

# 15-YEAR-OLD JIMMY

An Investigative Review



OCTOBER 2017





Under my authority and duty as identified in the *Child and Youth Advocate Act (CYAA)*, I am providing the following Investigative Review regarding the death of a 15-year-old young man who was receiving Child Intervention Services at the time of his passing. Consistent with Section 15 of the *CYAA*, the purpose of this report is to learn from this sad circumstance and recommend ways of improving Alberta's child intervention system.

This is a public report that contains detailed information about children and families. Although my office has taken great care to protect the privacy of the youth and his family, I cannot guarantee that interested parties will not be able to identify them. Accordingly, I would request that readers and interested parties, including the media, respect this privacy and not focus on identifying the individuals and locations involved in this matter.

In accordance with the *CYAA*, the names used in this report are pseudonyms (false names). Finding an appropriate pseudonym is difficult because a young person's name is part of who they are. However, it is a requirement that my office takes seriously and respectfully. In this situation, his sister who was his guardian, was involved in choosing the name, Jimmy.

Jimmy was a young man of Indigenous heritage. He was raised in a family where he was exposed to addictions, domestic violence and suicide attempts. At 13 years old, he left home. When he was a teenager, Jimmy asked for help from Child Intervention Services a number of times, but did not receive ongoing supports. His presenting behaviours often overshadowed his emotional and physical needs that were likely the result of early childhood trauma. When he was 15 years old, Jimmy died by suicide.

This review highlights the importance of recognizing the vulnerability of at-risk adolescents who are asking for help from Child Intervention Services. When youth ask for help, it is imperative that their histories of abuse and neglect are considered and caseworkers look beyond their presenting behaviours. Young people like Jimmy must be seen and not forgotten.

[Original signed by Del Graff]

**Del Graff**

Child and Youth Advocate

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## EXECUTIVE SUMMARY

Alberta's Child and Youth Advocate (the "Advocate") is an independent officer reporting directly to the Legislature of Alberta, deriving his authority from the *Child and Youth Advocate Act (CYAA)*. The Advocate has the authority to conduct investigations into systemic issues related to the death of a young person who was receiving Child Intervention Services at the time of their passing.

Jimmy<sup>1</sup> was a young man of Indigenous heritage who died by suicide. He grew up in a chaotic home and left when he was 13 years old. Approximately two years later, he asked Child Intervention Services for help. At the time of his passing, child intervention was involved with Jimmy through an Intake.<sup>2</sup> Although the Terms of Reference for this review did not identify suicide as a potential systemic issue, the Advocate has made numerous recommendations in previous reports that are related to suicide and are relevant to Jimmy's circumstance (Appendix 3).

The Terms of Reference for this review identified two systemic issues:

- 1. Providing supports to youth in need**
- 2. Jurisdictional responsibilities**

These two issues will be discussed together under "Providing Child Intervention Services to At-Risk Adolescents." An additional systemic issue, "Guardianship" was also identified through the Investigative Review process.

### **Providing Child Intervention Services to At-Risk Adolescents**

Jimmy left home when he was 13 years old and went to stay with relatives. He had been exposed to domestic violence and his parents' substance abuse and mental health concerns. Two years later, 15-year-old Jimmy asked Child Intervention Services for help because he was homeless. Ongoing support was not offered because it was believed that he had places he could stay. The focus was on Jimmy's choice to use substances and not stay with relatives instead of focusing on the impacts of his early adverse childhood experiences.

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- <sup>1</sup> All names throughout this report are pseudonyms to ensure privacy of the young person and their family.
  - <sup>2</sup> The initial gathering and analysis of information to determine if a child is in need of intervention. This phase precedes the Safety Assessment.

The United Nations Convention on the Rights of the Child (UNCRC)<sup>3</sup> recognizes the special needs and unique rights of adolescents. The UNCRC promotes an approach that builds on strengths and recognizes the contributions that adolescents can make, while eliminating conditions that result in discrimination.

When young people ask child welfare agencies for help, their unique strengths, needs and vulnerabilities must be recognized. It is essential that their histories of abuse and neglect are considered and caseworkers look beyond the young person's "presenting behaviours" and shift their focus from "what is wrong with you?" to "what happened to you?"<sup>4</sup>

The Office of the Child and Youth Advocate has seen a marked increase in the number of adolescents like Jimmy, who have asked Child Intervention Services for help and have been denied. Some community organizations have indicated that young people whom they work with have been denied services so often, they have simply stopped asking. There is recognition that this vulnerable group of young people need an avenue for appeal to ensure that their voices are heard in a timely manner.

## Recommendation 1

The Ministry of Children's Services should create provincial policies that are reflective of the needs and vulnerabilities of at-risk adolescents who ask for help. Child intervention staff should have a comprehensive understanding of the ongoing impacts of early childhood trauma.

## Recommendation 2

The Ministry of Children's Services should develop an appeal process designed specifically for adolescents who are denied child intervention services and supports. This process must be timely, fair and easily accessible.

*The Ministry of Children's Services must provide information that demonstrates how these recommendations are being implemented and how outcomes are measured.*

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3 Committee on the Rights of the Child, 2016.

4 Spithoff & Molnar, 2015.

## Guardianship

When applying for legal guardianship, potential caregivers can make an application either through the *Family Law Act* or the *Child, Youth and Family Enhancement Act (Enhancement Act)*. When making an *Enhancement Act* application, the potential guardian must undergo an assessment to determine their ability to meet the child's needs. The assessment and all relevant paperwork is submitted to a Judge before a Guardianship Order is granted.

Jimmy's sister, Candice, applied for guardianship under the *Family Law Act*. When making an application through this Act, the potential guardian fills out an application form and goes before a Judge without assessment.

The *Family Law Act* speaks to the Courts' responsibility to ensure the greatest possible protection of a child's physical, emotional and psychological safety.<sup>5</sup> The paperwork associated with a guardianship application is not reflective of how these needs are assessed and obtaining further information is left to the discretion of the Judge. The application process through the *Family Law Act* is not standardized across the province.

### Recommendation 3

The Ministry of Justice and Solicitor General should ensure that the *Family Law Act* guardianship application forms address how the applicant will fulfill the responsibilities outlined in Section 18 of the *Family Law Act*.

### Recommendation 4

The Ministry of Justice and Solicitor General should ensure that the application process for guardianship under the *Family Law Act* is standardized across the province.

*The Ministry of Justice and Solicitor General must provide information that demonstrates how these recommendations are being implemented and how outcomes are measured.*

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<sup>5</sup> *Family Law Act, SA 2003, c. F-4.5.*

### The Office of the Child and Youth Advocate

Alberta's Child and Youth Advocate (the "Advocate") is an independent officer reporting directly to the Legislature of Alberta. The Advocate derives his authority from the *Child and Youth Advocate Act (CYAA)*.<sup>6</sup>

The role of the Advocate is to represent the rights, interests and viewpoints of children receiving services through the *Child, Youth and Family Enhancement Act*<sup>7</sup> (*Enhancement Act*), the *Protection of Sexually Exploited Children Act*<sup>8</sup> (*PSECA*), or from the youth justice system.

### Investigative Reviews

Section 9(2)(d) of the *CYAA* provides the Advocate with the authority to conduct Investigative Reviews. The Advocate may investigate systemic issues arising from the death of a child who was receiving Child Intervention Services at the time of their death if, in the opinion of the Advocate, the investigation is warranted or in the public interest.

Upon completion of an investigation under this section of the *CYAA*, the Advocate releases a public Investigative Review report. The purpose is to make findings regarding the services that were provided to the young person and make recommendations that may help prevent similar incidents from occurring in the future.

An Investigative Review does not assign legal responsibilities, nor does it replace other processes that may occur, such as investigations or prosecutions under the *Criminal Code of Canada*. The intent of an Investigative Review is not to find fault with specific individuals, but to identify key issues along with meaningful recommendations, which are:

- prepared in such a way that they address systemic issue(s); and,
- specific enough that progress made on recommendations can be evaluated; yet,
- not so prescriptive to direct the practice of Alberta government ministries.

It is expected that ministries will take careful consideration of the recommendations, and plan and manage their implementation along with existing service responsibilities. The Advocate provides an external review and advocates for system improvements that will help enhance the overall safety and well-being of children who are receiving

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6 *Child and Youth Advocate Act, S.A. 2011, c. C-11.5.*

7 *Child, Youth and Family Enhancement Act, RSA 2000, c. C-12.*

8 *Protection of Sexually Exploited Children Act, RSA 2000, c. P-30.3.*



designated services. Fundamentally, an Investigative Review is about learning lessons, and making recommendations that result in systemic improvements for young people, when acted upon.

## About This Review

The Advocate received a report that 15-year-old Jimmy died by suicide. At the time of his passing, he had an open Intake<sup>9</sup> with Child Intervention Services.

Jimmy's child intervention records were thoroughly reviewed by the investigative staff from the Office of the Child and Youth Advocate (the "OCYA"). The Advocate determined that an Investigative Review was warranted and the Ministry of Children's Services<sup>10</sup> was subsequently notified.

Terms of Reference for the review were established and are provided in Appendix 4. A team gathered information and conducted an analysis of Jimmy's circumstances through a review of relevant documentation, interviews and research. The team also met with Jimmy's sister and grandparents.

Although Jimmy died by suicide, this was not explored as a systemic issue for this review. Since 2013, the Advocate has made numerous recommendations regarding suicide by young people that are relevant to Jimmy's circumstance and are referenced in Appendix 3.

A preliminary report was completed and presented to a committee of subject matter experts who provided advice related to findings and recommendations. The list of committee members is provided in Appendix 5. Committee membership included an Indigenous Elder, an academic in the field of resilience, a community service provider to youth and a lawyer.

## About Jimmy and his Family

Jimmy was a kind and helpful young man of Indigenous heritage. He enjoyed skateboarding, mechanics, playing sports and video games. Jimmy was sad at times and did not know why he felt the way he did. He abused alcohol and had suicidal thoughts.

Jimmy was the second youngest of four children.<sup>11</sup> His parents, Emily and Sheldon, had a volatile relationship often characterized by violence. When Jimmy was 13 years old, his parents separated and Jimmy went to stay with relatives. He did not feel that he belonged and frequently moved between family members and shelters.

When Jimmy was 15 years old, his 19-year-old sister, Candice, became his legal guardian.<sup>12</sup>

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9 The initial gathering and analysis of information to determine if a child is in need of intervention. This phase precedes the Safety Assessment.

10 Previously the Ministry of Human Services.

11 See Genogram Appendix 1.

12 Candice applied for guardianship of Jimmy under the *Family Law Act*.

## SUMMARY OF INVOLVEMENT WITH CHILD INTERVENTION SERVICES

### Jimmy from Birth to 9 Years Old

When Jimmy was a young child, he was exposed to domestic violence between his parents. His mother (Emily) was addicted to substances and often left the family. When Jimmy was seven years old, his father (Sheldon) was in a serious car accident. After the accident, Sheldon was quick to anger and abused alcohol and prescription medications.<sup>13</sup> Child Intervention Services had no involvement with Jimmy's family during this time.

### Jimmy from 10 to 11 Years Old

When Jimmy was 10 years old, Child Intervention Services received concerns that his 15-year-old sister, Candice, was hospitalized because she was suicidal.<sup>14</sup> A year later, additional reports were received that Candice was hospitalized again because she was suicidal. In addition, three family members had died by suicide. The Royal Canadian Mounted Police (RCMP) had responded to the home numerous times because of Sheldon's drinking and family violence.<sup>15</sup>

### Jimmy from 12 to 14 Years Old

When Jimmy was 12 years old, Child Intervention Services became involved with his 13-year-old sister, Kristina. It was determined that she was unsafe because of Sheldon's drinking and violence. The children were interviewed and confirmed that there was drinking and violence at home. Kristina was placed with relatives while the three other children remained with their parents. Child intervention involvement ended.

Approximately two weeks later, concerns were received that the children were exposed to chronic alcohol abuse and domestic violence. These incidents often required RCMP involvement. Sheldon was drinking and suicidal; Emily was often sleeping or sick. Candice, who was 17 years old, was apprehended because she had attempted suicide. Approximately two months later, Emily and Sheldon entered into the first of several Family Enhancement Agreements.<sup>16</sup>

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13 It is not known whether a brain injury or addictions contributed to an escalation in Sheldon's behaviours.

14 Child Intervention Services did not become involved with the family.

15 Child Intervention Services did not become involved with the family.

16 A voluntary agreement with Child Intervention Services to provide supports, and intended to address protection concerns, while the child remains with their guardian or lives independently. The Agreement can be with a guardian or a young person between the ages of 16 and 18 years. Prior to the *Enhancement Act*, this was referred to as a Support Agreement.

Jimmy and his family went to counseling. The therapist tried to help Emily and Sheldon improve their relationship with Jimmy because he said that he felt unwanted and unloved. They expressed frustration that he did not respond when they tried to connect with him. Professionals told caseworkers that Jimmy and his family needed intensive in-home supports.<sup>17</sup>

Child Intervention Services continued to receive reports about Sheldon's drinking. Jimmy and Candice (who had returned home) were arrested after stealing the family car and Jimmy was found with a knife, BB gun, drugs and a homemade hash pipe. The family was dealing with several losses of family members to disease and suicide. Approximately two months later, child intervention involvement ended. It was noted that the parents had learned to control their children's behaviours and the family did not require further services.

Within six months, concerns were received about Sheldon's drinking. Shortly after, Candice moved to a shelter because of the drinking and violence at home. She returned home and child intervention involvement ended. During this time, Jimmy's mother (Emily) moved out of the home.

Approximately one month later, 13-year-old Jimmy left to live with relatives. Over the next two years, he moved between relative's homes in his community and in the city; sometimes being asked to leave and sometimes leaving because he felt unwanted. Jimmy was not considered homeless because he could stay with relatives, but often left. He had no adult guidance, no stable routine, nor did he attend school regularly. When Jimmy was 14 years old, his 10-year-old brother, Josh, was taken into care because of parental substance abuse and neglect.<sup>18</sup>

## Jimmy at 15 Years Old

Approximately four months after Jimmy's 15th birthday, 19-year-old Candice applied for legal guardianship of him under the *Family Law Act*. The court heard that Jimmy had not had a routine or a stable home for several years. Although Candice did not know how she would take care of him, she was granted guardianship.

That same month, Jimmy left his First Nation to stay at a shelter. He told staff that he was not allowed to stay with Candice because she was living with their father (Sheldon), who did not want him there, so he had been staying with other relatives. He left there because he felt unwanted.

Approximately two months later, an Intake was opened when Jimmy contacted Child Intervention Services on his First Nation because he was homeless. He said that although Candice was his guardian, he did not think that she could take care of him. He had been staying with his relatives but was not sure how long he could remain.

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<sup>17</sup> Documentation does not indicate that intensive in-home supports were provided.

<sup>18</sup> Jimmy was not identified as a child in need because he was not living in the home.

Approximately two weeks later, Jimmy went to a city shelter. While there, he asked Child Intervention Services for help because he was homeless. An Intake<sup>19</sup> was opened and caseworkers took Jimmy back to his First Nation to look for relatives whom he could stay with. Jimmy returned to the shelter early the next morning and said that there was nobody who could take care of him. Meanwhile, Candice had called the police and reported Jimmy missing. The police went to the shelter, but were unable to transport him back to his First Nation. Candice arranged for Jimmy to stay with relatives in the city until she could pick him up.

Five days later, Jimmy was arrested for shoplifting. Caseworkers paid for a taxi to take him to a shelter. When he arrived, Jimmy told staff that his father had kicked him out after a fight and he had been staying with a cousin. The following day, child intervention involvement on both his First Nation and in the city ended because it was believed that there was a duplication in service. Documentation indicated that Jimmy was voluntarily leaving his relatives and not abiding by house rules.

Approximately one week later, Jimmy returned to the shelter and said that Child Intervention Services was not helping him. Shelter staff called Candice who was frustrated because the police did not transport Jimmy back to his First Nation. The police arrived at the shelter and asked Jimmy if he wanted to return and he declined. Jimmy said that Candice lived with their father, whom he did not get along with. He said that his father's house was messy, damaged and that he felt he was a burden on his family. Jimmy called child intervention and left a message requesting a call back. It is not known if he received a response.

Approximately two months later, Child Intervention Services received a report that Jimmy had been arrested. He was intoxicated and found with an air gun and machete; he wanted to be in a gang and had planned a robbery. It was believed that Jimmy and his family needed help. Caseworkers met with Candice and discussed her responsibilities as Jimmy's legal guardian. Candice relayed that Jimmy was drinking heavily and that she would access supports. Child intervention involvement ended before it was confirmed that Candice had accessed supports.

The following day, Candice arranged to go to a city shelter with Jimmy because they had nowhere else to go. Candice told shelter staff that her brother was suicidal. Mental health workers met with Jimmy, but he was not open to services.

During their time at the shelter, staff helped Candice to define her role as Jimmy's parent. They helped her develop structure and implement routines for him. After a month in the shelter, Candice and Jimmy were provided with assistance to find housing. After they moved to their apartment, outreach workers were unable to connect with them.

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<sup>19</sup> Child Intervention Services had an open Intake regarding Jimmy in his First Nation as well as in the city.

## Circumstances Surrounding Jimmy's Death

About two weeks after their move, Child Intervention Services received concerns that Jimmy was drinking and violent. A caseworker asked Candice and Jimmy to come to the office, but they did not go.

A day after the missed meeting, Child Intervention Services received concerns that Jimmy was angry and suicidal. He had been drinking, was upset and would not come out of his room. Candice was concerned that he might hurt himself and had been checking on him regularly. A caseworker asked police to respond to Candice's home. When police arrived, they found that Jimmy had died by suicide.

Although “Suicide Prevention” was not identified as a systemic issue for this Investigative Review, the Advocate has made numerous recommendations in previous reports related to suicide that are relevant to Jimmy’s circumstance (See Appendix 3).

The Terms of Reference for this review identified two systemic issues:

### 1. Providing supports to youth in need

### 2. Jurisdictional responsibilities

These two issues will be discussed together under:

- Providing Child Intervention Services to At-Risk Adolescents

An additional systemic issue was also identified through the Investigative Review process:

- Guardianship

## Providing Child Intervention Services to At-Risk Adolescents

Jimmy was exposed to domestic violence and was the victim of physical and emotional abuse because of his parents’ addictions and mental health concerns. His mother was often unresponsive to her children’s needs and his father threatened the family with violence. By the time Jimmy was 12 years old, he had witnessed his siblings’ suicide attempts and had lost several family members to suicide. His parents separated and both of his sisters were removed from the home by Child Intervention Services.

Research indicates that a child’s brain continuously monitors their environment to determine whether they are safe and feel a sense of belonging.<sup>20</sup> If a caregiver ignores a child’s needs, that child learns to anticipate rejection.<sup>21</sup> If frequent feedback is received that they are unsafe and do not belong, or if there is a persistent feeling of threat, that child is unable to remain calm. This makes reflection, learning, planning and creative problem-solving more difficult. As these children move to adolescence, they are more likely to engage in unhealthy activities and more likely to abuse alcohol and/or drugs.<sup>22</sup>

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<sup>20</sup> Supin, 2016.

<sup>21</sup> Van Der Kolk, 2014.

<sup>22</sup> Supin, 2016.

Jimmy dealt with stressful situations by sleeping, playing video games and skateboarding. As he reached adolescence, he abused substances. He had suicidal ideations and had trouble staying with relatives because he believed he did not belong.

When children are exposed to abuse, violence or neglect, they produce high levels of Cortisol.<sup>23</sup> Too much Cortisol is toxic and can result in the child having trouble focusing and/or having difficulty managing inappropriate behaviours. Children who produce too much Cortisol can have poor emotional regulation and may misinterpret others' emotions and respond accordingly. If trauma and abuse goes unaddressed, these reactions continue.<sup>24</sup> Child Intervention Services recognizes that ongoing exposure to domestic violence, addictions, rejection and neglect is emotional abuse. There are provisions within the *Child, Youth and Family Enhancement Act* to provide intervention services solely based on emotional injury.

Jimmy was emotionally injured because of his early adverse childhood experiences. When he was 15 years old, Jimmy sought help from Child Intervention Services four times because he was homeless. There was an emphasis on his choice to use substances and not stay with relatives. Caseworkers and family believed that Jimmy had the option to live with relatives but chose not to. It does not appear that consideration was given to the impact his traumatic childhood had on him. The responsibility to realize the fundamental rights afforded to him under the United Nations Convention on the Rights of the Child (UNCRC),<sup>25</sup> such as housing, was left up to 15-year-old Jimmy. The focus was on his presenting behaviours which influenced decision-making.

While dealing with the effects of trauma, Jimmy faced many barriers when he asked for help. His circumstances and the difficulties he encountered highlight the challenges that many young people face when they ask for help. Their presenting behaviours are often the focus and their age is frequently misinterpreted as a protective factor. The responsibility to prove that there is a need for intervention appears to shift to the young person. This is contrary to the rights afforded to young people under Articles 20 and 26 of the UNCRC that states young people have the right to receive help if they cannot live with their parents and if they are in need. It is recognized in the UNCRC's General Comments<sup>26</sup> that adolescents have unique rights. These rights are realized through using an approach that builds on an adolescent's strengths and recognizes the contributions they can make, while eliminating conditions that result in discrimination.<sup>27</sup>

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23 Cortisol is a steroid hormone which regulates a wide range of processes throughout the body including metabolism and the immune response. It also has a very important role in helping the body respond to stress.

24 Benoit, 2017.

25 United Nations, 1989.

26 Committee on the Rights of the Child, 2016.

27 Committee on the Rights of the Child, 2016.

Child intervention caseworkers should be aware of the underlying and unaddressed impact that abuse, violence and neglect have when assessing a youth's presenting concerns. Hearing the voice of a young person, a right under Article 12 of the UNCRC,<sup>28</sup> requires safe and trusting environments for them to be seen and speak freely.<sup>29</sup> When at-risk adolescents ask Child Intervention Services for help, their vulnerabilities must be recognized. It is critical that their histories of abuse and neglect are considered and that caseworkers look beyond their presenting behaviours and shift the focus from "what is wrong with you?" to "what happened to you?"<sup>30</sup>

There is an abundance of research that indicates that children are vulnerable at different times before they reach adulthood.<sup>31</sup> In adolescence, young people become more vulnerable because their brains are not fully developed, yet they are held accountable to make complex decisions. Some child intervention jurisdictions in Alberta recognize that children under six years old are vulnerable and have specific policies regarding this age group.<sup>32</sup> There are no provincial child intervention policies that recognize the vulnerabilities of at-risk adolescents, despite research indicating that infants and adolescents stand out as being at particular risk of harm because of their rapidly changing brains during each developmental stage.<sup>33</sup>

## Recommendation 1

The Ministry of Children's Services should create provincial policies that are reflective of the needs and vulnerabilities of at-risk adolescents who ask for help. Child intervention staff should have a comprehensive understanding of the ongoing impacts of early childhood trauma.

The Office of the Child and Youth Advocate has seen a marked increase in the number of adolescents like Jimmy, who have asked Child Intervention Services for help and have been denied. Some community organizations have indicated that young people whom they work with have been denied services so often, they have simply stopped asking. There is recognition that this vulnerable group of young people need an avenue for appeal to ensure that their voices are heard in a timely manner.

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28 United Nations, 1989.

29 Sidebotham, et al. 2016.

30 Spithoff & Molnar, 2015.

31 North Carolina Division of Social Services and the Family and Children's Resource Program, 2012.

32 When a report is received where there are children living in the home under six years old, manager approval is required before involvement can end.

33 North Carolina Division of Social Services and the Family and Children's Resource Program, 2012.



## Recommendation 2

The Ministry of Children's Services should develop an appeal process designed specifically for adolescents who are denied child intervention services and supports. This process must be timely, fair and easily accessible.

*The Ministry of Children's Services must provide information that demonstrates how these recommendations are being implemented and how outcomes are measured.*

### Guardianship

Guardians are responsible for providing the basic necessities of life and ensuring that they can meet the emotional, spiritual and physical needs of the young person of whom they have guardianship. Candice was 19 years old when she obtained legal guardianship of 15-year-old Jimmy. They grew up in the same chaotic home and she felt an obligation to look out for her younger brother and give him a place to belong.<sup>34</sup>

When applying for guardianship, potential guardians can make an application either through the *Family Law Act* or the *Child, Youth and Family Enhancement Act (Enhancement Act)*. When making an *Enhancement Act* application, the potential guardian must undergo an assessment to determine their ability to meet the child's needs. This includes the guardian's child intervention history and criminal record. The assessment and all relevant paperwork are submitted to a Judge before a Guardianship Order is granted.

Candice applied for guardianship under the *Family Law Act*. When making an application under this Act, the potential guardian fills out an application form and goes before a Judge. There is no requirement to submit a Criminal Record check or a Child Intervention Services check. The process of who reviews the form is not consistent across the province. In some areas, applicants must go through the Family Justice Services office. Workers, at these sites, ask questions related to the applicant's criminal history and child intervention involvement. The jurisdiction where Candice applied did not have this process in place. Although the Judge acknowledged that Jimmy would be a hard youth to parent, the Guardianship Order was granted. At the time, Candice did not have a stable home nor an understanding of how she would provide for him.<sup>35</sup> Candice had experienced significant trauma during her childhood and by the time she was 17 years old, she had been confined three times for suicidal ideations. She deeply loved her brother and wanted to provide him stability. Although Candice received some financial supports, she required more than money to adequately take care of Jimmy.

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<sup>34</sup> Information gathered through the Investigative Review process.

<sup>35</sup> Information gathered through the Investigative Review process.

Section 18 of the *Family Law Act* speaks to the Courts' responsibility to ensure the greatest possible protection of a child's physical, emotional and psychological safety.<sup>36</sup> The paperwork associated with a guardianship application is not reflective of how these needs are assessed or addressed and obtaining further information is left to the discretion of the Judge.

### **Recommendation 3**

The Ministry of Justice and Solicitor General should ensure that the *Family Law Act* guardianship application forms address how the applicant will fulfill the responsibilities outlined in Section 18 of the *Family Law Act*.

*The Ministry of Justice and Solicitor General must provide information that demonstrates how these recommendations are being implemented and how outcomes are measured.*

### **Recommendation 4**

The Ministry of Justice and Solicitor General should ensure that the application process for guardianship under the *Family Law Act* is standardized across the province.

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<sup>36</sup> *Family Law Act*, SA 2003, c. F-4.5.

## CLOSING REMARKS FROM THE ADVOCATE

I want to thank all of those who spoke with us and shared their insight into Jimmy's life. My sincerest condolences are extended to Candice and everyone who loved Jimmy. He was fortunate to have Candice. She loved him unconditionally and did what she could to take care of him.

Jimmy was only 13 years old when he left home because he did not feel safe. His exposure to domestic violence and his parents' substance abuse and mental health concerns had a significant impact on him. He tried to meet his own needs, as best as he could, and reached out for help from Child Intervention Services when he saw no other options. The assistance he received did not meet his needs; there were expectations that he could cope without acknowledgement of the impact that trauma had on him.

When adolescents, like Jimmy, ask for help, they need to be seen and heard and their vulnerabilities have to be acknowledged. They must be understood in the context of their life experiences and not by their presenting behaviours. I urge the Government of Alberta to implement my recommendations so that young people get the help they need when they need it.

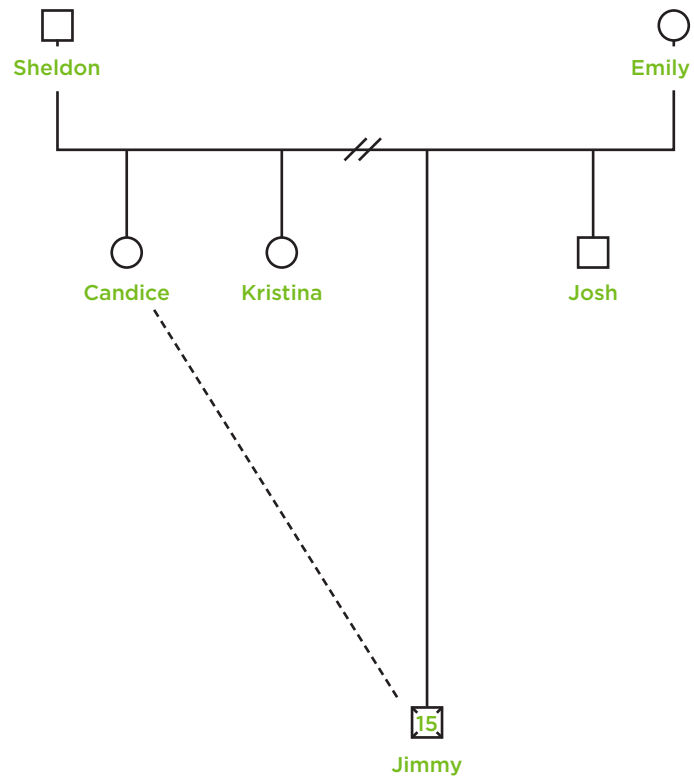
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**Del Graff**

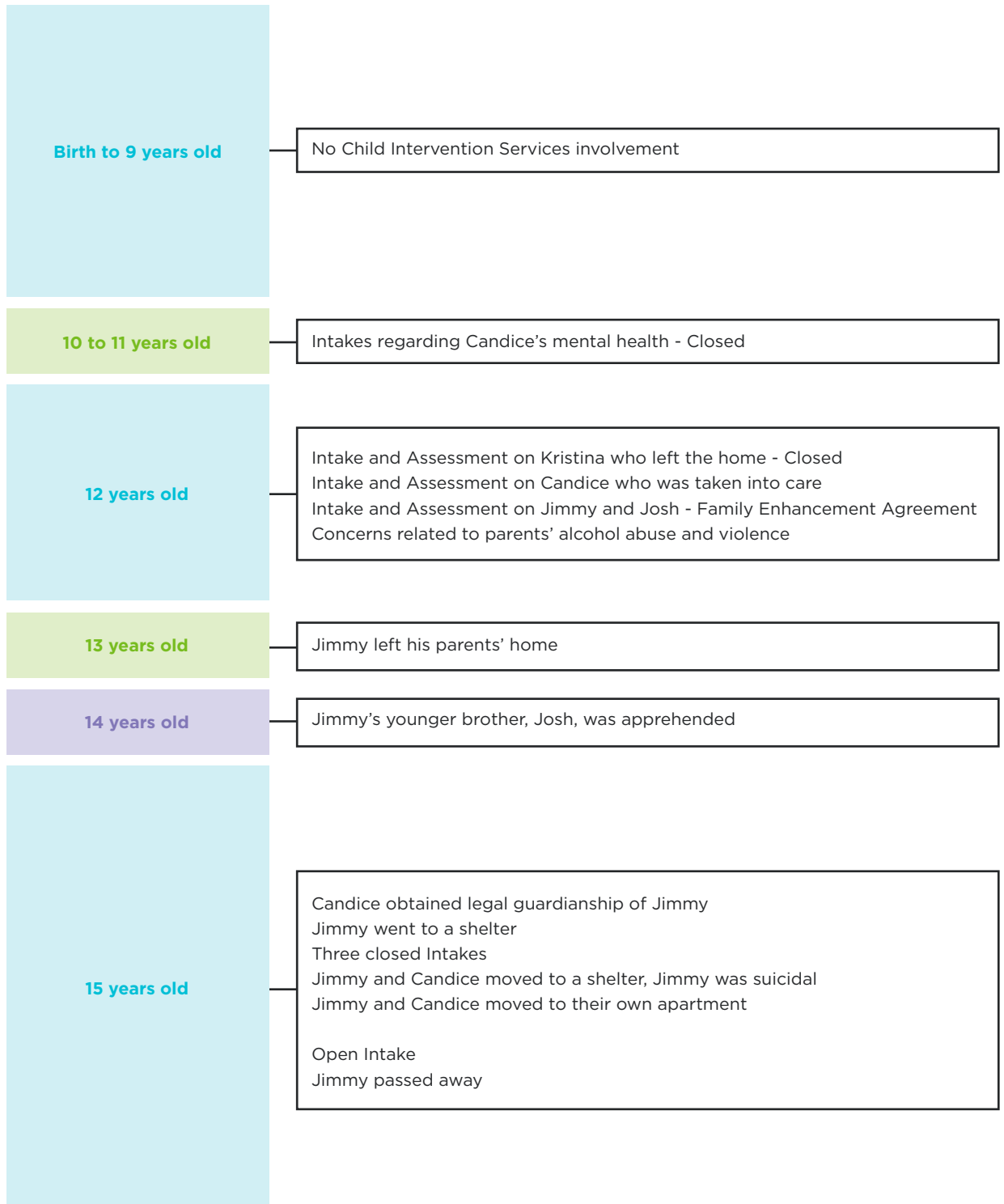
Child and Youth Advocate

# APPENDICES

## APPENDIX 1: GENOGRAM



## APPENDIX 2: TIMELINE



## APPENDIX 3: PREVIOUS INVESTIGATIVE REVIEW RECOMMENDATIONS ON SUICIDE RELEVANT TO JIMMY<sup>37</sup>

### *Toward a Better Tomorrow: Addressing the Challenge of Aboriginal Youth Suicide: Investigative Review (April 2016)*

1. The Government of Alberta should have a provincially funded suicide prevention strategy that supports the development and implementation of community-led strategies across the province. The strategy needs the capacity to adjust to accommodate the interests and needs of particularly vulnerable groups at elevated risk for suicide.
2. Strategies to prevent Aboriginal youth suicide must be developed within the context, and in recognition of, the traditional values and cultural practices relevant to Aboriginal youth in the community.
3. The Government of Alberta should act on ways to improve provincial services and systems to support holistic community-led strategies to address Aboriginal youth suicide. For example, the government should consider:
  - Can these services and systems be used or leveraged to help reduce risk factors among Aboriginal youth and their families?
  - Does the current operation of these services and systems present any barriers that make it difficult to access assistance for at-risk Aboriginal youth?
  - How might these services and systems be inadvertently contributing to risk factors among at-risk Aboriginal youth and their families?
4. Alberta Human Services, with their service delivery partners, should ensure that supports are available to Aboriginal young people who have lost someone significant to suicide and that those services are deliberate and proactive.
5. Child Intervention Services should review case practice to ensure that intervention is focused on the child's needs. The impact on a child exposed to domestic violence, parental substance abuse and other forms of abuse must be addressed early in conjunction with their caregivers' treatment plans.
6. The Ministry of Human Services, with its service delivery partners, should ensure that case practice reflects a strength-based approach that focuses on the attachment needs of children while ensuring that their risk for harm is addressed.
7. Alberta Education should develop and implement school-based suicide prevention programs. Consideration should be given to developing a peer support component.
8. Alberta Mental Health Services should ensure that cultural components are incorporated in treatment strategies for young people.

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<sup>37</sup> The Advocate regularly reports on the progress of recommendations at:  
<http://www.ocya.alberta.ca/adult/publications/recommendations/>

The Ministry of Human Services also publicly responds to recommendations at:  
<http://www.humanservices.alberta.ca/publications/15896.html>

9. The Government of Alberta should ensure that mental health programs are more accessible, holistic and readily available in First Nations communities.
10. The Ministries of Human Services, Education and Health, along with their service delivery partners, should require that professionals working with Aboriginal young people have enhanced suicide intervention training.
11. The Ministries of Human Services, Education and Health, along with their service delivery partners, should require that professionals working with Aboriginal Peoples have adequate training regarding the pre and post-colonial history specific to Aboriginal Peoples so that they have a good understanding of the potential risks, strengths and needs within Aboriginal families.
12. Alberta Human Services should review the Delegation Training for Suicide Intervention Skills and ensure that it contains information about the need for culturally-relevant resources and how caseworkers can access those resources.
13. The Government of Alberta should support increased levels of self-determination of First Nations in Alberta through reconciliation processes in partnership with First Nations, federal and provincial governments. Consideration should be given to greater levels of self-determination balanced with support as a protective factor for suicide prevention.

**As of August 2017, the Ministry of Children’s Services has not responded to any of the recommendations from “Toward a Better Tomorrow.”**

*16-Year-Old Sam: Serious Injury, Investigative Review (May 2015)*

14. The Ministry of Human Services should provide caregivers and caseworkers with the skills they require to engage with suicidal youth on an on-going regular basis and encourage young people to develop, identify and practice positive coping skills.

**The Ministry of Children’s Services responded to this recommendation and there has been ongoing progress made with the Policy to Practice session. However, further information is required to indicate that caregivers and caseworkers are engaging with suicidal youth to develop positive coping skills.**

*15-Year-Old Tony: Investigative Review (November 2014)*

15. The Ministry of Human Services, with its service delivery partners, should require a suicide risk inventory be completed for all young people, who have been identified as at risk of suicide, on a regular and on-going basis – not just at the time of crisis.

**The Ministry of Children’s Services responded to this recommendation. The Ministry has provided further information indicating that a Policy to Practice session on suicide was delivered to caseworkers on May 18, 2016, which indicates further progress with this recommendation. This recommendation specifically identifies the need to complete risk inventory on a regular and ongoing basis and the Ministry’s response does not address this.**

## APPENDIX 4: TERMS OF REFERENCE

### Authority

Alberta's Child and Youth Advocate (the "Advocate") is an independent officer reporting directly to the Legislature of Alberta. The Advocate derives his authority from the *Child and Youth Advocate Act (CYAA)*. The role of the Advocate is to represent the rights, interests and viewpoints of children receiving services through the *Child, Youth and Family Enhancement Act*, the *Protection of Sexually Exploited Children Act* or from the youth justice system.

The CYAA provides the Advocate with the authority to conduct Investigative Reviews. The Advocate may investigate systemic issues arising from the death of a young person who was receiving child intervention services at the time of their death, in the opinion of the Advocate, the investigation is warranted or in the public interest.

### Incident Description

The Advocate learned that 15-year-old Jimmy died by suicide. Child Intervention Services had an open Intake at the time of his passing.

The decision to conduct an investigation was made by Del Graff, Child and Youth Advocate.

### Objectives of the Investigative Review

To review and examine service and supports provided to Jimmy and his family specifically related to:

- Providing supports to youth in need
- Jurisdictional responsibilities

### Scope/Limitations

An Investigative Review does not assign legal responsibilities, nor does it replace other processes that may occur, such as investigations or prosecutions under the *Criminal Code of Canada*. The intent of an Investigative Review is not to find fault with specific individuals, but to identify and advocate for system improvements that will enhance the overall safety and well-being of children who are receiving designated services.



## Methodology

The investigative process will include:

- Examination of critical issues
- Review of documentation and reports
- Review of policy and casework practice
- Personal interviews
- Consultation with experts
- Other factors that may arise for consideration

## Investigative Review Committee

The membership of the committee will be determined by the Advocate and the OCYA Director of Investigations. The purpose of convening this committee is to review the preliminary Investigative Review report and to provide advice regarding findings and recommendations.

Chair: Del Graff, Child and Youth Advocate

Members: To be determined but may include:

- An Elder
- An expert in the area of service provision to youth
- A specialist in the area of child intervention best practice

## Reporting Requirement

The Child and Youth Advocate will release a report when the Investigative Review is complete.

## APPENDIX 5: COMMITTEE MEMBERSHIP

### Del Graff, MSW, RSW (Committee Chair)

Mr. Graff is the Child and Youth Advocate for the Province of Alberta. He has worked in a variety of social work, supervisory and management capacities in communities in British Columbia and Alberta. He brings experience in residential care, family support, child welfare, youth and family services, community development, addictions treatment and prevention services. He has demonstrated leadership in moving forward organizational development initiatives to improve service results for children, youth and families.

### Elder Gertrude SpearChief

Elder SpearChief is a member of the Blood Tribe and an Elder for the Blackfoot Language program which is delivered to youth in foster care in southern Alberta. She has worked with Child Intervention Services and other organizations teaching language and parenting.

### Dr. Andre Grace, Ph.D

Dr. Grace is Canada Research Chair in Sexual and Gender Minority Studies (Tier 1) in the Faculty of Education at the University of Alberta. His latest book, *Growing into Resilience: Sexual and Gender Minority Youth in Canada* presents his resilience typology, providing a synopsis of research on resilience. The book examines developing knowledge about stressors, risk taking, asset building and indicators of thriving using an ecological framework that surveys complexities impacting how vulnerable youth across differences grow into resilience.

### Kate Hawksworth

Ms. Hawksworth is the Team Lead of Social Supports for Youth, Family and Mobile Services at The Alex Community Health Centre. She has created a program for youth that harnesses street art as a tool for life change. At the Alex she works to create out of the box programming that keeps youth out of jail, in school and at home with parents. She brings a deep understanding of how small changes and adjustments in big systems can reduce systemic barriers to health and community connection for the youth and families of the Alex Youth Health Centre.

## William Hogle, Q.C.

With a background in social work, Mr. Hogle became a lawyer in 1990. He has a special interest in representing young people and is often retained to deal with challenging matters. Mr. Hogle is a mediator and investigates human rights complaints in a post-secondary academic setting. He is familiar with Indigenous issues, having been legal counsel for a Delegated First Nation Authority and a negotiator for First Nations' boards. Mr. Hogle is involved with the Canadian Bar Association and the Legal Education Society of Alberta. He currently sits on the Family Violence Death Review and Family Advisory Court Team committees and was appointed Queen's Counsel in 2010.

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**15-YEAR-OLD JIMMY**  
AN INVESTIGATIVE REVIEW



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