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**FACTOR-INWENTASH**  
FACULTY OF SOCIAL WORK  
UNIVERSITY OF TORONTO

# **Insights from Ontario Child Protection Services (CPS) senior administrators on responses to cases of intimate partner violence (IPV) exposure**

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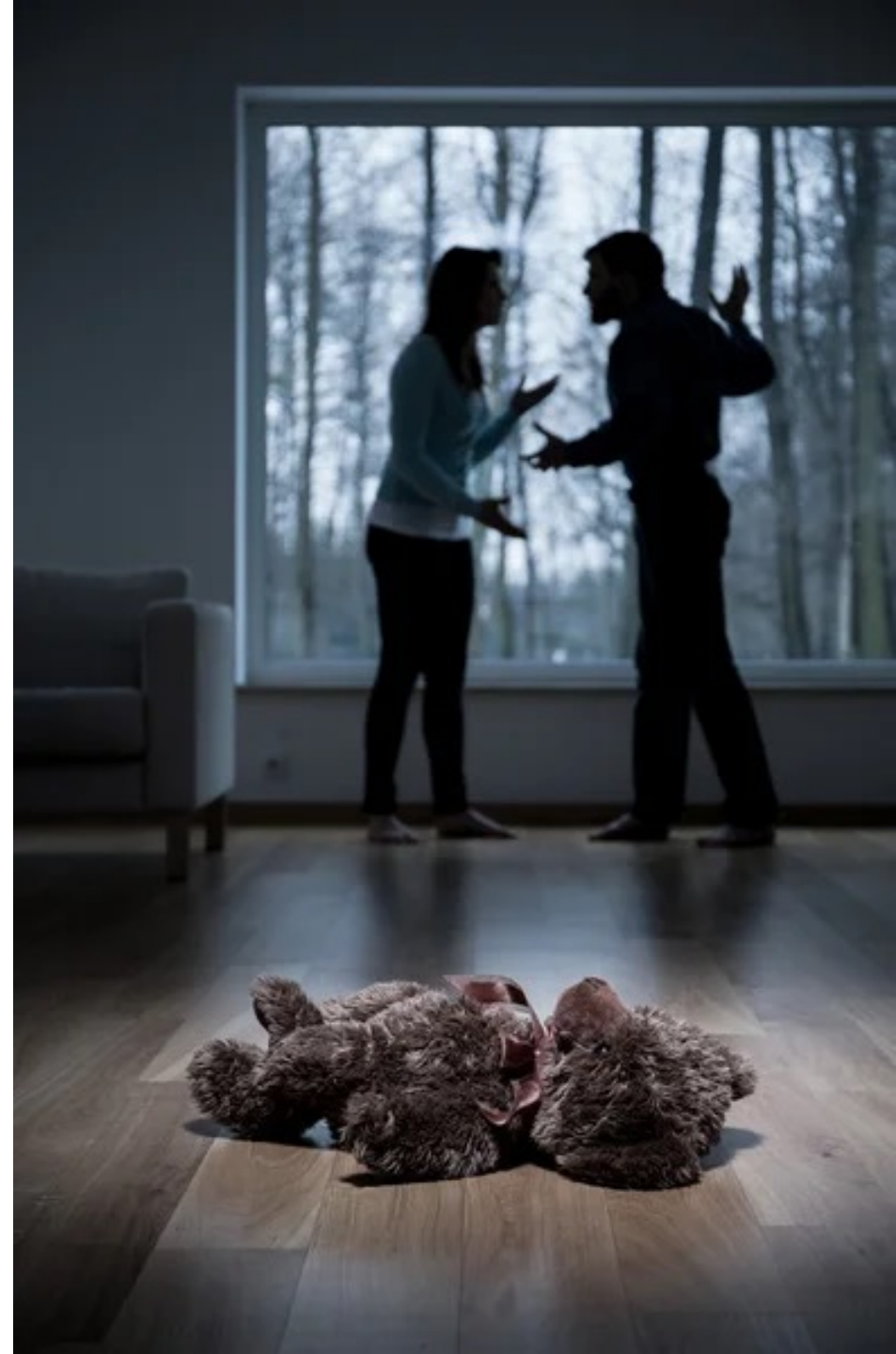
# Introduction & Context

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- Delivery of child welfare services is provincial and territorial responsibility in Canada
  - some variation seen across and within provinces
- In Ontario, 45% of all substantiated investigations are exposure to IPV<sup>1</sup>
  - largest proportion of maltreatment investigations
- Exposure to IPV is in Ontario Eligibility Spectrum – a screening tool to guide caseworker decision making
  - “duty to report” policy for service professionals
  - police are referral source for 58% of IPV exposure investigations<sup>2</sup>

<sup>1</sup> Fallon et al. (2020)

<sup>2</sup> Nikolova et al. (2021)



# Introduction & Context

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- Some agencies in Ontario have implemented a Differential Response (DR) model<sup>3</sup>
  - diverts low-to-moderate risk cases from traditional service track to community-based services
  - some have also developed specialized DV service teams to work with these families
- Child welfare (CAS)/Violence Against Women (VAW) Collaboration Agreement<sup>4</sup>
- These policies have resulted in a staggering increase of IPV reports over the last 20 years
- It is not well understood how these policies are being interpreted and implemented internally by Ontario child welfare authorities

<sup>3</sup> Alaggia et al., 2015

<sup>4</sup> Ministry of Community and Social Services, 2011

# Study Aims & Research Questions

Through interviews with senior administrators and managers at various Ontario child welfare agencies, this study sought to develop a better understanding of:

- the implementation of policies and practices
- the impact on service users

## Research Questions:

1. How do Ontario child welfare authorities respond to cases of IPV exposure?

2. How do senior managers and administrators view these practices, (including strengths and limitations)?

3. What are the barriers preventing further policy development or refinement?

4. What are the major issues impacting families experiencing IPV?



# Methods

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# Procedures

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- Purposive sampling methods
- Semi-structured interviews
  - guide developed to elicit policies and practices, implementation successes and failures, and ongoing gaps or limitations
  - most interviews were ~60 mins in length
- Digitally recorded interviews were transcribed and entered into Dedoose

# Analysis

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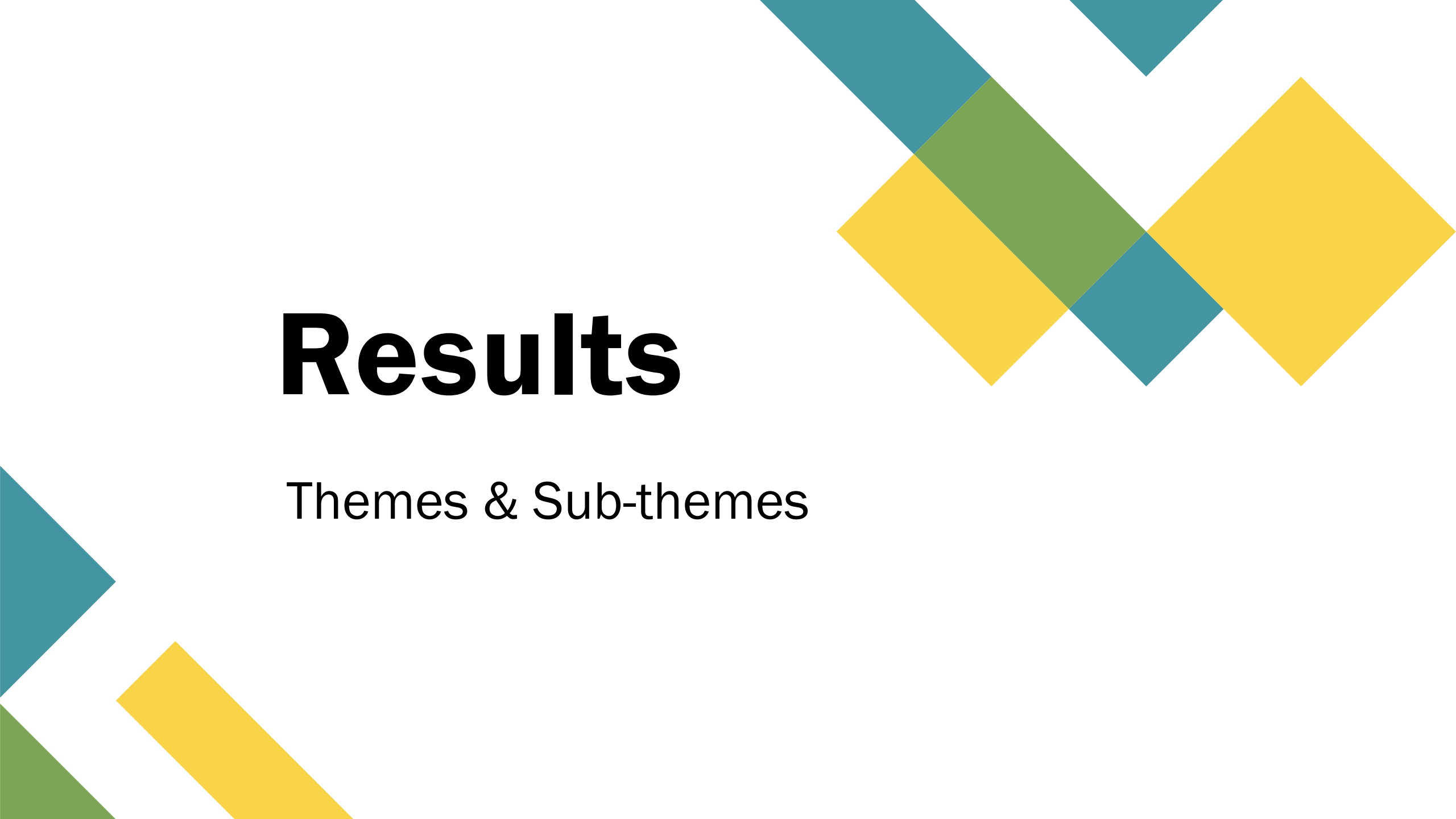
- Thematic analysis using Braun and Clarke's<sup>5,6</sup> 6-step process
- Inductive approach
  - identified themes from the “bottom up”
  - participant-driven findings
- Authenticity of data ensured via verbatim participant quotes
- 4 criteria of trustworthiness (credibility, transferability, dependability, and confirmability) by Lincoln and Guba<sup>7</sup> were followed

<sup>5,6</sup> Braun & Clarke (2006, 2019)

<sup>7</sup> Lincoln & Guba (1985)

# Results

Themes & Sub-themes



# Participants (n=11)

Gender	Position	Years in CPS	Location
Woman	Protection Supervisor	17	Urban
Woman	Manager/Supervisor	26	Urban
Woman	Community Protection Supervisor	18	Urban
Woman	Supervisor of Family Services	20	Rural
Man	Child Welfare Supervisor	20	Urban
Woman	Supervisor of Holistic Services	24	Urban
Woman	Manager of Child Protection	18	Urban
Woman	DV Team Leader	20	Urban
Woman	Child Welfare Supervisor	16	Rural
Woman	Intake Supervisor	19	Rural
Woman	Supervisor (Blended Family Service)	20	Rural



## *Collaboration with the VAW Sector*

Conflicting philosophies create discord

Need for ongoing training

Benefits of linked/embedded VAW services

## *Systemic Issues and Gaps*

Funding and staffing shortages

Impact of Ontario Ministry standards on DR

Lack of services available in the community

## *Responses do not Accommodate Intersecting Needs or Identities*

Newcomers

Co-occurring disorders or issues

Indigenous families

## *Key Differences Working with Perpetrators vs. Victims*

Disproportionate expectations & responsibilities for women

Difficulties engaging with men

Promising approaches

# Collaboration with Violence Against Women (VAW) Sector

## Conflicting philosophies create discord

- child welfare and VAW agencies serve different “clients”
- consent & confidentiality policies

## Need for ongoing training

- general cross-training
- CAS/VAW Collaboration Agreement

## Benefits of linked or embedded VAW services

- co-location models
- joint assessments and safety planning
- faster responses
- consistency and trust with families

A decorative graphic consisting of several overlapping diamond and triangular shapes in teal, yellow, and green colors, positioned in the top right and bottom left corners of the slide.

“

“The VAW sector doesn't understand that ultimately our client is the child. So, we do maybe make different decisions in some cases where it may be different than what the VAW thinks is best for mom, but we may think it's best for the child.” (Participant 10)

**Conflicting philosophies  
create discord**

# Collaboration with Violence Against Women (VAW) Sector

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“

“I think just continued exposure to one another, understanding each other’s worlds, your language, your policies, your procedures... we’ve done more of that collaborative work with them and talking about our different worlds, it’s really broken down the barriers but if we continue that, I think it’ll just get stronger and stronger.” (Participant 8)

**Need for ongoing  
training**

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“

“When we involved our collaterals upfront, some of the safety plans were just, you have to be kidding me... wow... who would have thought of that? Because that’s their specialty” (Participant 5)

**Benefits of linked or embedded VAW services**

# Systemic Issues & Gaps

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## Funding & staffing shortages

- more funding = more staff, smaller caseloads, more time with families
- complexity of cases

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## Impact of Ontario Ministry Standards on DR

- unrealistic timelines and accountability practices
- prioritizing paperwork over relationship building

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## Lack of services available in the community

- long waitlists
- lack of access due to geographical distance
- housing shortage
- especially for children and men





“

“We’re having our frontline workers take on really high caseloads, and they’re being expected to have a standard of work. Something’s got to give, you know? Ideally it would be to have more staff that can have smaller caseloads.” (Participant 4)

**Funding & staffing shortages**

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“There’s so many demands now on our protection workers, front line staff, with the mandates and the Ministry guidelines and standards. They really, really do not have the time to sit down and do clinical or therapeutic work with our clients... It [accountability] comes at the expense of the client contact.”

(Participant 1)

**Impact of Ontario  
Ministry Standards on DR**

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“We know when there are families in crisis, that’s the best time to affect change, and the unfortunate thing is by the time they finish these waitlists, the issue’s over and families are less inclined to work on the issue because it’s a non-issue, it’s done and over with.” (Participant 8)

**Lack of services available  
in the community**

# Responses Do Not Accommodate Intersecting Needs or Identities

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## Newcomers

- language barriers
- settlement
- cultural differences

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## Co-occurring issues or disorders

- poverty
- unstable housing
- mental illness and addictions

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## Indigenous families

- provincial legislation
- institutional approaches
- lack of trust

A decorative graphic consisting of several overlapping diamond and triangular shapes in teal, yellow, and green colors, arranged in a pattern that suggests movement or a path.

“

“There’s a lot of considerations when you’re working with families that are new immigrants. You know, how do we best support them? And are sensitive to their experiences. Yeah, that’s an area we need to work on, I would say.” (Participant 4)

**Newcomers**

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“We’re also dealing within our community, the socio-economic conditions that aggravate people to react and to lash out on each other, right? When you’re living in poverty, you know.” (Participant 11)

**Co-occurring issues or disorders**

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“

“They [the policymakers] really need to look at what’s needed... We’re still under one legislation – The Family Services Act. And I think that in itself, you have a Eurocentric law. We’re trying to do cultural practice, or do things differently, it’s hard. But it doesn’t have to be if legislation allowed for the different communities to come up with their own protocol and services that would work.” (Participant 11)

**Indigenous families**

# Key Differences Working with Perpetrators vs. Victims

## Disproportionate expectations & responsibilities for women

- focus and burden
- revictimization
- pressure to end relationship
- framing IPV as “conflict”
- shift of responsibility to perpetrator

## Difficulties engaging with men

- access issues
- mutual avoidance
- workers’ safety concerns

## Promising approaches

- safety practices
- offering empathy and understanding
- focus on children and impact of IPV vs. incident
- Three Houses tool



“

“And in some cases, there's a lot of weight put on the mother to keep their children safe when they're victims themselves. And I think that's another problem. Because they're still responsible for ensuring child safety even if, in many cases, they're the victim.” (Participant 3)

**Disproportionate expectations & responsibilities for women**

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“We can’t locate him, we’ve tried several times. And then it’s like, okay, we can’t locate him, but she’s not going to reconcile, so we’re just going to close, right? So then it’s a situation where that individual, we haven’t even talked to them, let alone understand if there’s any accountability or change in behaviour. So I think that’s an ongoing problem.” (Participant 4)

**Difficulties engaging with men**

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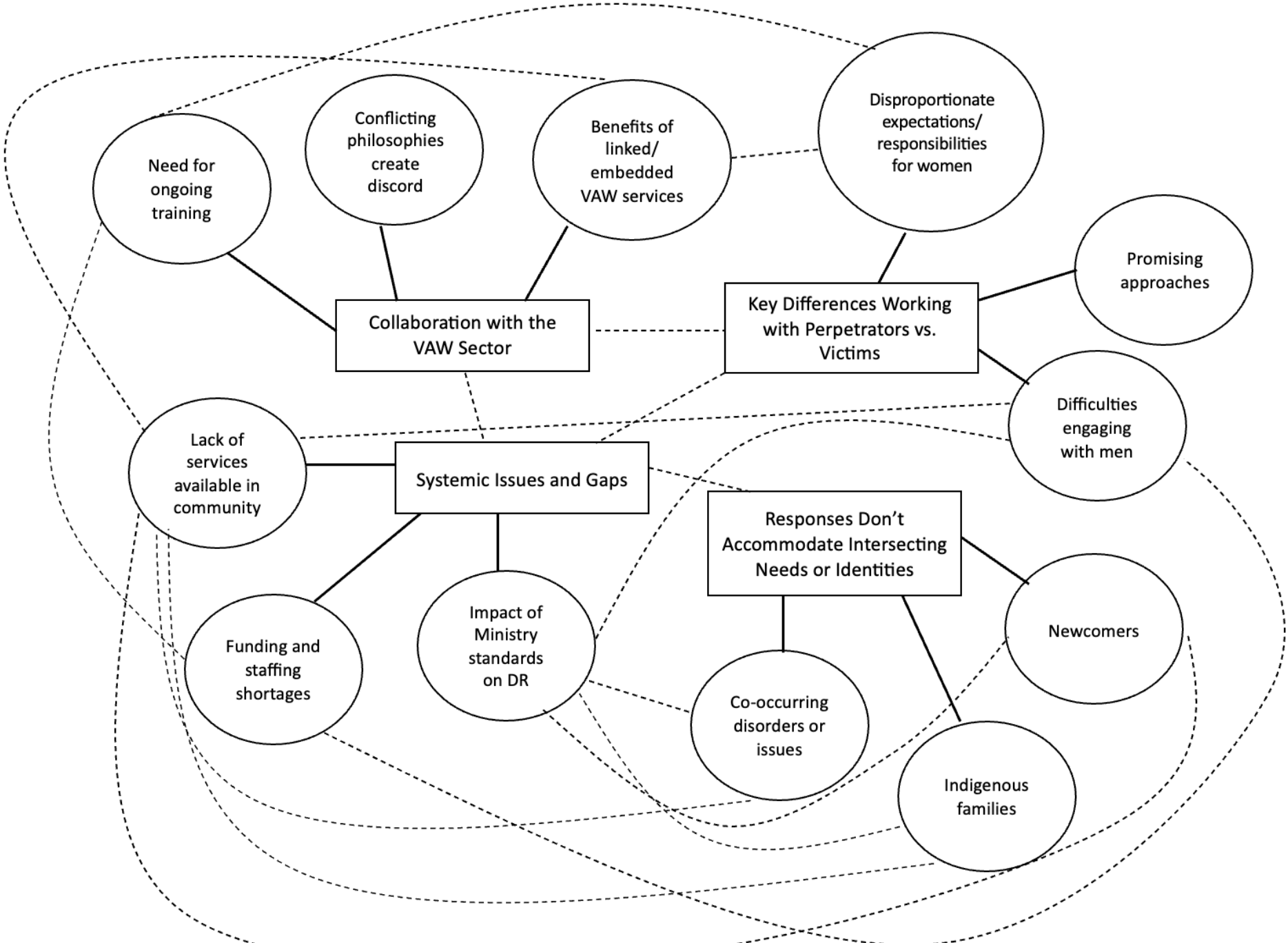
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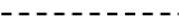
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“I certainly find much better results talking about “this is what your child told me” as opposed to getting into what happened and who did what, how did it happen, those kinds of things... You know, “she hit me first, it’s not my fault,” what you’d expect. I don’t care, I don’t care who did what. What I care about is your child is saying that they heard this and they were terrified.” (Participant 6)

**Promising approaches**

# Thematic Map



-  Theme
-  Sub-theme
-  Link to sub-theme
-  Relationship between themes/sub-themes



# **Practice & Policy Implications**

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# Implications

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- Need for increased funding (internal and external)
  - reduced caseloads
  - more therapeutic time with families (including fathers)
  - access to community services and resources
- Ministry standards and timelines
  - advocacy for policy review and reform
  - more flexibility required
- Specialized training and ongoing supervision for implicit biases toward victims
  - continue ongoing shift in equitable practice approaches
  - collaboration with VAW sector

# Conclusion

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- Several barriers and limitations impede workers effectively responding to cases of IPV exposure in Ontario
  - many issues are systemic
- Promising approaches were identified for working with fathers, children, and the VAW sector
  - formalized training on these and other practice strategies
- Suggested integration of CPS and VAW services for holistic interventions and trust building
- In-depth qualitative research needed with CPS clients to understand implications of current responses and possible unintended consequences

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# Thank you

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Questions or comments?

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<https://www.umanitoba.ca/resolve/search-promising-approaches>