

Trite Reporting Policy

Policy Area: Child and Family Well-Being and Diversity, Equity & Inclusion Policy Number: Effective Date of Policy: 10/25/2023					
Approved By: Chief Executive Officer			Approval Date: 25/10/2023		
Review Date: 1/4/2027					
Applies to:					
🖂 All staff	⊠ Board of Directors	⊠ Contractors	🛛 Resource Pa	rents	⊠Volunteers
Frequency of Attestation:					
🖾 Onboarding 🛛 Annually 🗌 Every Four Years 🖾 As Needed					
Cross Referenced Policies:					
YRCAS Duty to report Policy					
Policy Owner					
Department: Child and Family Well-Being					

Purpose

The policy outlines the responsibilities of agency staff to address, educate, inform, consult, and support the community in preventing and addressing the discrimination that ensues due to trite reporting. This includes identifying and actively challenging stereotypes, conscious, and unconscious biases that may inform and/or influence the use of the duty to report mechanism under section 125 of the Child, Youth and Family Services Act, 2017 (CYFSA). The policy outlines the role of the agency's staff to mitigate the harm done to families, evidenced by the over- reporting, trite reporting, and over-representation of African Canadian, 2SLGBTQ+, and Indigenous children and young persons in the child welfare system.

The intent of this policy is to address those circumstances where a referral or report is made to York Region Children's Aid Society (YRCAS), and it is determined:

- i. There is no child protection basis for the concern(s) reported; and Bias / discrimination is determined to be the reason and/or involved in the reason for the referral.
- ii. Bias / discrimination is determined to be the reason and/or involved in the reason for the referral.

Scope

This policy applies to all employees, board members, student placements, volunteers, and resource parents who may become aware of an incident of a Trite Reporting.

Policy Statement

Child safety and well-being is a shared community responsibility. Children and youth have a right to safety and well-being wherever they are, not just in their homes, but also in their communities; they



rely on all systems and communities to work together. Systems and institutions are not neutral. Their policy and practices were created within a historical context of colonialism, white supremacy, anti-Indigenous and anti-Black racism, and other systemic forms of oppression, all of which have been woven into the fabric of institutions, systems, and communities.

As part of a shared responsibility, it is important that agency staff and members of the community understand the impacts of systemic racism, inherent biases, and diligently work to filter out perceptions, stereotypes, prejudice, discrimination, and biases which can inadvertently influence referrers' decisions to call a Children's Aid Society.

The Society uses an educative and awareness approach that is grounded in an Anti-Oppression, Anti-Black Racism, Anti-Indigenous, and equity framework when informing the community about their duty to report suspected maltreatment of children/youth to a Children's Aid Society/Indigenous Child and Family Wellbeing Agency. The education must include training and awareness on how to avoid personal and systemic biases, the historical and ongoing legacy of colonization, racism, homophobia, transphobia, ableism, and racism, perpetrated against First Nations, Inuit, and Métis, African Canadian, and 2SLGBTQ+ communities, that impact or influence decision making, and have led to the overrepresentation in the child welfare system. Systemic biases also are seen in acts of ableism and classism affecting those who live with mental health diagnosis, disabilities, and differing abilities, as well as those struggling with poverty. Education will address accountability and support for referrers to change the discrimination that ensues as result of trite reporting.

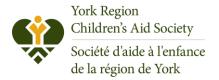
Definitions

"**Bias**" is the conscious (explicit) or unconscious (implicit) opinion, preference, prejudice, or inclination formed without reasonable justification that prevents a balanced or even-handed judgement.

"**Colonization**" may be understood as some form of invasion, dispossession, and subjugation of a people. The invasion need not be military; it can begin—or continue—as geographical intrusion in the form of agricultural, urban, or industrial encroachments. The result of such an incursion is the dispossession of vast amounts of land from the original inhabitants. This is often legalized after the fact. The long-term result of such massive dispossession is institutionalized inequality. The colonizer/colonized relationship is by nature an unequal one that benefits the colonizer at the expense of the colonized.

"**Culture**" means a social system of meaning and custom that is developed by a group of people to assure its adaptation and survival. These groups are distinguished by a set of unspoken rules that shape values, beliefs, habits, patterns of thinking, behaviours, and styles of communication. Factors such as ethnicity, religion and family structure and history influence family practices.

"Maltreatment" refers to the harm, or risk of harm, that a child or youth may experience while in the care of a person they trust or depend on, including a parent, sibling, other relative, teacher, caregiver, or guardian. Harm may occur through direct actions by the person or through the person's neglect to provide a component of care necessary for healthy child growth and development.



"Mandated Referrer": The Child, Youth, and Family Service Act, 2017 (CYFSA) recognizes that people who work closely with children and youth, such as teachers, health care workers, social workers, police officers, coaches, family counsellors, religious leaders, etc., have a particular responsibility to report their suspicions, or concerns that a child might be, or is being harmed. Under the CYFSA, a person convicted of not reporting can be held liable to a fine of up to \$5,000.

"**Overrepresentation**" is the representation of a group in a category that exceeds the expected number in the group in proportion to their representation in the general population or number is substantially greater than the representation of others in that category.

"**Racism**" means a system of oppression based on race. Racism is different from racial prejudice, hatred, or discrimination. Racism involves one group having the power to carry out system discrimination through the institutional policies and practices of the society and by shaping the cultural beliefs and values that support those racist policies and practices.

"**Reasonable Grounds**" refers to information that somebody using honest judgment would need in order to decide to report a child may be in need of protection. This standard has been recognized by courts in Ontario as the threshold for reporting.

"Systemic Racism" Policies and practices that exist throughout a whole society, organization or an *institution or set of institutions that result in and support a continued unfair advantage to some people and unfair or harmful treatment, bias and disadvantage to some groups based on race. *e.g.: education, healthcare, legal, or the child welfare systems

"**Stereotypes**" means an often unfair and untrue belief that many people have about all people or things with a particular characteristic.

"Trite Reporting" refers to a person(s) making a report to the Children's Aid Society under the duty to report mechanism outlined in the CYFSA for things that are not a child protection concern — an occurrence that often disproportionally impacts Black and Indigenous families. **Please refer to Appendix for Examples of Trite Reports.**

Roles and Responsibilities

All staff who interact with professionals, including mandated referrers and members of the community who may report concerns that a child may be in need of protection have a responsibility to:

1. Document Identity

- a. Workers that receive the referral to inquire about and document the intersecting identities which includes race of the child and family being referred.
- b. Ask questions to seek clarification of the motivation or rationale for the call to the Society.

2. Educate and Inform

- a. Educate and support screeners to ensure they respond appropriately to referrers who are expressing racism/discrimination when reporting a concern of child maltreatment.
- b. Educate referrers that perceptions and biases can inadvertently influence an individual's



decision to call the Children's Aid Society about a concern or suspicion, and educate the referrer on how perceptions, stereotypes, and biases can inadvertently influence the suspicion or concern that may be reported.

- c. Indigenous children and youth are overrepresented in Ontario's child welfare system. This is due to the history and ongoing legacy of colonization, the residential school system and anti-Indigenous racism perpetrated against First Nations, Inuit, and Métis communities in Canada.
- d. African Canadian children and youth are similarly overrepresented in Ontario's child welfare system. This is due to the history of slavery, colonization, and racism against people of African descent. This results in anti-Black sentiments and anti-Black racism.
- e. Overrepresentation begins at the referral stage based on racial, ethnic, and colonial stereotypes.
- f. Understanding that differences in culture, stereotypes, and alternative parenting practices is critical to ensuring the referrals made to the Society are helping and not harming the family.

3. Consult

- a. If a professional or other member of the community wishes to discuss a possible referral using non-identifying information, they may contact Screening to consult.
- b. Such consultation provides an opportunity for the Society to prevent unnecessary referrals, mitigate some risks of disproportional reporting of Indigenous, African Canadian and 2SLGBTQ+ children, youth, and families and provides opportunities for the Society to suggest alternate, less intrusive options, resources, and considerations.

4. Report

- a. Report any concerns about trite reporting to a supervisor.
- b. The supervisor consults with Diversity Equity and Inclusion designate and may be elevated to Director of Service for further consultation and review.

Procedures

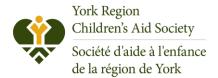
At the point of referral in the service delivery process, for children or young persons in the community receiving service and for children or young persons in care, the Worker with responsibility for serving the child or young person will:

1. Engage in a conversation about:

i) The identity characteristics of the child, young person and family being referred for child welfare services or intervention; and

ii) Record characteristics, including the race/identity of the child, young person, and family into the appropriate field in the "Person Record" of the Child Protection Information Network (CPIN).

2. Ask questions to seek clarification of the motivation or rationale for the call to the Society



and record in the appropriate field in CPIN.

3. Ask questions to seek information with respect to the referral source and enter into the appropriate fields in CPIN.

4. Actively listen to the caller/referent to determine next steps, (e.g., whether or not the call is a child protection matter or can be serviced in the community by another agency).

5. Make referrals to the most appropriate community services and culturally specific community services where this is determined to be the appropriate route of service.

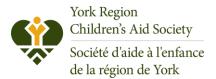
6. Provide the caller/referent with educational information about the referral process to assist the referral source in making an informed decision about reporting information to the Society.

7. Inform Supervisor if trite reporting is identified as a concern at any point in the service delivery process and arrange a consult with the Diversity, Equity, and Inclusion Team identifying in the referral/request that trite reporting has been identified; this may be further elevated to a Service Director and consult sought with the Manager of Diversity, Equity, and Inclusion.

8. Use the occurrence as an opportunity to educate the caller/community on the effects of trite reporting if trite reporting is determined to have occurred.

- a. The CAS Worker will contact the referrer, and their supervisor/administrator/ and/or educator/superintendent involved in the case, and who filed the trite complaint to request a joint meeting to provide education, and an awareness of the impacts of biases and trite reporting on children, youth and families; education can be provided about 'duty to report', child welfare redesign, and the community-based approach of child wellbeing service delivery; the role of community agencies in providing supports, and being part of the family's network.
- b. The education should be tailored to align with the family's identity, and/or intersecting identities, and situation (e.g., education on trite reporting on Black communities, if the family identifies as Black).
- c. The meeting should include the referrer, their direct supervisor (e.g., school principal, superintendent, administrator, daycare owner, etc.), the designated CAS worker, and a member of the YRCAS Diversity, Equity, and Inclusion Team.
- d. This meeting should be documented in the clinical narrative, including who was present at the meeting, referent's/supervisor's responses to the education provided, any recommendations made, and resources provided to the individual and their agency (if applicable).

9. Write a clear rationale for the decisions made in the clinical narrative, referencing trite reporting if this was determined to have occurred and describing how this relates to the disposition of the matter.



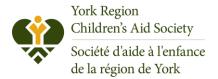
At all phases of service delivery, Service Supervisors and Service Directors will: 1. Incorporate discussions of bias in reporting decision-making and case reviews, ensuring that the voice of the child or young person is centered in service provision (Katelynn's Principle). 2. Document the steps taken to identify incidences of trite reporting and aim to put corrective mechanisms in place.

Report of Trite Reporting

1. Should a caller or individual in receipt of service report an incident of trite reporting, the information will be taken from the caller/individual and reviewed with the Service Supervisor in consultation with Diversity, Equity, and Inclusion team designate to determine next steps, this may be further escalated to a Service Director and consult sought with the Manager of Diversity, Equity, and Inclusion.

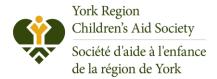
As per the One Vision One Voice Race Equity Practice Framework, the Society will:

- 1. Collect and analyze data as to referrals to the Society.
- 2. Identify trends in trite reporting that are linked to specific referral sources, and/or mandated referrers, which would inform the implementation of a formal engagement and educational training with the mandated referrer, and/or institution, which would be delivered by the Diversity, Equity and Inclusion Team Designate. The training would include increasing the awareness of the nuanced understanding of child abuse and maltreatment, an understanding of poverty and the impact on parenting, and an understanding of how their biases can contribute to disproportionality in the child welfare system.
- 3. Provide critical feedback, engage in ongoing discussions, and provide training in reporting.
- 4. Educate and support workers in receipt of child protection referrals and provide all staff with a list of culturally specific community agencies.



Regulations, Guidance and Cross References

- Child, Youth and Family Service Act, 2017 (CYFSA) s. 72, 125, and 292.
- OACAS Duty to Report Workgroup Recommendations July 2021
- OACAS Jeffrey Baldwin Inquest Implementation Guidelines for the Child Welfare Sector, Nov 2016.
- Navigating the Child Welfare System: A guide for Ontario's Black Community
- One Vision One Voice Race Equity Practice Framework
- Durham Children's Aid Society Trite Reporting Policy: <u>https://durhamcas.ca/equity-and-inclusion/trite-reporting-policy/</u>



Appendix A – Trite Reporting Case Examples and Definitions

Definitions and Description of Trite Reporting (taken directly from the One Vision One Voice Navigating Child Welfare Guide outlined below in italic)

For many Black families, school is the first place, concerns about parenting, or problems with a child's behaviour are raised. In many instances teachers and school administration work with families to address concerns. However, sometimes teachers may call CAS about a concern with a Black child, instead of talking to the family first.

Teacher Biases: Many teachers do not understand the culture of African Canadian students, and some may be scared of African Canadian parents (due to learned stereotypes). All of this leads to an overreporting of African Canadian students to CAS.

Trite Reporting: Trite reports are silly situations that may cause a teacher to call CAS. For example, if a child brings a lunch to school that the teacher is not familiar with (like a roti). Teachers are quicker to call CAS when there is a concern about an African Canadian student, while similar concerns about non-Black students would be directed to parents. Other trite reasons teachers may call CAS are a parent is late to pick up their child, a child uses dramatic language like saying "My mom is going to kill me".

Parenting Styles: Many teachers think that Black parents are too strict with their children. Or they may think that Black parents speak rudely to their kids. For some, they don't understand why Black parents need to be strict in order to keep their kids safe in a society that views them as threatening.

Behaviour in School: It is not easy to be one of a few, or the only Black child in school. Even when Black children are in schools with other Black kids, they are often taught by teachers who are not Black. This can be stressful for children because they feel different or unsafe in their schools. As a result, Black children may sometimes act out in schools and teachers sometimes see this as a result of issues in the home and will call CAS.

(Some Black students may also be faced with further marginalization due to exceptionalities associated with some mental health and/or developmental diagnosis but are not always afforded the same level of supportive interventions as other non-Black students).

Overreporting: Teachers often overreport Black children to CAS, because they are worried that *if they don't, they will get in trouble.*

Reference: <u>One Vision One Voice: Navigating The Child Welfare System, A Guide for Ontario's Black</u> <u>Community, https://www.oacas.org/2021/11/ovov-relaunches-guide-on-navigating-the-child-welfare-system-for-ontarios-black-community/</u>

Trite Case Examples (Developed by YRCAS)

Colleen and Martine are parents to two children, Selena (13) and Peter (11). Peter and Selena's school principal called the Society to report concerns for Selena. The principal explained that when Selena started attending the school, she was dressing "normally", however, in the last few weeks, she has been wearing baggier clothes, cut her hair short, and is asking classmates to refer to her as "Sam". The principal recently overheard Martine telling Peter to wear a dress to school if he wants. The principal is concerned that Martine and Colleen are causing emotional harm to their children by confusing them about their genders.

Teacher Biases: Transphobia, homophobia, heteronormativity, lack of understanding regarding gender identity and expression.

Trite Report: The parents are supportive of Selena, no child protection concerns identified by Selena regarding her parents. The teacher's biases are impacting what is being perceived as a child protection concern and informing the duty to report mechanism.

Sabrina and Marco are parents of three children, the youngest of which is Michelle (2). Michelle's daycare owner has called the Society to report concerns for Sabrina. She said that she notices that whenever Sabrina comes to pick Michelle up, she does not seem to "have control" over Michelle. She said that Michelle is running around right before pick-up time and Sabrina has difficulty getting Michelle packed up and dressed to go, often requiring support from daycare staff. The daycare owner noted that Sabrina sometimes just sits down, and watches Michelle run around instead of getting her dressed. The daycare owner further stated that, twice this week, Michelle was sent to daycare without enough snacks. She complained about being hungry, so the daycare staff had to provide her with extra food. The daycare owner is worried that Michelle is being neglected and that Sabrina does not know how to take care of her.

Upon further discussion with the daycare owner, the CAS Screening Worker learns that the other children are 5 years old and 8 years old, and mother had previously packed snacks for Michelle, however stopped once a daycare worker had negatively commented on the smell and appearance of the snack, which mother reported to the daycare supervisor. The Worker also learns that Marco is Catholic and grew up in Durham Region; Sabrina is Indigenous and grew up Wawakapewin Reserve in Sioux Lookout, Ontario.

Day Care Staff Biases: Lack of understanding of diverse/different cultural practices and worldview as it relates to parenting, gender biases of what is considered "good mothering", stereotypes of Indigenous parents, Eurocentric view of appropriate snacks and nutrition. Assumptions of neglect and supervision with no evidence to support.

Trite Report: The parents have provided snacks in the past but were impacted by negative comments by daycare staff. Lack of communication with parents regarding the observations

for further understanding and to offer support if applicable. Assumption of poverty and neglect, despite no other signs of neglect in the child's appearance, and well-being.

Alisea is a single mother to Justin (7) and Crystal (4). The Society receives a phone call from Justin's soccer coach. The coach is concerned for Justin because Alisea regularly drops Justin off late to practice and is rarely on time to pick him up. Further, Alisea never stays to watch practices/games like the other parents and Justin looks sad when his mom leaves. The coach noted that, at the beginning of the season, Alisea argued with her about which group Justin should be playing with. The groups are divided by age, but Alisea wanted Justin to play with the younger group because he is a bit shorter than most children his age. The coach said she explained to Alisea that Justin was not that small and that she couldn't break the rules and put the other (younger) children at risk of being injured by an older child. The coach said that Alisea was "loud" and "argumentative".

The coach advised that the family was Black and Christian (she heard them talking about church once). The coach said that she saw Alisea working at a grocery store a few months ago. The coach said she has never seen the children's father and doesn't know anything about him. The coach also said that another parent (whose children go to the same school as Alisea's children) mentioned that Justin was struggling in school.

Teacher Bias: Many teachers often do not understand the layered intersecting identities of Black, African Canadian students and as such is not able to provide supports, rather they place negative labels on behaviors, and stereotypes on Black single mothers as being aggressive and argumentative when they advocate for their children. Family status assumptions and biases.

Trite Report: The child protection concern reported is based on allegations that Alisea was being loud and argumentative directly with the coach. No concerns reported about Alisea's parenting of the child, or that Alisea was advocating for the support and safety of her son Justin which is a strength.

John is 9 years old and recently immigrated to Canada from Kingston, Jamaica. John had been exposed to family violence, community violence, and the immigration process was a difficult one for him and his family. John is also diagnosed with ADHD. In class John is extremely active, often speaks out of turn, and is unable to focus and be organized in class. John is also sometimes very emotional and often seems withdrawn and crying. The teacher is concerned that something is happening with John and his parents at home, causing John's "disruptive" behaviours in class. The teacher made the report to CAS before having a conversation with John or the parents.

Teacher Bias: Assumption that communication with the parents would not provide better understanding regarding the support needed for John at school. Automatically assuming the

issues John is presenting with at school are due to child protection concerns at home although John's diagnosis and trauma history are documented in his individualized educational plan.

Trite Report: John's behaviours are consistent with some of the behaviours associated with the ADHD diagnosis and previous trauma history. No reported concerns from John regarding his parents' parenting or ability to meet his needs. The report to CAS was based on the teacher's observations, without seeking context or other additional information from parents to understand John's needs and support.

Malia is a 10-year-old girl, who is very articulate and intelligent for her age. While playing with her friends at the park, she accidentally fell and hurt her arm. Malia went home and told her father about the fall; he took her to the hospital as he was concerned about the level of swelling, even though Malia was not crying. Her father is originally from Jamaica and speaks with an accent. The doctor at the hospital asked Malia what happened. Malia's father started to answer the doctor, who promptly interrupted him and said he was directing his question to Malia. Malia was confused by the doctor's response to her father but answered the question. Despite Malia's response, the doctor contacted the Society to report concerns of neglect, and that he suspected that Malia was not being forthcoming in her description of what occurred.

Doctor Bias: Anti-Black Racism, assumptions of guilt as father is a Black man, display of disrespect to father as the caregiver of Malia. Lack of trust in Malia's answers despite answering the questions clearly.

Trite Report: Father was protective and proactive in bringing Malia to the hospital. Malia provided answers to the doctor's questions which were not believed by the doctor, as Malia's father was Black. The doctor, despite having the answers, assumed Malia's father was neglectful and reported the concerns.

Regulations and Guidance

This policy is written in accordance with the Child and Family Services Act, 2017 ("CYFSA") and more specifically references directions from O. Reg. 155/18 and 156/18.