, or during annual continuing review).
- Every case of suspected abuse or neglect is unique and in some cases, conducting follow-up telephone calls or interviews with the participant may or may not be recommended. The research team should work with the Principal Investigator to decide how best to proceed.

If you need to report, it is helpful to write down any pertinent information as you learn of it, rather than relying on your memory to recall the information later in time.

CAS specific

- Some regions in Ontario have CAS branches that serve specific populations, including First Nations, Métis and Inuit; Catholic; and Jewish. If you are uncertain whether a child may benefit from a specific branch of CAS, you may report to mainstream CAS and an intake worker can refer you to another CAS agency if more suitable.
- CAS prioritizes keeping families together by offering supports to the family. According to OACAS, 9 out of 10 maltreatment investigations in 2013 resulted in the child remaining in their home.¹
- CAS can connect families with existing community services (i.e. immigration services).²
- C-UHS Survey Research Unit Providing high-quality and

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Survey Research Unit

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