16TH LEGISLATIVE ASSEMBLY
OF THE NORTHWEST TERRITORIES

STANDING COMMITTEE ON
SOCIAL PROGRAMS

REPORT ON
THE REVIEW OF
THE CHILD
AND FAMILY
SERVICES ACT

BUILDING STRONGER FAMILIES

OCTOBER, 2010
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Mr. Speaker:

Your Standing Committee on Social Programs is pleased to provide its Report on the Review of the Child and Family Services Act – Building Stronger Families and commends it to the House.

Tom Beaulieu, MLA
Chairperson
REPORT ON THE REVIEW OF THE CHILD AND FAMILY SERVICES ACT

Building Stronger Families

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OVERVIEW: THE WAY FORWARD

The grim legacy of residential schools continues under the current Child and Family Services system. From Fort Liard to Ulukhaktok, members of the Standing Committee on Social Programs heard these sentiments hundreds of times. Families lose their children instead of getting help to cope; children are sent away to distant foster parents instead of to the homes of extended family. Alcohol and other addictions ravage families and communities but there are few practical avenues for treatment, and little or no local support for those who do strive to break free.

The stories are all too real. Families across the Northwest Territories have suffered incredible tragedy and heartbreak in the past 80 years. First, severe flu epidemics took a terrible toll. Then, as families struggled to rebuild and recover, their children were taken away and sent to residential schools, often hundreds of kilometres away, with no way to get there but dog team. Communities emptied of young children were left to mourn; the children grew up without parents, missing the love and knowledge they deserved. This devastating practice went on for decades. The effects, spanning four generations, are still being felt today.

Testimony from our communities is supported by the shocking fact that more than 90% of child welfare cases involve aboriginal children. The causes are rooted in a long history of discrimination, assimilation, trauma and cultural loss in residential schools, social inequality and poverty, poor housing, and the lack of focus on prevention and support for families in need by child welfare services.

Community input is also consistent with the evidence of professionals in the field, which shows that many parents involved in child welfare cases are victims themselves. A comprehensive 2003 study found that in 88% of cases, the female caregiver suffered from a physical, emotional, cognitive or behavioural issue, and was the victim of domestic abuse 73% of the time. In 38% of cases, the female caregiver disclosed that she was herself maltreated as a child, as did 23% of the men. The male parent in child welfare cases is a perpetrator of domestic violence in 41% of cases. Alcohol and drug abuse are prevalent among both parents.

But that is not the end of the story. In its review of the Child and Family Services Act, the Committee heard that changes must be made both to the legislation and to the way it is delivered. Many objectives of the Act are simply not being met. However, Members also heard that there is hope; that the communities want to take responsibility for their children; that a new relationship can be built with the Department of Health and Social Services. It is in this spirit that the Committee offers its recommendations for change. In fact, Committee members believe change is already underway. In the interest of building stronger families, the Minister of Health and Social Services assigned Child and Family Services’ staff to tour the communities with us to hear directly from the people.

The Committee came away from the tour with great confidence in local leadership and the communities’ ability to play a key role in improving the child welfare system.
We were given a great deal of excellent advice, and there is more of it in the pages that follow. Here are the essential recommendations, from which the rest flow:

1) Focus on prevention and early intervention, helping families stay together and heal; including expansion of the Healthy Families Program into every community;

2) Take the least intrusive measures possible to deliver child welfare services, with increased emphasis on collaborative processes to solve family problems;

3) Set up and fund Child and Family Services Committees in every community, as set out in the Act; providing resources to communities taking more responsibility for child welfare;

4) Provide alcohol and drug treatment, readily accessible and convenient to all communities;

5) Extend Child and Family Services to youth aged 16-19, with provisions to assist young adults to age 23;

6) Improve the administration of Child and Family Services by updating procedures, with particular emphasis on increasing extended family placements, custom adoptions, and community-based solutions;

7) Develop a comprehensive Anti-Poverty Strategy that includes coordinating the work and policies of the departments of Health & Social Services; Education, Culture & Employment; Justice; and the NWT Housing Corporation in areas related to child welfare, such as social assistance, legal aid, and housing;

8) Develop a strategic plan at the Department of Health and Social Services, incorporating the recommendations of this report, starting with a response to this report within 120 days.

Prevention and early intervention have traditionally been given low priority by the Department of Health and Social Services, but some positive steps have been taken in recent years to support families needing help. The Healthy Families Program is available to families, beginning with pregnancy and extending to children up to age five. The program features home visits to promote positive parenting, healthy childhood growth, and parent-child bonding as well as referrals to other community services. This is an excellent example of the direction Child and Family Services should take. Unfortunately, the Healthy Families Program is only running in four large communities. The program is under-resourced and must be expanded and available in all communities.

Only the community of Fort McPherson has ever had a local Child and Family Services Committee, although provisions for them were made in the Act in 1998. By setting up these committees, the department can rebuild its relationship with the communities, put local knowledge to good use, and shift its focus to prevention and early intervention with troubled families. Extended families will be more likely to be involved in solutions to family problems; some communities will likely work to restore the traditional role of elders. To be effective, Child and Family Services Committees must be properly funded and supported.
Current practice has focused much of Child and Family Services’ work on families embroiled in crisis, and on the legal steps necessary when children enter custody of some kind. Far too often, apprehension becomes a permanent “solution,” removing the child from his or her family and community. More than a third of the 600 children receiving child welfare services in the Northwest Territories are in permanent custody. Adjusted for our population, we place more children in out-of-home care than any jurisdiction in Canada. This can, and must change. Less intrusive measures can keep more families together, and keep more children in their home communities.

Time and again, the Committee was told that child neglect and maltreatment are rooted in alcohol and drug abuse. When children are removed from a family, it is common for the Plan of Care Agreement to require parents to complete an alcohol or drug treatment program. It is almost a guarantee of failure. Treatment often involves significant waiting times for centres that are far from home – and those who do succeed find little organized support for continued sobriety once they return home. In addition, the disparity of service and support is too great between large and small communities. This too must change.

It is well known that the years of young adulthood can be among the most challenging of our lives. Young people in the child welfare system, from age 16 to 19 are disadvantaged in our current system – to the point that their human rights are compromised. The gap in services for this age group was first raised in 1977, and remains to this day. In this instance, the Act must be changed to require the Director of Child and Family Services to offer the same services to young adults as children receive, and further, to extend the Director’s parental responsibility for permanent wards to age 23.

There are other barriers affecting children and families, falling under the departments of Education, Culture and Employment, Justice, and the NWT Housing Corporation. Many of these barriers can be reduced with coordinated action guided by a comprehensive Anti-Poverty Strategy. It is important that social assistance augments Child and Family Services’ work; that families facing court hearings have good access to Legal Aid; that a family temporarily losing custody of children has a home to live in when they are reunited. An alarming proportion of child welfare cases arise among tenants of public housing – telling us that we need to look at the circumstances and supports available to families in public housing. The Committee heard about problems in all these areas, and they must be solved.

The hard truth is that many problems with our child welfare system are decades old, and we have not done enough to address them, or their causes. A review by the Child Welfare League of Canada in 2000 is still instructive today: too little was being done to help families, through prevention and early intervention; families were forgotten after children were removed; staff caseloads were too high; there were problems with recruitment and training; and there was a lack of aboriginal staff, especially in management.

That said, without the amazing dedication and good-heartedness of many individual social workers and foster parents, our system would be far worse. These people regularly go beyond the call of duty, and find ways to help children and families. This group of people will be invaluable in improving child welfare in the future. In a small system like ours, even a handful of people can make a huge difference.

Most of the changes we advise can be made, or started, immediately. That is the recommendation of the Committee. We also recognize that some of our most important recommendations will require investment. The Committee believes very strongly that the future of NWT children and families warrants this investment. Services to protect and build strong families will benefit our children and our
communities. As legislators, we must set priorities to see this through. That is what our constituents want and expect.

We thank everyone who assisted us in this review. Thank you to all those who attended the community hearings, who shared their stories and experiences, to those who made written submissions, to the Department of Child and Family Services staff who worked with us, and to all those who enabled our work. It is now our aim, and our duty, to begin making the changes required to build stronger families and communities. The people of the NWT deserve nothing less.

Masi cho,

Tom Beaulieu, Chairman, Standing Committee on Social Programs, MLA, Tu Nedhe

Glen Abernethy, Deputy Chairman, MLA Great Slave

Wendy Bisaro, MLA, Frame Lake

Bob Bromley, MLA, Weledeh

David Krutko, MLA, Mackenzie Delta
THE REVIEW

INTRODUCTION

The Standing Committee on Social Programs was directed to review the Child and Family Services Act by a motion of the 16th Legislative Assembly, adopted on June 3, 2009. Members of the Assembly and their constituents had voiced repeated concerns about child protection, apprehension, the discretionary powers of child protection workers, and the general oversight of child protection services by the Department of Health and Social Services.

The Standing Committee returned in October 2009 with additional terms of reference which were also adopted by motion of the Assembly. The Standing Committee then developed a review process to assist them in their undertaking. A description of activities is listed below.

ACTIVITIES

LITERATURE REVIEW

The recommendations of the Committee and the contents of this report are based on extensive research and the review of available literature. During the review, the Standing Committee on Social Programs was exposed to the most current information on child welfare theory, policy, practice and legislation. The review involved an in-depth look at child welfare legislation across Canada, relevant reports, such as both the Canadian and NWT incidence studies on child abuse and neglect, statistical information from the NWT Department of Health and Social Services, child welfare case law, scientific and academic studies.

ALBERTA FIELD TRIP

From November 30 to December 2, 2009, Committee members travelled to Edmonton, Alberta to view the services and operations Alberta provides for children and youth. As part of the collaborative process adopted for this review, the Committee invited the Assistant Deputy Minister of Health and Social Services and the Manager of Child and Family Services. The delegation met with the following organizations, departments and agencies:

- Ministry of Children and Youth – Children’s Services
- Ministry of Children and Youth – FASD Staff
- Ministry of Children and Youth – Youth Strategies
- Acting Director, Child, Youth and Family Enhancement Act
- Alberta Child and Youth Advocate
- Region 6 – Edmonton and Area Child and Family Services Authority
• Alberta Centre for Child, Family, and Community Research
• Executive Directors of the Family Centre and Terra Centre
• Yellowhead Tribal Services Agency

The Committee and its guests enjoyed remarkable hospitality, support and participation from our Alberta neighbours. The success of these meetings and information sessions was certainly made possible by both the NWT Minister of Health and Social Services, and the Alberta Minister of Child and Youth Services. All parties found the meetings extremely informative, providing an excellent context with which to review and learn more about NWT processes and operations.

DEPARTMENTAL BRIEFINGS

The Department of Health and Social Services provided a special, in-depth briefing for Committee members on the operations and services provided in the NWT. This day-long briefing took place in January, 2010. Senior management, departmental staff and front line workers from large and small communities attended. The department had prepared presentations in the following areas:

• Process and Practice of Child Protection
• Coordinated Paediatric Services
• Traditional Family Projects in the Tlicho region
• Mental Health and Addictions Services in the NWT
• Adoption Services
• Healthy Families Program

The Committee appreciated the frank and open discussion during this meeting. The insight proved invaluable as the review progressed. The Department of Health and Social Services also cooperated fully throughout the review.

INTERVIEWS

Committee members felt it was important to hear from both current and past clients of the child welfare system, from families, teens and young adults throughout the NWT. To protect the privacy of these individuals, a third party was hired to do approximately 50 confidential interviews. The resulting report focused on the experiences of both families and young adults who are, or have been, involved with Child and Family Services, with a particular emphasis on the implementation of the legislation. Fifty-seven people were interviewed, the majority of whom were First Nations, Inuit and Metis. To ensure regional representation, more than half of the participants lived in communities outside of Yellowknife. The results of this survey are included in a report entitled Review of the Child and Family Services Act in the Northwest Territories for Standing Committee on Social Programs, Survey Findings, by Betty Daley and Heather Nyamazana. This report can be found on the Assembly website, www.assembly.gov.nt.ca.
FACILITATED STAKEHOLDER MEETINGS

The Committee wanted to meet with stakeholder groups in a way that would allow frank and open discussion. For this reason, separate meetings took place in January and February, 2010, with social workers, aboriginal organizations, non-governmental organizations, territorial treatment centres and family law practitioners. These meetings were facilitated by independent third party. A report was prepared outlining the format of each meeting, and containing a summary of the discussions. The report is entitled *Review of the Child and Family Services Act, Summaries of Five Focus Groups held in Yellowknife, NWT,* was prepared by Terriplan Consultants and can be found on the Assembly website, [www.assembly.gov.nt.ca](http://www.assembly.gov.nt.ca).

COMMUNITY MEETINGS

A vital part of the review process was the public meetings held in ten NWT communities, in April of 2010: Yellowknife, N’dilo, Lutselk’e, Hay River, Fort Liard, Fort Simpson, Inuvik, Fort McPherson, Ulukhaktok, and Tulita. The Committee travelled to these communities accompanied by representatives from the Department of Health and Social Services; Cindy Blackstock, Executive Director of the First Nations Child and Family Caring Society of Canada; Bruce MacLaurin, Assistant Professor at the University of Calgary’s Department of Social Work; and Sharon Sutherland, Assistant Professor in the Faculty of Law at the University of British Columbia and an expert on child protection mediation and collaborative decision-making processes.

A total of 266 people attended the public meetings. Using a slightly different format than usual, and with the help of this informal “panel” and local leaders, the discussions were illuminating, candid, and very moving as Territorial residents told their stories and shared personal experiences related to the *Child and Family Services Act,* and its implementation.

Attendance at public meetings:

- Yellowknife: 37
- N’dilo: 28
- Lutselk’e: 26
- Hay River: 21
- Fort Liard: 22
- Fort Simpson: 14
- Inuvik: 30
- Fort McPherson: 11
- Ulukhaktok: 56
- Tulita: 21
- Total 266
WRITTEN SUBMISSIONS

The Committee also received 52 written submissions from throughout the Northwest Territories:

○ **NGOs:**
  - Native Women’s Association of the NWT
  - Native Women’s Association Community Legal Clinic Program
  - NWT Seniors’ Society
  - Status of Women Council of the NWT

○ **Government:**
  - Yellowknife Health and Social Services Authority
  - Chief Coroner Cathy Menard
  - NWT Human Rights Commission

○ **Local Government:**
  - Inuvialuit Regional Corporation
  - Tlicho Government

○ **Individuals:**
  - Elizabeth Firth, Inuvik (oral submission)
  - Bing Guthrie, Yellowknife
  - Amy Jenkins, Fort Smith
  - Bren Kolson, Yellowknife (oral submission)
  - Calvin Pokiak, Tuktoyaktuk
  - Bethan Williams-Simpson, Yellowknife
  - Karina Winton, Legal Aid Family Lawyer, Yellowknife
  - An anonymous Inuvik resident
  - 7 meeting participants, 6 newspaper survey responses
  - 5 youth from TrailCross Treatment Centre
  - 14 youth from Chief T’Selehye School, Fort Good Hope

COMMISSIONED REPORTS

- Review of the *Child and Family Services Act*: Summaries of Five Focus Groups Held in Yellowknife, NT – Prepared by: Terriplan Consultants*
- Review of the *Child and Family Services Act* in the Northwest Territories for the Standing Committee on Social Programs: Survey Findings – Prepared by: Betty Daley and Heather Nyamazana*
- I Want to Grow Up in my Community: A Review of the *Child and Family Services Act* – Prepared by: Cindy Blackstock, PhD*
- A Report on the Northwest Territories *Child and Family Services Act* – Prepared by: Bruce MacLaurin, Faculty of Social Work, University of Calgary*
- Report to the Standing Committee on Social Programs of the 16th Legislative Assembly of the Northwest Territories: Review of the *Child and Family Services Act* – Prepared by: Sharon Sutherland, Assistant Professor, University of British Columbia*

* Available upon Request and on the Legislative Assembly website: www.assembly.gov.nt.ca
Standing Committee on Social Programs Review of the Child and Family Services Act

1. The Standing Committee on Social Programs shall examine the following:

   a) The achievement of the objectives as stated in the preamble of the Act;
   b) The administration and implementation of the Act, in particular where child protection apprehension is considered;
   c) The effectiveness of the provisions in the Act, including the assignment of the scope of independent powers to the child protection workers and the general oversight of the NWT child protection services;
   d) The use of alternative dispute resolution methods such as mediation, conciliation, arbitration and case settlement conferences to avoid child apprehension and adversarial court proceedings wherever possible;
   e) The supports required to fully implement the Community Child and Family Services Committees as provided for by the Act;
   f) The community supports available for families and children to prevent apprehensions;
   g) The gaps in care and services for youth between 16 and 19 years of age;
   h) Concerns regarding frivolous complaints;
   i) And, the potential role, responsibilities and powers of a Territorial Child Advocate.

2. The Standing Committee on Social Programs shall, during its examination, consider the following:

   a) Incorporation and respect for aboriginal values, beliefs and approaches to conflict resolution;
   b) Real or perceived racial undertones in child protection investigations and apprehensions;
   c) Complexity of family law issues;
   d) Potential conflicts between federal and territorial legislation;
   e) And, discrepancies in the supports and resources available to the different parties in court proceedings.
FINDINGS

What the Committee heard from residents and communities was remarkably consistent from one end of the Northwest Territories to the other. The turnout at the hearings was very high, underscoring the importance of child welfare issues in everyday life. For Committee members, this was an exceptional example of democracy in practice; an experience that the Committee would like to share by bringing the stories and lessons learned from the communities to bear on this report. We feel that the Assembly now has a duty to show that government is listening. We must begin immediately to improve our methods of protecting children and supporting healthy families.

Six key findings informed the recommendations of the Committee and this report. The Committee feels that these findings are the core challenges standing between a child welfare system with great potential and the realization of that potential.

Firstly, the impacts of the Child and Family Services Act are being felt widely across the NWT, particularly in aboriginal communities. Despite this, the majority of the public in all communities had difficulty understanding the Act.

Secondly, child maltreatment has root causes, and those root causes are not adequately acknowledged and addressed by Child and Family Services and other government programs.

Thirdly, the communities and their cultures have solutions to child maltreatment that must be recognized and supported. Cultural differences will become less of a factor in child welfare decisions when communities take a more active role and more responsibility, through Child and Family Services Committees and other measures.

Fourthly, because of resource constraints, Child and Family Services is able to implement only basic programs and not able to develop and sustain many of the services and supports that Committee heard are so desperately needed by individuals and communities.

Fifthly, a successful legal challenge of the Nunavut Child and Family Services Act makes it clear that changes are required to the NWT Act as well. The court found that the Nunavut legislation discriminated based on age, and was a violation of the Charter of Rights and Freedoms. The case identified a gap in provisions to assist youth aged 16 to 19. A similar gap exists in the NWT legislation, and there are other gaps as well. For example, a youth may sign a Voluntary Care Agreement with Child and Family Services, if he or she is attending school or working, and has secured accommodation. But youth under age 19 have not reached the age of majority, and cannot legally sign a lease.

Lastly, there is evidence that false reports of child maltreatment do occur, and can turn both the victim’s life, and that of the entire family or foster family, upside down. False reports also create stressful and unnecessary work for social workers who are generally overloaded already. There are no penalties in the Act for knowingly making a false allegation and civil liability is limited to cases in which a report can be proven to be made maliciously. Even in such cases, the victim would have to file a claim in court. This is a great barrier for most people.
**UNDERSTANDING THE IMPACTS OF THE LAW**

Who does not understand the law and why is it so hard to understand?

“Most of us don’t even know what the Act says. We didn’t know about our rights or the Child and Family Services committees in the Act.”  — Jesse Campbell, Tulita

During the review, the Committee found that many of the parents and families involved with child protection did not understand their rights and responsibilities with respect to child welfare. Not only does the public have difficulty understanding the *Child and Family Services Act*, but many child protection workers and other professionals in charge of implementation admitted they do not have a good understanding of the Act.

“Child protection workers should be spending more of their daily workload assisting and protecting children and families, rather than acting as pseudo-lawyers in legal applications and hearings.”  — Bethan Williams, Yellowknife

The Act is not well understood for several reasons. First and foremost, it is written in complex legal language. Secondly, affected individuals and child protection workers do not receive the training necessary to understand the Act and its implementation. Thirdly, legal services are not available in most communities and to most people, primarily due to a lack of financial resources.

“I am educated but I had trouble reading the Act.”  — Margaret McDonald, Norman Wells

The law and other legal documents are written in a way that ordinary citizens, and even skilled judges and lawyers, sometimes find difficult to understand. As part of the process of being appointed as a child protection worker, staff of Child and Family Services in the Northwest Territories undergo one week of orientation and training. During the review, many child protection workers who spoke to the
Committee admitted to having little understanding of the legislation beyond what was taught in their short training course.

“If parents do not get a lawyer, the child protection worker is ‘running the show.’...Child protection workers will regularly have a parent sign a Plan of Care Agreement without advising the parent of their right to have legal advice.”
— Karina Winton, Legal Aid Family Lawyer

The review also exposed the issue of parents’ and families’ disinterest in, or inability to access legal services, throughout the Northwest Territories. Lawyers charge more than poor people can afford; Legal Aid’s coverage is minimal; Child and Family Services’ staff do not encourage clients to seek legal advice; there are very few lawyers outside of Yellowknife, and people in small, aboriginal communities are relatively unfamiliar with lawyers and legal rights.

What are the consequences of not understanding the law?

Understanding the law is an essential part of being able to follow it. Legislation affects so many aspects of our daily lives by governing the things we do and how we do them. Law sometimes controls our private lives, such as the way we raise our families. The Child and Family Services Act is one such law.

Not only does the law tell us what we can and cannot do; many of our rights and responsibilities are also written in law. What if we could not read the law because it was in a foreign language or inaccessible to us for some other reason? What if the only way you could learn about your rights and responsibilities was to pay a high-priced professional to interpret it for you? What if you were a professional in charge of implementing the law, but you had difficulty reading and understanding it? These are some of the very serious challenges people face in the Northwest Territories.

There are many implications of not having a thorough understanding of the Act. Parents and families do not understand when or why their children have been removed. Child protection workers cannot thoroughly implement the Act. They find it difficult to explain to parents why children are removed, what their rights are, and what will happen next. The protection of all legal rights of the child, parents and family may not be adequate. The combination of parents not knowing their rights and child protection workers not familiar with the specifics of the Child and Family Services Act results in poor communication and weak implementation of the legislation.

“Plan of Care Agreements are blackmail! Either you sign today or we keep your child; but if you sign, it means that you have agreed that your child is in need of protection.”
— Arlene Hache, Executive Director, Centre for Northern Families, Yellowknife

“The Act says that [when a child is maltreated] if you do nothing then your kids will be taken away. But these parents had no say.”
— Eileen Koe, elder and former Child and Family Services (CFS) Committee member, Fort McPherson
How is the law affecting aboriginal communities and why are they most affected?

“"I was born on the land and taken away from home because of violence in our home. I was adopted... was a single parent and tried to raise my kids...and now I am president of the Gwich’in Tribal Council. Most of us in the community have experience with these issues.”

– Richard Nerysoo, President, Gwich’in Tribal Council, Inuvik

Fewer than 5% of children in Canada are aboriginal, but approximately 40% of the children in out-of-home care (foster care, group homes, and institutional care) are aboriginal children. In the Northwest Territories, aboriginal children experience higher rates of ongoing service, child welfare court intervention, and placement than non-aboriginal children. Aboriginal children make up 91% of the substantiated cases of maltreatment in the NWT while they account for only about half the child population.

There are two potential reasons for this over-representation of aboriginal people in the child welfare system: either aboriginal children are victims of maltreatment more often, or they and their parents are victims of a discriminatory child welfare system. Perhaps both of these answers are correct: the causes of child abuse and maltreatment are rooted in a long history of discrimination, assimilation, trauma and cultural loss in residential schools, social inequality and poverty that have caused aboriginal people to be marginalized in Canadian society.

Another significant reason for the over-representation of aboriginal people in child welfare is that once children are in the system, they and their families are not adequately supported and nurtured. This has often led to further harm and poor outcomes for the child, as well as continued cycles of abuse and maltreatment.

“Parents haven’t done a good job, but government hasn’t done a good job either.”

– Debra Buggins, former social worker, N’dilo

“From my experience [with Community Justice Committees], children who are in foster care are those who will fail and face criminal charges; they are not attached, not belonging, and have a continuous history of rejection by society.”

– Lydia Bardak, community justice worker, Yellowknife

“The biggest problem is children being pulled away from their families and communities at a young age and not being taught life skills, so they go and get into drinking and drugs.”

– Christine Holman, elder, Fort Simpson

“As a child I was taken away from my parents and put into foster care, then I was forced to go home to my parents when I didn’t want to. Now I have lost my own three children to Social Services. I feel like hurting myself and others. I am hopeless and angry!”

– A Yellowknife participant

Many of the people that spoke to the Committee addressed systemic factors, such as: social workers that are unfamiliar with the culture, in which they work, pressured by high workloads, and captive to a process that, once in gear, cannot be easily stopped before children are removed from their homes. The fact that the system itself is seriously flawed was reinforced by the testimony of social workers and foster parents, many of whom are also frustrated. Committee members were struck by the tireless dedication of so many people waiting and hoping for positive change.
What are the root causes of maltreatment?

The roots of maltreatment revealed during the review were: intergenerational trauma, particularly stemming from residential schools; the breakdown of community and its traditional systems; poverty and inequality; poor housing; and, the lack of prevention services and family supports. Trauma and community breakdown are closely related. Widespread trauma damages the strength and resilience of a community. The strength and resilience of the community in turn has consequences on the kind of support individuals and groups get in dealing with the trauma. Poverty compounds the affect of trauma... Poverty is also a key obstacle to recovery. The committee heard a resounding call for additional services and supports that would address these issues and help prevent or reduce child abuse and maltreatment.

The trauma of the residential school system continues to have a strong and tragic impact on the communities of the NWT. Survivors are still living with the trauma, and in many cases it is passed on to the next generation through family dysfunction, child neglect, abuse, maltreatment, and domestic violence.

“I went to residential school and was traumatized by all kinds of things like abuse. The problems in our communities stem back to residential school where we didn’t learn how to be in a marriage relationship or how to be parents. We didn’t see healthy families. Many people are still struggling and can’t let go of the past. I am where I am today because I had a family that cared and loved me.”
—Eileen Koe, elder and former CFS Committee member, Fort McPherson

“I went to residential school for four years and was abused by my supervisor, but I didn’t tell anyone. I got pregnant at 17 and was thrown out of school and I didn’t have a home or any support. I started drinking; including hairspray, Listerine, anything [I could get]. A mental health worker helped me keep my child by treating me for depression with medication.” — A Yellowknife resident

A community is only as strong as the collection of individuals who live there; in a small community, the suffering of one family often impacts many others. The Committee heard from many members of each community that the trauma of residential schools is not gone, and that children continue to suffer the consequences. Personal stories about the loss of culture, life skills, and the breakdown of families were repeatedly shared with the Committee.

“Five generations of people in my family have lost parenting skills. For 50 years we’ve been told we aren’t good parents. We need a lot of healing.” — Betty Elizabeth Hardisty, elder, Fort Simpson

“I went to residential school for 10 years, where I lost my foundation, knowledge of what a family is and how to raise a family. We are just starting to learn again how to be a family. We were not taught family values and skills at residential schools.” — Cecilia Beaulieu, community leader, N’dilo

Communities once strong in culture and character, that had strong leadership and extensive family and community support systems, have been suffering through a long history of breakdown of those supports. While strong political structures still exist in many of the communities, band councils have been criticized for not getting involved in social programs, and child welfare in particular.
“We aren’t getting support from the chief or council or elders on this.”

– George Marlowe, elder, Lutselk’e

“The Inuvialuit Regional Corporation isn’t looking after their people. The majority continue to live off the government. The IRC runs the liquor store but won’t build services we need in the community. We are not benefitting from the self-government agreement. Our kids are suffering and the IRC hasn’t helped the way they should to make us less dependent on the GNWT.” – An Inuvik elder

Many people in the communities told the Committee about the breakdown of traditional concepts of social responsibility – people are no longer taking care of each other. Many elders we spoke with said that children are being allowed to go hungry and cold, and that underage youth drink in the homes of adults. Not only did the Committee hear that the community wasn’t supporting its members, but that people are regularly exposed to violence, and fear each other.

“Some children go to school hungry and cold and sometimes they have stayed out all night. The community sees it and doesn’t say anything. We need to recognize this problem.”

– David Umingmak, elder, Ulukhaktok

“There are teenagers drinking at 15 and 17 years old in houses of adults. This is an issue for me.”

– Gil Olifie, Ulukhaktok

“Kids see danger every day in our communities and think it’s normal. At some point we need to tell them it’s not normal.” – Irene McLeod, foster parent, Fort Liard

“We are all afraid of each other in this community. We all know the problems but we aren’t doing anything about it.” – David Etchinelle, elder, Tulita

Poverty, particularly in aboriginal communities, is a significant part of the problem, and is a major obstacle to regeneration and recovery. The cost of living, the lack of affordable housing, and limited employment opportunities in the small communities are huge barriers for people trying to recover from trauma.

“I feel like my people are in a third-world country and we are not being treated equally.”

– Muriel Betsina, elder, N’dilo

“The Dog Act consumes time in the House and [the Town of Inuvik built a] heated dog pound, and we get no support for the homeless shelter.” – Gwich’in Chief Herbert Blake, Inuvik

“I don’t want any child to go through what I did where I was treated as a non-person; and as an Indian, I was discriminated against. I was a foster child in the 1960s in an abusive foster home, where my sister was strapped frequently. She is now not doing well. I didn’t trust white people; they were hypocrites. My experiences taught me not to trust white people.”

– A member of Lishtli K’ue First Nation, Fort Simpson

One area of inequality has been access to the services and supports necessary to prevent child abuse and maltreatment and to assist parents and families before protection issues develop. Access to such services is unequal between NWT large and small communities, with the former having greater access to
services than the latter. Services are concentrated predominantly in regional centres or in Yellowknife; far from the reach of many northerners.

“Raising children is a big job and can be frustrating, and parents need help. When parents get frustrated now they drink, and when they drink they get their kids taken away. Parents need support to relieve stress and frustration.” – Steve Kotchea, band councilor, Fort Liard

“Parents have psychological reasons for not being able to care for their kids that require support and counseling.” – Christine Holman, elder, Fort Simpson

“I’m 17 and never lived at home in two and a half years. I’m not in social work, nor am I an alcoholic. I got out for my emotion, safety, and mental well-being. I’m in pain from what I had to go through. I’m actually scarred, traumatized, and I can’t talk with anyone because I can’t trust anyone.” – A Fort Good Hope student

“The Inuvik Transition House is an eight-bed shelter, and this year we had 50 women and 33 children come and stay between one and 23 days. Many are traumatized when they arrive, and most have dealt with Child and Family Services... Many clients are afraid to disclose domestic violence and victimization because they fear losing their children. Women are made to feel worthless as a wife, mother and human being.” – Ann Kasook, Executive Director, Inuvik Transition House

“I and my friends are single parents and we need help, like a caring circle for families.”

– Ruth Wright, Inuvik

“I had my children taken away because of alcohol. I wish I knew about the resources that were out there when my child was taken away. No one came to help me and Social Services wouldn’t help me. Now I want to try to help others.”

– Rosanne Landry, first-year Social Work student at Aurora College, Yellowknife

“I have five children, and me and my ex split up. My 12-year-old daughter got into drugs and alcohol. I called Health and Social Services and there was no program available for her. Only after I threatened to call the Minister, the man at Social Services in Norman Wells took it to court and said that I never returned his calls. He was [not telling the truth]. At 15 she went to jail and probation officers haven’t helped. Parents need help and there are no programs to help them with their kids. They just treated my daughter and I like we were criminals. They say these people are here to help but that’s [not true].” – Rosemary Andrew, Tulita

Is child welfare repeating the mistakes of residential schools?

“I was in foster care and residential school and there is no difference. We lost control of our lives in both systems.” – Julie Thrasher, cultural support worker, Inuvik

As John Milloy points out in his book, A National Crime, at the height of their operation in 1949, there were approximately 8,900 children in 130 residential schools across Canada. In 2003, about 30,000 aboriginal children were in out-of-home care. It is possible that, despite having a different strategy than residential schools, child welfare is having a similar result – children are removed from their parents and families break down.
“Look at residential schools; a child that is taken away from their family will always have difficulty returning to the family afterwards.” — Angie Lantz, elder, Lutselk’e

“The pain from residential schools will be carried on by children who have been in care. Kids in foster homes for a long time have the same pain as residential school students.”
— Shirley Kisoun, Inuvik

“Haven’t we learned from the residential school system? Removing and institutionalizing children will not end maltreatment.”
— Arlene Hache, Executive Director, Centre for Northern Families, Yellowknife

“Don’t come build a facility here or hostel; they will end up like residential schools.” — John Andre Snowshoe, elder, Fort McPherson

An important criticism of the child welfare system that resonates with survivors of residential schools is that they were not taught the important life skills necessary to recover from the trauma and rebuild their lives in their new environment. Nor were they taught how to return to their homes, families, and communities.

“We can see the continued impact of residential schools on our clients. They all display two important gaps in knowledge; how to grieve and how to parent.”
— Angela Jacobs, Healthy Families Program, Hay River

The stories we heard from the communities convinced the Committee that every effort must be made to keep children with their own family, or at least in their own community. That means there must be a much greater emphasis on prevention, early intervention, and support for children and families to avert the need for apprehension. For those who must be apprehended, there must be local placement options.

How are individuals and communities coping with crisis and trauma?

Overwhelmingly, people turn to alcohol and drugs to cope with trauma and crisis, and it is having serious repercussions on children, families, and communities. According to the Department of Health’s Business Plan for 2009/2010:

“In 2006, an estimated 15% of NWT women aged 20 to 44 reported drinking alcohol during their last pregnancy. This means that a considerable proportion of pregnant women are putting their unborn children at risk of developing Fetal Alcohol Spectrum Disorder (FASD).”

“People are accusing people of using drugs and alcohol, but aren’t asking them what is wrong with them.”
— Christine Holman, elder, Fort Simpson
The consequences of stress, rapid or constant change involving conflict, and uncertainty can be destructive to a person’s physical and emotional well-being. Under conditions of “hyper-stress,” many people turn to alcohol or drugs. However, individuals using alcohol and drugs to cope with stress fail to realize that misuse of these substances creates further stress, and contributes to a vicious cycle in their lives. We must convince people that the use of alcohol and drugs is not an effective means of coping with problems, and further, we must provide them with alternatives.

“There are people who aren’t taking good care of their kids. Young parents are drinking and their kids are seeing them drink; this is causing the problem.” – Pierre Marlowe, elder, Lutsel’ke

“Alcohol-related neglect and family violence are our number one issue.” – Arlene Jorgensen, Director of Social Programs, Beaufort Delta Health & Social Services Authority, Inuvik

“I need help to deal with Social Services and get my children back before I resort to drinking again.”

– A Yellowknife resident

“Tonight I heard how we are hurting people. I didn’t think about it before. It’s going to cause more problems and young people go straight to drinking.” – Chief Frank Andrew, Tulita

The addictions of parents and caregivers, particularly alcohol abuse, are among the main causes of child maltreatment. Without concentrated efforts to help people control their addictions, and to support healthy lifestyle choices, the cycle of alcohol and drug abuse will continue to undermine every aspect of life in the Northwest Territories.

What obstacles stand in the way of personal recovery?

The committee heard two key systemic obstacles to personal recovery: the inappropriate and culturally irrelevant approach to child welfare; and, poor program coordination that leads to government-created dependency.

“They weren’t taken away, they were stolen; put on a plane and taken from the community. That’s kidnapping. This kind of thing starts war. We have lost trust in government.”

– Fred Sangris, N’dilo

“Being a child protection worker is the hardest job I ever had. I was good at bringing families together, not taking them apart. Child protection workers should be strong at working with families and understanding family dynamics.” – J.C. Catholique, Lutsel’ke

“Children who are not abused or neglected are still falling through the cracks, and are not going to school. Kids should be asked why they aren’t going to school. We need to study the realities.”

– Betty Elizabeth Hardisty, elder, Fort Simpson

“Traditionally we cared for our kids ourselves. Government made it so that we rely on [the government] to take care of our children. Our responsibility for our children starts today.”

– Richard Nerysoo, President, Gwich’in Tribal Council, Inuvik
"When you have no money you get stuck in a rut and depend on social services."

– Steven Steeves, band councilor, Fort Liard

The child welfare system and the Act are not well understood by the public. Culturally inappropriate policies and practices are compounding the problem. Support for families and individuals falls far short of what is needed. The Committee heard from both social workers and their clients that the workers are forced to spend much of their time dealing with paperwork, often related to court appearances, and that communities lack the resources to support people in recovery.

Why can’t we continue doing things the way we are doing them now?

The number of children in care, growing anger and dissatisfaction in the communities with child welfare and other government services, and poor outcomes for children in the child welfare system all point to the need to change our approach to child welfare. The welfare of our children will affect the future health of our communities. Individuals and communities across the NWT urged the Committee and the government to take a new approach, to work on coordinating the policies of all government departments involved in social development, and to work towards ending the cycle of broken families and alcoholism that stem from poverty and trauma.

“This community is screaming for support!” – Val Robertson, Inuvik

“What’s best is, instead of apprehending, find the child’s extended family and get them to care for the child.” – Fred Sangris, N’dilo

“A child should be put with other loving and caring relatives when it is absolutely necessary to take them away from their parents.” – Pierre Marlowe, elder, Lutselk’e

“We need to consider the consequences of apprehending children and especially about where they are placed.” – Emily Saunders, elder and former social worker, Lutselk’e

“I think a child may need to be taken away, but it has to be done in the right way.”

– George Marlowe, elder, Lutselk’e

“Removals are happening because of a lack of other reasonable options.” – Cindy Blackstock, Executive Director, First Nations Child & Family Caring Society of Canada

“Kids are taken because of addictions. If given the chance, parents will get over their addictions to keep their children. I have seen it. We need to build on the strengths of our people.” – Eileen Koe, elder and former Child and Family Services Committee member, Fort McPherson

“The kids must feel hurt when they are taken.” – Renee Ulaktuak, elder, Uluhaktok
“Being in touch with culture involves more than taking the children to drum dances.” – Angie Lantz, Lutselk’e

“We all love our children; even poor parents.” – Pierre Marlowe, elder, Lutselk’e

“We are now mainstreaming aboriginal kids into white culture.”
– Ethel Lamothe, elder, Liidlii K’ue First Nation, Fort Simpson

The child welfare system as it is today is largely reactive, not proactive. The poor outcomes for children who are apprehended and removed from their family, community, and culture tell us that profound change is needed. In the past, we have acted without knowing the consequences; now we do.

It is clear to the Committee that in developing new options, the communities can be instrumental in solving their own problems. Informally, and without recognition of Child and Family Services, the communities have always been involved in child welfare, and this is still the case.
ISSUES RAISED IN THE COMMUNITIES

Is the problem in the Act or its implementation?

As part of the review of child welfare literature and legislation, it became apparent to the Committee that the NWT Child and Family Services Act is a progressive and unique piece of legislation. The Act allows, and even encourages, community engagement and participation in a process that, in other jurisdictions, is dictated by child welfare services and the courts. Additionally, the method of community engagement – Child and Family Services Committees – is particularly tailored to suit aboriginal communities and to allow for collaborative decision-making. There are other important features of the Act that distinguish it from legislation in other Canadian jurisdictions: the opportunity for the Director to provide preventive and voluntary services; the expectation that the Director will use the least intrusive measures; emphasis on keeping families together, rather than simply removing a child; and, the recognition of the cultural rights of the child.

While the Act itself is deemed progressive, many of these unique and progressive features have not been implemented. For example, only one Child and Family Services Committee has been established – in Fort McPherson. A major criticism of the implementation of the Act is that voluntary services have been used to coerce families into admitting fault and handing their children over to be put in the care of Child and Family Services. The Committee found that the gap in services for youth to be a major weakness in the Act.

According to the United Nations Convention on the Rights of the Child, which has been ratified by Canada, children up to the age of 18 years have the right to special protections under the law. Generally, these special rights and protections have not been part of the reality of youth in care; rather than enjoying special care, youth have been enduring tremendous challenges and hardship with less support than their younger peers.

Recently, the successful legal challenge to the Nunavut Child and Family Services Act in the Nunavut Court of Justice found that, rather than protecting the special rights of children and youth, the Act discriminated against youth based on age by arbitrarily cutting off some if the services offered to them once they turned 16. Discrimination based on age is a violation of the Charter of Rights and Freedoms. The Nunavut case identified a gap in provisions to assist youth aged 16 to 19, which the judge argued did not correspond to any real change in the basic care needs of youth.

The same gap exists in the NWT legislation and it is possible that a similar ruling could be made if the Act is not amended. A key criticism of the NWT Act is that is does not allow for the apprehension of a child 16 years of age or older; therefore, the only services available to youth are voluntary services that they must agree to accept. The voluntary services are also not equal in quantity, quality and consistency to those available to children under the age of 16.

“We need more resources for youth [aged] 16-19. There are youth sleeping at the Side Door Youth Centre who are trying to avoid alcohol. They need more than a place to sleep and shower.”

– Sandra Beaton, mental health worker and foster parent, Yellowknife
“A young boy who has been in care since he was a baby, now he is 16, was brought back to his parents because the foster family didn’t work out. Nothing is being done for him and he doesn’t go to school.”

— Hazel Nerysoo, Mayor, Fort McPherson

“It’s hard for them [the youth] to follow the white people and it’s hard for them to follow our traditional ways; they fall in-between.” — David Etchinelle, elder, Tulita

The Committee heard from the department that they are struggling to implement basic services and do not have the capacity to develop the more sophisticated programming that is necessary to improve child welfare services. Because of serious resource and capacity challenges, the department is not having the positive and protective impact it is meant to have. Without the ability to provide a more nurturing and protective environment for children and youth in care, the child welfare system is having a negative impact on the development of the children and youth it is meant to serve. A major area of disagreement and misunderstanding between the department and the communities is whether children are being harmed more by apprehending them and putting them in the care of Child and Family Services.

“There is a lot of frustration on all sides of Child and Family Services; social workers, parents, kids, extended family, professionals, etc. I am not sure how legislative change will make implementation issues go away.” — Arlene Jorgensen, Director of Social Services, Beaufort Delta Health & Social Services Authority, Inuvik

“I have been a foster parent for 24 years and I have had more than 200 kids from all over the territory and Nunavut during those years.” — David Sangris, foster parent, Hay River

“Social Services isn’t helping the children and can’t raise the children better than us.” — Valerie Yakeleya, Tulita

“GNWT legislation does allow for the development of community standards, but it is uncertain if, or whether, the government will apply these standards to such things as facilities and foster parents.”

— Tlicho Community Services Agency Social Programs Report, April, 2010

Many community members admit that there is some need for the government to step in to protect children; however, it is expected that the department should provide quality services and care for families and children and that it should meet a wider set of needs than simply removing children from immediate danger.

Child and Family Services is not meeting the expectations of the communities and the individuals it is meant to serve. The Committee heard from the communities that they feel that generally the department lacks cultural understanding of aboriginal clients and communities and that they do not adequately respond to the full range of family needs. Families who had interacted with Child and Family Services felt that rather than receiving “services” they were being told what to do in a way that made them questions the motivations and intentions of Child and Family Services staff. As individuals, they felt they were treated without the dignity and respect that they deserved. In many cases, individuals and families that felt poorly treated would resist the plans and “assistance” provided by Child and Family Services which often led to poorer outcomes for these families and their children.
“A personal touch has the potential to diffuse so much tension.”

— Matthew Nimegeers, foster parent, Hay River

“Why are there lots of programs but this [drinking and maltreatment] is still happening?”

— Eva Hope, band councilor, Acho Dene K’oe, Fort Liard

“We need service from providers who are empathetic and who can understand where we come from and what our concerns and issues are.” — Dolphus Codille, interpreter, Fort Liard

“We are putting paperwork before people. There is not enough time for people to process what’s best for families and how to keep children in the home. We need to slow down the initial apprehension.”

— Pat Waugh, community court worker, Fort Simpson

“Service providers need to remember what service means.”

— Julie Thrasher, cultural support worker, Inuvik

“[Social workers] have their own way of doing things from down south and they don’t seem to understand us and how we live.” — Eileen Koe, elder and former Child and Family Services Committee member, Fort McPherson

“I try to do my job in the best way possible. I cry regularly. I have good intentions. I want to be allowed to do more home visits, build relationships and spend time with families.”

— Betty Bird, social worker and graduate of the Social Work Program, Fort Smith

An important finding of the Committee was that opportunities for collaboration were not utilized, even though the use of collaborative processes is a key element in the Child and Family Services Act, and it has been proven that the use of these processes result in more positive outcomes for children and families. More sincere efforts must be made to encourage cross-cultural understanding, collaboration and community ownership.

The most obvious obstacle to developing the programs and services needed are resource and capacity shortages. There are costs associated with providing additional services and hiring additional staff to develop more effective programming.

Child welfare resources are also largely concentrated in Yellowknife and some of the regional centre. This inequity has had a direct impact on parents’ ability to complete voluntary or mandatory Plan of Care activities that would allow them to keep their children. They and their children face an unfair disadvantage of not having access to services, which has resulted in disproportionately larger numbers of children being removed, not only from their homes and families but from their communities, and placed in regional centres to receive services.

“There are instances when people need shelter and we can’t help them. We can only help them make safety plans for accessing local and family supports. Most of the resources are outside of the community and people may have to go outside.”

— Andrea D’Addario, child, youth and family counselor, Ulukhaktok
While changes to the Act are required, implementation clearly requires attention. Many of the principles included in the Child and Family Services Act are not being met. Families under stress do not receive enough support; prevention and early intervention services are insufficient in most communities. Child and Family Service Committees have not been established, and working with communities to establish them has not been a priority of the Department of Health and Social Services.

**What has prevented better implementation of the Act?**

**Adversarial process, poor communication, lack of trust**

"[The] adversarial process is part of the problem. Social workers feel the need to prove themselves by documenting the bad."

— Sharon Sutherland, assistant professor, Faculty of Law, University of British Columbia

The intention of the Act is to create collaborative conditions for child welfare decision-making. Traditionally and historically, child welfare practice has been highly adversarial; it has been characterized by the assumptions that parents are wrong and the government is right, and if this assumption was disputed, the parent was expected to prove their innocence in court against the case file of the child protection worker, often without any legal assistance.

"Parents come to me, as an advocate, and ask me to help them with reading the Act. They feel attacked rather than supported by Social Services.” — Angela Jacobs, Hay River

"I don’t understand their decision-making process. Grandparents shouldn’t have to fight to keep their grandchildren. Why do we have to go to court to prove our own love for those children?"

— Shirley Kisoun, Inuvik

The Child and Family Services Act sets out the basic foundation and tools to move away from the traditional adversarial approach — by giving parents and families the opportunity to engage with social workers in the process of making child welfare decisions. This is the Plan of Care process. However, in reality the process remains poorly understood and highly adversarial. During meetings with the public and stakeholders, the Committee heard complaints that the Plan of Care process is coercive, rather than collaborative, and that social workers continue to dedicate more time to building a case against parents than to working with parents and families in the Plan of Care committees.

"The [Health and Social Services] Authority isn’t listening to the advice of the community and family members.” — Christine Holman, Fort Simpson

A fundamental problem that the Committee identified was the poor communication between families and social service providers and the resulting lack of trust between both parties. For aboriginal communities in particular, historical experience and general mistrust of government has had a serious impact on their willingness to cooperate with government workers, particularly with Child and Family Services.
“Most people here have a bad impression of social workers; either the social worker didn’t intervene and didn’t do enough, or, the social worker intervened in a way they didn’t like.” – Arlene Jorgensen, Director of Social Services, Beaufort Delta Health & Social Services Authority, Inuvik

“The system works in favour of the social worker. I get the feeling it’s a corrupt system.”

– Peter Silastiak, elder, Tulita

“If we change the Act will you follow it?” – Chief Frank Andrew, Tulita

“The closest I have had to a healthy family is when we go out into the bush and work together, help each other, and enjoy ourselves. I have had bad experiences with Child and family Services and was angry. I get calls from the communities about their experiences with families being torn apart. I have witnessed the lies of a social worker in the case of my brother. She said she lied so that we could get money for the children. We agreed to work on a Plan of Care but when it came back to us for signature it was different. It left me confused and angry and I didn’t trust social workers.” – MLA Norman Yakeleya, Tulita

“I have been involved in apprehensions because of our grandchildren, and our whole family has suffered. There is a lot of miscommunication between Child and Family Services and parents. Now they are telling my daughter that the child can only be returned if she separates from her husband. There needs to be a neutral third party involved, and Child and Family Services needs to be more compassionate. The child protection worker said of our kids, “they are under our control; there is nothing you can do.” – Susie Silastiak, elder, Tulita

Lack of training for child protection workers, lack of supervision and oversight

“I have been a child protection worker for four years and I have limited understanding of the Act. It needs to be written in plain language.” – Wayne Weisgerber, child protection worker, Lutsel’ke

Child protection workers are asked to do a very difficult job. Workers are expected to implement legislation that they do not completely understand and they must deal with problems and challenges for which they are often not adequately trained and supported.

The Committee was surprised to find out that while child protection works are required to have a degree in social work, they are only given one week of general in-house child protection training. Many social and child protection workers in the NWT are from outside the territory but they are not required to
take, or even offered, cross-cultural training. This lack of training contributes to the high turnover rate among child protection workers. The more remote communities suffer, since it often takes many months to replace social workers, and the communities are left with no access to vital services.

The Committee heard from both social workers and the communities that the training for child protection workers was insufficient to allow them to understand the legislation, implement the policy and programs, and work collaboratively with clients, and resolve interpersonal and community issues that regularly arise. As a result child protection workers said they often felt unprepared and unappreciated resulting in job dissatisfaction and contributing to the high turnover rate.

Compounding the problem of inadequate training, the Committee heard that there is inadequate supervision and oversight of child protection workers, partly due to the lack of human resource capacity and adequate tools for policy oversight. This has a negative impact on the implementation of the Act as inexperienced and unprepared social workers may be working without direct supervision and the checks and balances that regular communication with a supervisor allows.

**Resources: money, human resources, coordination**

The Committee found that among the many challenges facing the department, budgetary cuts to social services when demand for services is growing, too few resources for policy development, inadequate number of staff with appropriate training, high caseloads, burnout and turnover rates among social workers, outdated technology, and poor community outreach and acceptance have been particularly debilitating.

These problems are compounded by the lack of coordination among government departments. Child and Family Services must also carry the burden of providing services to families and individuals that are not available through other departments and programs due to service gaps and policy failures. As an example, Child and Family Services have had to use their scarce resources to cover housing needs that are not covered under social housing programs or to cover income support activities when families fall through the cracks of the income assistance program, this if often necessary to keep families together and to allow children to live in safety.

Without the support of Child and Family Services with housing and income assistance needs, there would be an even greater and disproportionate number of poor families deemed to have protection concerns and more children admitted into care. However, by covering these gaps, there are fewer resources available for the kinds of programs that would provide families the services they need to become stronger and more resilient.

“We still carry the old tag of ‘baby-snatchers’. New legislation in 1998 came into force, but we continue to practice social work in the same old way. The Act is good, but we haven’t had the coordination and resources to implement it.” – Kathy Tsetso, CEO, Dehcho Health & Social Services Authority, Fort Simpson

“When we do things with the government we don’t get the support and capacity to make them work. We don’t have expertise at the community level; like experts and lawyers.”

– Sharon Snowshoe, Fort McPherson
During the review, the Committee found that a fundamental shift in practice and approach is necessary to allow the child welfare and protection outcomes expected of Child and Family Services. The new approach to practice must be supported in both law and policy to be effective. It must also be supported with sufficient resources – both financial and human. Poor policy, management and implementation have a direct and negative impact on the department’s ability to maintain human resources capacity; an impact that has been financially draining and debilitating. The programs and services that directly reduce the harm and neglect of children must be supported.

Building better relationships between government and the communities is ultimately the most important step. The Child and Family Services Act gives the government the opportunity to build trust and acceptance through the implementation of participatory and collaborative programs such as the Child and Family Services Committees. These should be a priority for Child and Family Services as they move forward. Prevention and intervention programs must also be at the forefront of the department’s approach to all social services, not just child welfare and protection services.
One of the principal lessons of this review is that while the system is failing many individuals and communities, those communities have certain strengths that keep them alive. Traditional community structures, extended family and community supports, and community role models are among the strengths that have not been celebrated enough, nor used to the advantage of child welfare.

“My mom was a role model for me. I went through family violence and drinking and I am over it. We have been hearing a lot of good things from the community. We were strong when we had strong family units. We can take back our powers. Talking about it is one way of getting our powers back and doing it is the other. We can’t depend on outsiders to fix things for us.” – Shirley Elias, community wellness worker, Ulukhaktok

“In the NWT we still have strong aboriginal culture that can and is being used to bring hope back to the people.” – Fred Sangris, N’dilo

How are communities dealing with child welfare issues?

“When I was young, we were all raised by our own parents, but we are raising our children’s children now. Many of us have experience raising other people’s children. I raised three adopted children from my wife’s side. You shouldn’t pay people in the south to take care of our children when we aren’t even receiving support.” – Pierre Marlowe, elder, Lutselk’e

In aboriginal communities, many people, including extended family and community members, are involved in raising young children. According to Statistics Canada’s Aboriginal Children’s Survey in 2006, about 70% of aboriginal children receive focused attention from their grandparents at least once a week. Similarly, between 25% and 30% of aboriginal children receive additional focused attention from elders at least once a week. The same study reported that 90% of First Nations children had parents or guardians
who stated that they were not the only ones raising the child. Grandparents and other relatives play a large role in raising children.

One thing Child and Family Services is not doing well enough is recognizing the strengths within communities, their traditional systems, and making use of these extended family supports.

“Enough with colonization! We don’t want to be put down and marginalized any more. Custom adoption is our way; not apprehension and sending children away.” – Betty Elizabeth Hardisty, elder, Fort Simpson

“I adopted one grandchild and one niece and we were later forced to adopt my nephew. We were called by Child and Family Services, who said that if you don’t take him he will become a permanent ward. They had already gone through the courts and he had been taken away. We are very old and struggle to take care of him. We took him because he was family and we don’t want him raised by someone outside of his family.” – Teresa Etchinelle, elder and foster parent, Tulita

“I didn’t receive any money to care for my three grandchildren.” – Mary Rose Enzoe, Lutselk’e

“Parents are drinking, and babies have FASD, and grandparents are taking care of them both. There are single mothers without education, on social assistance, taking care of their 30-year-old kids and their grandchildren. Parents don’t know what to do to survive.” – Peter Bertrand, Fort Liard

“Grandparents will always be willing to care for grandkids rather than allow them to go into care.”
– Shirley Kisoun, Inuvik

“The father called around the community to get people to take care of the kids so they wouldn’t be sent down south.” – Hazel Nerysoo, Mayor, Fort McPherson

“When a child is having problems there are always elders around to help decide how to resolve problems. We have our own system; we need to see, recognize and accept this system.”
– J.C. Catholique, Lutselk’e

Many individuals in communities are tackling their problems, but without adequate support from Child and Family Services. Successes happen because there are a few committed people in every community who struggle to help children in need. Communities want to deal with child welfare issues, but need financial help, and more human resources.
“In child welfare legislation and policy, adequate attention must be paid to ensuring that the child experiences continuity in their involvement with family, extended family and community, in addition to ensuring the safety of the child.” – Bruce MacLaurin, from “A Report on the NWT Child and Family Services Act,” July, 2010

What lessons can be learned from the communities?

“Keep in mind we are survivors of the system from way back, since the federal government’s policies and residential schools. Some people are still living with traditional values that could have a strong positive impact on our communities. Our traditional culture didn’t allow abuse; the grandparents used to step in. Modern government policies aren’t based on these traditions and are causing frustration and systematic separation from culture, family and traditions.”

— Christine Holman, elder, Fort Simpson

In each community, the Committee heard stories from people who grew up in the residential school system, had gone through the child welfare system, had lived in poverty or suffered from addictions, and who, despite all odds, had overcome many challenges and could pass on many great lessons in healing and self-development. Many of these strong people are now active in their families, communities and the territory. They are helping others by caring for their own children, caring for nieces, nephews and grandchildren, teaching others, taking leadership roles in community groups and organizations, working as social workers and child protection workers, engaging in political activities, and many other things.

“I didn’t go to college or anything to become a social worker. I was asked because they needed someone who spoke the language. I was still a victim myself, and I realized I had trouble helping victims because I still felt like a victim. We were jack-of-all-trades and had to do everything. We [members of the Child and Family Services Committee] are out there trying to help our people.”

— Eileen Koe, elder and former CFS Committee member, Fort McPherson

“Uprooting children from their homes does more harm than good. I was uprooted from my parents to go to residential schools and I went back and forth and didn’t spend much time with my parents. Even though we had a rough upbringing, going on the land and learning traditional ways helped me find...
balance, safety and stability. We need to find a middle ground between being on the land and modern life with cell-phones and running water. When I came out of school I got lost and got into drinking. Kids need to learn about history, language and identity to stabilize them. Modern culture involves drinking and partying with peers. Interventions get people together in groups to talk about their concerns related to drinking. My friends and family had an intervention for me. It takes people to care enough to get involved. Interventions work.” – Shirley Bertrand Jooris, Acho Dene K’ue Family Violence Prevention Program staff, Fort Liard

“It has been 20 years since I used drugs and alcohol, thanks to my family and friends.”

– MLA Norman Yakeleya, Tulita

Communities are asking for training and support services. Government must respond and be flexible enough to meet local needs. New social workers should have mentors to help them for the first year on the job. Southern hires need cross-cultural training.

Have Child and Family Services Committees been effective in addressing child welfare issues?

“What has the government done to establish Child and Family Services Committees? It took a great deal of advocacy at the community level to get one in Fort McPherson. There is a big hole in implementation because these committees are the key to this Act.” – Bob Simpson, Inuvik

“How much money would have been saved if the Minister made the committees work?”

– Val Robertson, former social worker, Inuvik

“The [Child and Family Services] Committee is an important part of helping our children. We worked together with the department. We sit in as a support person and liaison for the guardian. We need to work with both sides, which is difficult because parents don’t want to lose their children at any cost.” – Eileen Koe, elder and former CFS Committee member, Fort McPherson

“Parents had concerns and would call the [Child and Family Services] Committee to get involved before kids were apprehended. Formerly parents felt they had no voice to deal with child protection workers.” – Hazel Nerysoo, Mayor, Fort McPherson

“Apprehensions have slowed down a bit already. We need the community to continue to work together and to work together more solidly.” – Edward Wright, Fort McPherson

The experience of people in Fort McPherson suggests the Child and Family Services Committees could be effective. But it is impossible to evaluate them broadly, with only one Child and Family Services Committee established in the community of Fort McPherson. As noted earlier, that Committee is now dormant and awaits reactivation later this year, pursuant to an agreement between the Tetl’it Gwich’in Band council and the Minister of Health and Social Services. The department has not promoted the establishment of Child and Family Services Committees in any other community.

“When it [the Child and Family Services Committee] was working, it made a big difference in the community. It is badly needed.” – Taig Connell, former CFS Committee member, Fort McPherson
“We haven’t seen any money to implement the Child and Family Services committees.”
– Sharon Snowshoe, Fort McPherson

“Parents were able to express more in Plan of Care committees when Child and Family Services Committee members were there.”  – Hazel Nerysoo, Mayor, Fort McPherson

“The shift to a community-building orientation calls for meaningful and significant investment in communities to ensure the safety and well-being of children and families. Meaningful community investment includes: 1) a shift to a strength-based rather than a deficit-based orientation; 2) building on parents and families as essential partners; 3) proactive development rather than reactive intervention; 4) developing power for families and communities; and 5) working with families and children in situations of risk and violence within the context of their own community and neighborhood.”

Experts in the field and people in our communities stress that we must learn from the mistakes of the past. Again, research supports what the communities are telling us about our sometimes tortuous history. That history unfolds in the next section, followed by a snapshot of the state of child and family services today. Along with community input, this research helped inform the Committee’s recommendations.
CHILD WELFARE IN CANADA

THE HISTORY

Canada’s socio-political history has been dominated by urban, Euro-Canadian culture and ideas, and so has our child welfare system. Before the development of modern urban societies, the survival of traditional societies depended on their ability to live and grow together as a community through collectivism, and the sharing of knowledge and resources from one generation to another and one family to another. The welfare of children was the responsibility of not only the nuclear family, but the extended family and the whole community.

While many Euro-Canadians who settled in rural areas and took up more traditional and communal lifestyles focused on agriculture, many also settled in or migrated to Canada’s growing towns, and adopted an urban lifestyle. Canada’s socio-economic and political decisions would come to be dominated by these urban populations who would fill the ranks of the government and other policy-making institutions.

Prior to the influx of settlers, British and French explorers, traders and business people had made contact with the first peoples of Canada. At the time, most lived in traditional communities, some of them seasonal or temporary, and followed traditional hunting, trapping and fishing routes. While the aboriginal communities governed themselves, Canada was establishing national, provincial and territorial governments that eventually encompassed the lands of more than 600 aboriginal governments.

Canada’s history of public child welfare services can be broken up into three eras: the pre-government era; the era of voluntary organizations supported by government; and, the era of government control over child welfare services.

The Pre-government Era

Before government intervention in child welfare, there were no legal authorities to protect children from maltreatment and abuse. Although parents naturally play an important role in keeping children safe, they could not be held legally responsible for protecting their children from harm. In small, rural settlements and aboriginal communities, social norms and pressures existed to ensure that children grew up within the context of their own cultures. However, in bigger urban areas, community connections and family ties were being lost, including the norms of child-raising.

Extremely low incomes and high mortality rates among the urban poor created families that had to supplement their means with child labour. Orphaned children were left to fend for themselves. Before laws and government agencies were set up to protect children, those needing services or assistance could get help through only three avenues. The first and most common route to services was through a criminal conviction. In detention centres, children were housed, fed, clothed and given basic necessities. The second was through a system called apprenticeships: a deserted or orphaned child could exchange his or her labour for room and board. Neither of these two avenues is appropriate by today’s standards. The third avenue was to receive services and assistance from private contributions and voluntary organizations.
The Era of Voluntary Organizations Supported by Government

In 1874, as awareness grew about the maltreatment of apprenticed children, charitable organizations were permitted by law to intervene. For the first time, legislation established a cost-sharing relationship between the government and charitable organizations. Most of these charities existed in towns and cities, focusing their efforts on caring for orphaned children and providing basic services to the poor.

Meanwhile, the federal government pursued a policy of assimilation toward the aboriginal peoples of Canada. After the enactment of the Indian Act in 1876, many aboriginal people were relocated from their traditional communities onto reserves, where they were expected to make a living by cultivating the land. The reserves were characterized by geographical, cultural, and economic poverty. Child protection emerged as a major concern. Neglect, poverty, poor housing and substance misuse became common.

In 1888, the government of Ontario enacted the Protection and Reformation of Neglected Children Act, which, for the first time, allowed the courts to make children wards of institutions and charitable organizations, at the government’s cost.

Canada’s first Children’s Aid Society was established in Toronto, Ontario in 1891. The Act for the Prevention of Cruelty to and Better Protection of Children (1893) moved government into providing child welfare services. Children’s Aid Societies became semi-public agencies with the legal authority to remove children from their homes, to supervise and manage children in municipal shelters, and to collect funds from municipalities to cover maintenance costs. For the first time, the societies gained the status and rights of legal guardians.

In the 1890s many residential schools were being established by religious institutions, supported by federal funding. In Canada’s north, Fort Providence had had a residential school since 1867. One opened in Fort McPherson in 1898, followed by another in Fort Resolution in 1903. More schools were established in the 1920s and ‘30s. These boarding schools would later become a major instrument in the government’s approach to aboriginal child welfare.

The Era of Government Control Over Child Welfare Services

The provincial and territorial governments became responsible for providing child welfare services for the majority of Canadians. Before the 1950s, aboriginal peoples still fell under the jurisdiction of federal officials who only intervened in extreme cases if a child living on-reserve was abused or neglected.

From the 1950s on, provinces began to deliver child welfare services on reserves. By the mid-1950s, a number of government-run child welfare services were set up on reserves across the country. But the prevailing view was that aboriginal children were best served off reserves, in residential schools or in the care of non-aboriginal families.

Social workers played a large role in placing children in residential schools. During what is often referred to as the “Sixties Scoop,” large numbers of aboriginal children were taken from their homes on reserves and placed in residential schools or with non-aboriginal foster and adoptive homes. Residential schools were being used largely as a child welfare placement option. By the 1970s, approximately 10% of aboriginal children across Canada were in care, compared to 1% of non-aboriginal children. To this day,
aboriginal children make up a much larger percentage of children in care than would be expected, based on the size of the aboriginal population.

During this time, either the social workers did not understand or were not concerned that placing children in residential schools or assimilating them in non-aboriginal homes would add to, rather than solve, the socio-economic problems developing in aboriginal communities all over Canada.

First Nations were starting to express dissatisfaction with the provinces’ delivery of child welfare services. They particularly disliked their children being adopted out of their communities, some even outside Canada, severing the children's ties to their families and culture. They began demanding greater control and jurisdiction over child welfare. Some First Nations developed their own child welfare agencies, funded by Indian and Northern Affairs Canada (INAC). This arrangement lasted until the mid-1980s, when the department stopped funding new agencies while it completed a federal child welfare policy for First Nations children.

From the 1970s on, residential schools were being closed down. Without residential schools as a placement option, provincial and territorial governments had to develop their own tools to accommodate the growing number of children being taken into care. Foster homes were the option of choice because of their resemblance to family and their potential to be a nurturing environment. However, group homes continued to house many of the hardest-to-place children, often because of developmental and behavioural issues. In communities with a shortage of foster homes, particularly small, rural and aboriginal communities, children were taken to urban centres to be placed in foster or group homes that were geographically, socially, and culturally alien to them.

As the stories of abuse, neglect and even the deaths of children in care emerged across Canada, it appeared that government was, at best, not much better than a neglectful parent, and at worst, putting children at greater risk of harm. After decades of poor policy and implementation of child welfare, families and communities did not trust government to protect their children.

By the 1990s child welfare services responded by developing new, less intrusive approaches, which included “culturally appropriate responses.”

**A New Era in Child Welfare Services: Back to the Community**

In recent years, child welfare services for aboriginal peoples have changed much more than services for the general population. The biggest change is a growing trend to delegate child welfare services to aboriginal authorities and organizations across Canada.

In 1990, the federal government approved a First Nations child welfare policy. It promoted development of culturally appropriate child welfare agencies, controlled by First Nations, for the benefit of on-reserve children and their families. The policy required that First Nations agencies obtain their mandate from the province or territory, and provide child welfare services meeting the standards set out in
legislation. The policy also stated that the services delivered on reserves had to be reasonably comparable to those delivered in similar circumstances off-reserve.

Today, several Canadian provinces have delegated First Nations authorities to provide child welfare services on reserves. Generally, these agencies are responsible for receiving and investigating reports of possible child maltreatment, and for acting to ensure the safety and well-being of First Nations children. INAC considers it the responsibility of each provincial/territorial director of child welfare to make sure that the delegated aboriginal authorities do their job well, and to take remedial action when required.

In jurisdictions without aboriginal child welfare agencies, there has also been a shift toward engaging communities in child welfare activities, particularly prevention. Another significant but very recent change is the growing use of collaborative processes, including mediation, to reduce the adversarial role of the courts in child welfare, and to help families find their own solutions.

Nevertheless, there are more aboriginal children in the child welfare system across Canada than ever – more than three times the number of children who were in residential schools at the height of that era.
CHILDREN IN CARE ACROSS CANADA

Each of Canada’s provinces and territories has the legal responsibility for child and family services. Their legislation is similar in defining what constitutes abuse, harm and neglect, but differs in their approaches to how children will be protected. Each jurisdiction’s legislation has its own definitions, policies, and structure of services.

There are several key issues common to all jurisdictions:

A) More children are coming into care and there are fewer resources to care for them.

Studies show that neglect, harm, and child abuse are on the rise, rather than declining (Ontario Association for Counselling and Attendance Services, 2002; Child and Welfare League of Canada, 2001). This increase is related to increases in poverty, substance abuse, and violence experienced in many communities across Canada.

B) A disproportionately high number of aboriginal children are in care across Canada.

Fewer than 5% of children in Canada are aboriginal; but approximately 40% of the children in out-of-home care (foster care, group homes, and institutional care) are aboriginal children.

C) There are not enough places for children in care to live.

D) Despite the increase in the number of children taken into care, there have been proportionally fewer family-based care homes, because of the difficulties recruiting and retaining foster homes. Compounding this problem is the fact that children being placed in care stay longer and require more permanent arrangements. As a result, an inordinate number of children wind up in group care facilities.

E) Children in care across Canada receive different services.

Because each jurisdiction has its own law and is responsible for its own child and family services, there are no national standards of care. In fact, even within the same jurisdiction there can be vastly different services available, such as in urban versus rural areas, or for on-reserve and off-reserve aboriginal communities.

Overview:

- Many children receive protection services in Canada.
- Each province and territory is guided by its own legislation.
- No national standards of care exist.
- Children in care across Canada receive drastically different services.
- Approximately 40% of children in care are aboriginal.
- Family-based care is becoming more widely used.
- Children currently experience significant placement change and disruption.
F) More and more children coming into care are “high needs” children.

The children currently in care appear to have more problems than foster children a generation ago. According to research conducted in Canada, the prevalence of emotional and behavioural problems of children in care has risen from between 30% and 40% in the 1970s and 1980s to between 48% and 80% in the mid-1990s (Stein et al, 1996, pages 385-6).

G) Child Protection Workers are overworked.

Across Canada, child and family services agencies are struggling to recruit and retain qualified child protection workers. Many jurisdictions are running below capacity because of vacancies and high turnover rates. This increases the caseload and stress on workers who stay, leading to high burnout rates.

H) Lack of adequate outcomes-measurement at the provincial/territorial and national levels.

Because of the lack of national standards and the difficulty measuring outcomes, there has been a lack of information for policy-makers and program developers. They need to know if interventions and services are successful in preventing further abuse and maltreatment of children. The first Canada-wide effort to fill this information gap was the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS).

The Canadian Incidence Study (CIS) in 2003 revealed some important challenges. In the figures below we see how the NWT compares to the rest of Canada in types of maltreatment, incidence of maltreatment, household risk factors, and both maternal and paternal risk factors (see figures 1 through 5 below). The most recent data available from CIS is from 2003. A 2009 edition is underway, and the results are expected to be released soon after the completion of this review.

**Figure 1: Incidence of Maltreatment (2003)**

![Maltreatment - Incidence per 1,000 Children](chart.png)

Looking at the incidence of maltreatment per 1,000 children, we can see that the NWT has a significantly higher rate of maltreatment than the rest of Canada in every category measured. For example,
we see that in the NWT, 33.4 children out of every 1,000 are neglected; whereas, in the rest of Canada, only 6.4 children out of every 1,000 are neglected. The NWT’s rate of sexual abuse of children is more than five times the Canadian rate, and the NWT rate of exposure to family violence is almost triple that of Canada. The same study found that the overall rate of child maltreatment in the NWT is 4.8 times higher than in Canada. For many children, maltreatment is chronic: in 2003, 74% of investigations involved children with previous contact with Child and Family Services. This is a critical workload issue, and an indicator of family well-being. It suggests that more follow-up and support may be needed after a family’s first contact with Child and Family Services.

Figure 2: Types of Substantiated Maltreatment (2003), as a Percentage of All Cases

Figure 2 shows the types of maltreatment identified by child welfare workers, as a percentage of all cases. On that basis, the makeup of cases in Canada and the Northwest Territories is fairly similar when it comes to sexual abuse and exposure to family violence, despite the higher rates in the NWT. But the most telling information in Figure 2 applies to neglect, which is by far the NWT’s most common form of child maltreatment, representing 51% of cases – much higher than in the rest of Canada.

According to the Northwest Territories Incidence Study (NWTIS-2003), a child is considered neglected when he or she has suffered harm, or their safety of development has been put in danger as a result of their guardian’s failure to protect or provide for them. In the Northwest Territories, as elsewhere, neglect is considered grounds for Child and Family Services to investigate maltreatment.

The NWTIS-2003 examined eight forms of neglect:

- Failure to supervise, leading to physical harm;
- Failure to supervise, leading to sexual abuse;
- Permitting criminal behavior;
- Physical neglect, which means the failure to care and provide for a child, including inadequate nutrition, clothing, hygiene, or living in dangerous conditions;
- Medical neglect, which means the failure to provide medical treatment or to consent to medical treatment for a child requiring it;
- Failure to provide psychological or psychiatric treatment;
- Abandonment, which means that the child’s parents have either died, or were unable to exercise custodial rights, and did not make adequate provisions for care and custody of the child;
- Educational neglect, where the guardian knowingly allows chronic truancy or fails to enroll the child in school, or repeatedly keeps the child at home.

NWTIS-2003 found that “physical neglect” is the most common form in the NWT. Cindy Blackstock, an expert in aboriginal child welfare and Executive Director of the First Nations Child and Family Caring Society, suggests there is a link between poverty and high rates of physical neglect in aboriginal communities. She goes on to say that in these cases, parents do not actively maltreat their children, but socio-economic circumstances prevent parents from providing adequately for their children, particularly when measured against “white, middle-class, urban standards of living.”

**Figure 3: Household Risk Factors (2003)**

<table>
<thead>
<tr>
<th>Household Risk Factors</th>
<th>Canada</th>
<th>NWT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Social Assistance/benefits</td>
<td>25%</td>
<td>24%</td>
</tr>
<tr>
<td>Public housing</td>
<td>13%</td>
<td>24%</td>
</tr>
<tr>
<td>Unsafe conditions</td>
<td>9%</td>
<td>11%</td>
</tr>
<tr>
<td>Move in past 12 months</td>
<td>17%</td>
<td>20%</td>
</tr>
<tr>
<td>Two or more moves</td>
<td>7%</td>
<td>11%</td>
</tr>
</tbody>
</table>

To understand which characteristics or risks affect the rate of maltreatment, the CIS and NWTIS looked at several known household risk factors. Figure 3 relates several indicators of poverty and housing problems to the incidence of maltreatment. The table shows that poverty is only one factor that may be related to maltreatment. For example, in the NWT where 24% of cases involve parents dependent on social assistance benefits, 43% of cases involve families living in public housing. Public housing appears to be a more significant indicator of risk than the other categories measured in Figure 3. This suggests that the conditions in public housing (especially poverty), and a lack of support for families in public housing, have serious repercussions for child welfare. But the comparison with Canada is not as extreme as it appears. Public housing accounts for a much larger portion of all housing in the NWT, especially in small communities, than in Canada. Taking this into account would bring the NWT rate of maltreatment in public housing closer to the national rate.
Figures 4 and 5 show parental risk factors by gender. These figures clearly indicate the prevalence of alcohol abuse among parents in contact with Child and Family Services, particularly in the NWT. They also show that domestic violence, when the mother is the victim and the father is the perpetrator, is another key parental risk factor in cases of child maltreatment.

This section has shown a number of key issues in child welfare, many of which are similar across Canada. Although comparisons between Canada and the Northwest Territories show differences in the rate of maltreatment and the types of cases, there are common issues and concerns. (Data for Canada’s rate of the male caregiver as a perpetrator of domestic violence in maltreatment cases was not included in the CIS report.) We will discuss common concerns in greater detail in the following section, which explores emerging trends in child welfare across Canada.
EMERGING ISSUES AND TRENDS

As child welfare services improve and adapt to society’s changing goals and expectations, structural, philosophical and service trends develop. Within Canada, and in most western countries, many child welfare issues are common to all jurisdictions. Legislation and models are often adopted from other jurisdictions both inside and outside of Canada. When a majority of jurisdictions move in similar directions in their structures, philosophy or service, it is considered a trend.

Emerging trends in contemporary child welfare include:

- A shift from a volunteer to a professional service system
- The consideration of foster and adoptive parents as part of a professional team
- Provincial governments have accepted direct responsibility for the delivery of child welfare services through public financing, agency reporting, and provincial supervision
- A shift from institutional, protection-oriented services to non-institutional and prevention-oriented services
- The promotion of the protection, best interests, and well-being of the child
- A shift towards consideration for both children’s rights and family preservation
- The introduction of neglect and emotional harm as grounds for protection
- Clearly defining the legal obligation of the public’s duty to report
- Greater emphasis on placing children with relatives and friends instead of putting them in care
- Greater role for permanent options
- Culturally appropriate responses
- Differential response for critical and non-critical incidents

Family-based care as a preferred option

Research by the University of Manitoba found that children in therapeutic foster care and family-based care do better than children in residential care. Children in these less restrictive placements do better in school and fall into less criminal activity, compared to children in residential group care. Not only are the outcomes better, but the cost of family-based care and foster care is as much as 30% less than group care (Kluger et al, 2001, p.158-160).

One form of family-based care is kinship foster care, where children are fostered by their relatives. This is an increasingly common response to rising child welfare caseloads. One major challenge is the reluctance of family to terminate parents’ rights by adopting the children they foster (Barbell & Freundlich, 2001, p.22). Some jurisdictions are overcoming this problem with a new option called “guardianship care.” It represents a permanent status between foster care and adoption. In such cases, the province retains legal guardianship of the child until adulthood. The outcomes of guardianship care, according to preliminary research, are similar to those of adopted children, when using measures of relationship stability and permanency (Barbell & Freundlich, 2001, p.22).
The more we learn about child welfare practices across Canada and the world, the more complex they seem to become. The government agency responsible for child welfare – in the NWT, Child and Family Services – must carefully balance immediate risks and its obligation to protect children from harm, abuse and neglect. This balance is complicated by periodic shifts between putting more emphasis on child protection, versus family support. Ensuring the interests of families, communities and cultural groups adds a new dimension and new challenges to managing child welfare services.

LEGISLATION

As noted earlier, each province and territory develops its own child welfare legislation, but most of the legislation across Canada shares common characteristics. This is, for the most part, because trends in child welfare follow recognized ‘best practices’ or models that have proven effective – at least more effective than others.

In Canada, the legislation in each of our provinces and territories has the following common features:

- The best interests of the child must be considered when a child is found to be in need of protection.
- The parent’s primary responsibility for child-rearing is respected.
- It is acknowledged that continuity of care and stability are important for children.
- The views of children are important in making decisions that affect their futures.
- Cultural heritage should be respected, especially for aboriginal children.
- It is the public’s duty to report suspected harm, abuse and neglect of children.

Table 1: Child and Family Services across Canada

<table>
<thead>
<tr>
<th>Jurisdiction</th>
<th>Approach</th>
<th>Use of Collaborative Processes</th>
<th>Advocate</th>
<th>Community Involvement</th>
<th>Aboriginal Child Welfare</th>
</tr>
</thead>
<tbody>
<tr>
<td>British Columbia</td>
<td>Protection &amp; Prevention</td>
<td>Open &amp; flexible</td>
<td>Representative for Children and Youth</td>
<td>Planning &amp; delivery, Community tribunals</td>
<td>Requirement to serve notice to the band, Prioritize kith &amp; kin placements</td>
</tr>
<tr>
<td>Alberta</td>
<td>Protection</td>
<td>Mediation for Plan of Care</td>
<td>Child &amp; Youth Advocate</td>
<td></td>
<td>Cultural Connection Planning, Require guardians to allow children to exercise rights as Indians, band involvement in service planning</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>Protection &amp; Prevention</td>
<td>Mediation for Plan of Care</td>
<td>Children’s Advocate</td>
<td></td>
<td>Aboriginal representative, Agreements with Aboriginal Organizations</td>
</tr>
<tr>
<td>Jurisdiction</td>
<td>Approach</td>
<td>Use of Collaborative Processes</td>
<td>Advocate</td>
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<tr>
<td>Manitoba</td>
<td>Protection &amp; Prevention</td>
<td></td>
<td>Children’s Advocate</td>
<td>Problem solving, Leadership Council</td>
<td>Regional Aboriginal Child and Family Services Authorities</td>
</tr>
<tr>
<td>Ontario</td>
<td>Protection &amp; Prevention</td>
<td>Court adjournment &amp; Aboriginal dispute resolution</td>
<td>Provincial Advocate for Children &amp; Youth</td>
<td>Community agreements, media representative at hearings</td>
<td>Aboriginal Child and Family Services Authorities, bands may be party to hearings, Customary care subsidy, Bands may submit plan of care that must be considered before adoption, regular consultation with bands, regular review of the Act to ensure appropriateness</td>
</tr>
<tr>
<td>Quebec</td>
<td>Protection</td>
<td></td>
<td>Commission for Human Rights &amp; Rights of the Child</td>
<td>Requirement to seek assistance from persons or organizations active in the child’s community</td>
<td>Agreements with First Nations for special youth protection programs</td>
</tr>
<tr>
<td>New Brunswick</td>
<td>Protection &amp; Prevention</td>
<td>Mediation, Family Group Conferences, Court adjournment</td>
<td>Child &amp; Youth Advocate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>Protection &amp; Prevention</td>
<td>Mediation</td>
<td>Ombudsman (Children’s Section)</td>
<td></td>
<td>Aboriginal Child and Family Services Authorities, requirement to serve notice to bands, bands may be party to hearings, prioritize placements within same culture, race &amp; language</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>Protection</td>
<td>Mediation for Plan of Care</td>
<td></td>
<td>Aboriginal representative may make a submission at a hearing, requirement to serve notice to bands, requirement to consult the aboriginal representative on plan of care</td>
<td></td>
</tr>
<tr>
<td>Newfoundland and Labrador</td>
<td>Protection &amp; Prevention</td>
<td>Open &amp; flexible</td>
<td>Child &amp; Youth Advocate</td>
<td></td>
<td></td>
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<tr>
<td>Jurisdiction</td>
<td>Approach</td>
<td>Use of Collaborative Processes</td>
<td>Advocate</td>
<td>Community Involvement</td>
<td>Aboriginal Child Welfare</td>
</tr>
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<tr>
<td>Nunavut</td>
<td>Protection &amp; Prevention</td>
<td>Mediation</td>
<td>Community Agreements, Child and Family Services Committees, Community Standards</td>
<td>Requirement to serve notice to bands, may delegate responsibilities to Aboriginal Organizations</td>
<td></td>
</tr>
<tr>
<td>Northwest Territories</td>
<td>Protection &amp; Prevention</td>
<td>Mediation</td>
<td>Community agreements, Child and Family Services Committees, Community standards</td>
<td>Requirement to serve notice to bands, may delegate responsibilities to Aboriginal Organizations, bands may be party to the Plan of Care agreement</td>
<td></td>
</tr>
<tr>
<td>Yukon</td>
<td>Protection &amp; Prevention</td>
<td>Open &amp; flexible</td>
<td>Planning &amp; delivery, requirement to serve notice to community groups, Community agreements</td>
<td>The Act was created with First Nations, Aboriginal Service Authorities planning &amp; delivery, requirement to serve notice of investigations and hearing, bands may be party to hearings, prioritize kith &amp; kin placements</td>
<td></td>
</tr>
</tbody>
</table>

Some of the legislation differs in philosophy, approach and implementation. Prevention is a significant area that differs among some Canadian jurisdictions. As shown in Figure 6, Alberta, Quebec, and Prince Edward Island take a purely protection-oriented approach, requiring a child to be in need of protection before services can be provided to the child or family. The rest of Canada takes an approach that includes both protection and prevention, where voluntary and preventive services can be offered to children and families. The goal of this practice is to avert the need to remove children, reducing the risk of harm, abuse, or neglect before it happens.

Other differences in implementation include the extent to which dispute resolution is used, whether a Child Advocate or an equivalent exists, the degree that the community may be involved in child welfare, and how aboriginal child welfare is managed, among others.
Child welfare and residential schools

The Northwest Territories had several residential schools that played an important part in child welfare policy, as in the rest of Canada. Their legacy continues to weaken individuals’, families’, and communities’ trust in, and experiences with Child and Family Services.

During the 1800s, the Government of Canada became responsible for the education of aboriginal people throughout the country. The government’s policy-makers thought that aboriginal children would be more likely to succeed in society if they learned English and adopted Christianity and Euro-Canadian customs, and then passed this lifestyle on to their children. Within a few generations of following this “aggressive assimilation” policy, it was expected that native traditions would disappear. Attendance at residential schools was mandatory and agents from the Department of Indian Affairs monitored attendance. If a parent did not send their child to school, it was seen as grounds for child welfare intervention, so many children were removed from their homes and forced to attend residential schools.

“It’s like you are in a foreign country and someone has taken your children and there is nothing you can do.” — Fred Sangris, N’dilo

On April 1, 1955, the federal Department of Northern Affairs and National Resources unified the school system in the Northwest Territories under the control of the government. Prior to this date, northern schools were still run by private organizations, such as the Roman Catholic and Anglican churches, mining companies, the Indian Affairs Branch, the Northwest Territories Council, and local school boards. There were 2,067 students in 76 classrooms with 92 teachers across the NWT during the school year of 1954-55, according to John Milloy, in his book, A National Crime: The Canadian Government and the Residential School System, 1879 to 1986.

By the mid-1950s, many of the residential schools in the Northwest Territories were in disrepair after being underfunded for many years. After taking control of the schools, the federal government began a program of expansion and replacement. To house all these new students, large residences were built next to the day schools. Later in the 1950s and into the early 1960s, seven large residence halls were built: Fleming Hall in Fort McPherson, Bompas Hall and Lapointe Hall in Fort Simpson, Breynat Hall in Fort Smith, Grollier Hall and Stringer Hall in Inuvik, and Akaitcho Hall in Yellowknife. These schools, though administered by the federal government, were turned over to the Roman Catholic and Anglican churches to operate, except for Akaitcho Hall.

“Our community has had too many children taken away.” — Steve Kotchea, band councilor, Fort Liard

Students at residential schools were often forced to speak English and not allowed to practice their traditions. If they were caught breaking these rules they were severely punished. The students lived in substandard conditions and often endured physical, sexual and emotional abuse. In many cases,
they were not allowed to return home to spend time with their families. School ran for 10 months each year. Rarely did students have the opportunity to see or experience normal family life.

When aboriginal students returned to their communities they often found they no longer fit in. They often could not speak their native language, so communicating with their parents was difficult. Returning students did not know how to hunt, fish, or live on the land. Learning these skills and other traditional activities was difficult, because they had lost their language, and had been taught to be ashamed of their heritage.

In 1967, following the Carrothers Commission, Yellowknife became the capital of the Northwest Territories. The federal government transferred responsibility for education, small business, public works, social assistance and local government to the Government of the Northwest Territories.

In September 1969, the Government of the Northwest Territories established the Department of Education, which continued to expand the day-school system. By 1969 there were 10,291 students and 549 teachers in the Northwest Territories, which then included Nunavut. It was assumed at this point that the goal of having all school-aged children attending school had been met. By 1960, most of these students could attend elementary school in their home communities. Still, for many students, continuing their education at junior and high school levels required leaving their families and homes for larger communities. Most students were sent to large residential halls located in regional centres, although home boarding was arranged for some. For many, life in residential halls was challenging. Being separated from family, friends, community and culture had a lasting impact on most students. Some also faced violence, maltreatment and abuse, which became part of a cycle that plagues the Northwest Territories to this day.

As the Government of the Northwest Territories continued to build new schools and add grade levels at existing community schools, there was less need for residential halls. Some were closed, while others came under the operation of local or regional school boards.
Figure 6: Residential Schools in the Northwest Territories

NT-1 Aklavik Anglican Indian Residential School (All Saints Indian Residential School) (AN) Shingle Point; opened 1927; moved to Aklavik 1934 due to overcrowding; closed 1959.


NT-3 Fort McPherson Indian Residential School (OO) Fort McPherson; opened 1898; closed 1970; non-denominational; Fleming Hall (AN) opened 1958.

NT-4 Fort Providence Indian Residential School (Sacred Heart Mission Indian Residential School) (RC) Fort Providence; opened 1867; closed 1953.

NT-5 Fort Resolution Indian Residential School (St. Joseph’s) (RC) Fort Resolution; opened 1903; closed 1958.


NT-7 Hay River Indian Residential School (St. Peter’s Mission Indian Residential School) (AN) Hay River; opened 1894; closed 1949.


NT-9 Fort Franklin Federal Hostel (OO) Opened early 1960s.

NT-10a Fort Smith Breynat Hall (RC) Opened 1959, closed 1975.


Denominations:

<p>| | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>(AN)</td>
<td>Anglican Church</td>
</tr>
<tr>
<td>(BP)</td>
<td>Baptist</td>
</tr>
<tr>
<td>(MD)</td>
<td>Methodist</td>
</tr>
<tr>
<td>(OO)</td>
<td>Other</td>
</tr>
<tr>
<td>(PB)</td>
<td>Presbyterian Church</td>
</tr>
<tr>
<td>(RC)</td>
<td>Roman Catholic Church</td>
</tr>
<tr>
<td>(UC)</td>
<td>United Church of Canada</td>
</tr>
</tbody>
</table>

Sources: Assembly of First Nations: [http://www.afn.ca/residentialschools/nwt_schools.html](http://www.afn.ca/residentialschools/nwt_schools.html); Aboriginal Healing Foundation; Anglican Church of Canada; Blondin-Perrin, Alice, My Heart Shook Like A Drum; Canadian Press; Milloy, John, A National Crime; Nunatsiaq News; Truth & Reconciliation Commission of Canada.
The Principles of the Child and Family Services Act

Section 2. This Act shall be administered and interpreted in accordance with the following principles:

(a) the paramount objective of this Act is to promote the best interests, protection and well-being of children;
(b) children are entitled to protection from abuse and harm and from the threat of abuse and harm;
(c) parents should use methods other than force by way of correction towards their children or in the discipline of their children;
(d) the family’s well-being should be supported and promoted;
(e) parents are responsible to care and provide for and to supervise and protect their children;
(f) measures taken for the protection and well-being of children should, as far as possible, promote family and community integrity and continuity;
(g) communities should be encouraged to provide, wherever possible, their own child and family services;
(h) children, where appropriate, and parents should participate in decisions affecting them;
(i) children, where appropriate, parents, and adult members of the extended family should be given the opportunity to be heard and their opinions should be considered when decisions affecting their own interests are being made;
(j) there should be no unreasonable delay in making or carrying out a decision affecting a child;
(k) services to children and their families should cause the least amount of disruption to the family and should promote the early reunification of the child with the family;
(l) children should be supported within the context of their family and extended family to the greatest extent possible by the Director providing services or assisting others in providing services on a voluntary basis to support and assist the family;
(m) children removed from their family should be provided with a level of care adequate to meet their needs, within available resources, and consistent with community standards;
(n) consistent with the United Nations Convention on the Rights of the Child, adopted by the General Assembly of the United Nations on November 20, 1989, persons who have attained the age of 16 years but have not attained the age of majority and cannot reside with their parents should be supported in their efforts to care for themselves.
The Child and Family Services Act has several features making it unique in Canadian child welfare legislation; primarily, the recognition of aboriginal culture and the participation of communities in the provision of child welfare services and decision-making. These features are a response to criticism of the traditional, western, top-down approach to child welfare that has contributed to many of the problems faced by aboriginal communities across Canada and the Northwest Territories. This part of the report discusses in more detail the unique features of the Northwest Territories’ Child and Family Services Act.

The main objective of the Act is to protect the well-being of children and promote “the best interests of the child.” The “best interests of the child” are outlined in the NWT Children’s Law Act, and are used to determine how to make decisions meant to protect the well-being of children.

The Child and Family Services Act is described as an “entitlement” Act. It differs from other legislation in that it ‘entitles’ or grants children special rights to services and support meant to protect them from abuse, harm, neglect, and the threat of maltreatment. The idea of children having special rights, and especially rights to protection by government from maltreatment, is detailed in the United Nations Convention on the Rights of the Child. This international legislation has been signed and ratified by Canada and is binding in all its provinces and territories.

Another feature of the Child and Family Services Act that differentiates it from the law in other jurisdictions is that it encourages prevention and family support interventions as ways to lessen protection concerns, before they become so severe that the child must be removed from the care of the parent. The Act encourages prevention and family support in the following ways:

a. By allowing Child and Family Services to provide prevention and support services to strengthen families;
b. By providing services to resolve family crisis;
c. By providing services to protect children within the family and community;
d. By allowing family-based resolution of child safety and protection issues;
e. By allowing the community to become involved in child safety and protection issues;
f. By requiring child protection workers to always try to support children and families in their communities and to use the least intrusive method of intervention first.

Geography and the distribution of the population of the NWT played a role in the design of the Act. The large number of predominantly aboriginal communities meant there was a need to recognize aboriginal culture and traditional decision-making with respect to children. The Act recognizes custom adoption and encourages kinship care and aboriginal placements. The Act also requires that all children in care must be allowed to enjoy and participate in their culture and traditions, and that as much as is possible, the child should be allowed to maintain connections with family, community and culture. It also encourages the involvement of band councils in child welfare processes, and requires that when a protection hearing takes place involving an aboriginal child, his or her band council be notified, so a representative may be present and participate.
Another way aboriginal rights and culture are recognized is in provisions for community agreements, community standards, and local Child and Family Services Committees. The Act allows a non-profit, corporate body of an aboriginal organization to enter into a community agreement with the Minister responsible for Child and Family Services, delegating certain responsibilities or authority. In this way, the community takes part in the Plan of Care Agreement process for local children who may need protection. Part of the aboriginal organization’s role is to ensure that the special needs and rights of aboriginal children are respected and provided for. When an aboriginal organization is able to take on greater responsibility, the Director may delegate responsibility for providing services, such as prevention, early intervention, family support, and in some cases, placement services. Through the corporation, the community may choose to set its own standards for the protection and care of local children. These standards must meet at least the basic standards set out in the Child and Family Services Act.

There are similar provisions for community councils to set up Child and Family Services Committees, and take on responsibilities for child welfare services.

An important part of the community agreement provides for a local Child and Family Services Committee to be set up to take part in the child protection process. This provision is unique in Canada. Once formed, the Child and Family Services Committee is expected to discuss the cases of children in need of protection, and provide input to the child protection worker and Plan of Care Committee. The committee can also engage in activities to raise public awareness, encourage community dialogue and prevent protection concerns from developing.

There have been several amendments since the Act came into force in 1998.

In 2002, two additions were made:

a. The risk of neglect and family violence became a basis for finding a child in need of protection; and,

b. Provisions for services to youth from 16 to 18 years old, in the form of support service agreements.

In 2008, two changes were made:

a. Child protection workers were required to bring matters before the court within four days following the apprehension of a child; and,

b. The director’s authorities were changed to require the court’s consent to provide medical treatment in child protection cases.
This section provides a list of legislation in the Northwest Territories that governs the welfare of children and families. The Departments of Health and Social Services, and the Department of Justice are responsible for implementing this legislation.

<table>
<thead>
<tr>
<th>Statute</th>
<th>Implementing Department</th>
<th>Date of coming into force</th>
<th>Date of last amendment</th>
<th>Purpose</th>
</tr>
</thead>
<tbody>
<tr>
<td>Aboriginal Custom Adoption Recognition Act</td>
<td>Health &amp; Social Services</td>
<td>1995</td>
<td>1998</td>
<td>Recognizes aboriginal customary adoptions; sets out procedures for issuing a certificate that has the same effect as an order of court.</td>
</tr>
<tr>
<td>Adoptions Act</td>
<td>Health &amp; Social Services</td>
<td>1998</td>
<td>2008</td>
<td>Sets out the law for timely, orderly adoption of children, guided by the objective of the best interests of children, recognizing different cultural values and practices. Establishes the legal status of a child within a family.</td>
</tr>
<tr>
<td>Child and Family Services Act</td>
<td>Health &amp; Social Services</td>
<td>1998</td>
<td>2008</td>
<td>Sets out the law for child protection, based on the principle of the ‘best interests of the child.’ It bestows powers and duties for child welfare upon the Minister of Health and Social Services, who may appoint and delegate them to a Director of Child and Family Services. It requires the Director to investigate referrals and protect children from harm, abuse and neglect, which may involve removing children from their families and putting them under the guardianship of the Director.</td>
</tr>
<tr>
<td>Children’s Law Act</td>
<td>Justice</td>
<td>1998</td>
<td>2004</td>
<td>Provides for the establishment of the status of children, recognition of parentage of a child, mutual obligations of parents to care for and support their children. It also provides for decision-making concerning custody of, access to children, and guardianship of the estates of children, guided by the principle of the best interests of the child, while respecting differing cultural values and practices.</td>
</tr>
<tr>
<td>Family Law Act</td>
<td>Justice</td>
<td>1998</td>
<td>2002</td>
<td>Provides for the establishment of “domestic contracts”, and “support obligations”; it deals with “family property” and the “family home”. It also set out provisions for “mediations” and “restraining orders”.</td>
</tr>
</tbody>
</table>
Who is responsible for the delivery of child and family services in the NWT?

The delivery of child and family services is the responsibility of the Department of Health and Social Services. Child and family services fall within the domain of Social Services, which is somewhat separate from the department's medical and health component. The Minister of Health and Social Services appoints one director of Child and Family Services. There is currently one manager, and eight staff working at the departmental level for Child and Family Services.

The Child and Family Services Division is made up of three main program services units:

1. The **Child and Family Services Unit** covers operations for the following program areas:
   - Child protection
   - Foster care
   - Child and Family Service Information System (CFIS)/records
   - Southern treatment
   - Training
   - Quality assurance
   - Adoptions
   - Interprovincial desk
   - Mental Health and Addictions

2. The **Office of the Public Guardian** is responsible for:
   - Legal applications for guardianship
   - Assessments
   - Guardianship orders
   - Guardianship reviews
   - Alberta orders

3. The **Prevention Services Unit** covers operations for the following program areas:
   - Family violence
   - Homelessness
   - Health promotion
   - Early childhood development
   - Fetal Alcohol Spectrum Disorder (FASD)
   - Federal wellness programs/funding
   - Disabilities

In the Northwest Territories there are eight regional Health and Social Services Authorities providing both health care and social services to local residents. Within these authorities there are 12 Child
and Family Services supervisors and approximately 60 social workers with the designation of Child Protection Worker. In order to receive the designation, a social worker must complete a one-week training session covering the basics of child protection legislation and implementation.

What are some of the challenges to the delivery of child and family services in the NWT?

The Northwest Territories faces many significant barriers to the delivery of child and family services that are also faced by other jurisdictions, including:

- High workloads for child protection workers, leading to burnout;
- Expanding scope/intensity of service needs, coupled with shrinking resource base of adequately trained professionals;
- The ever-changing role of social workers;
- Lack of cultural competency.

The NWT has some unique barriers to child welfare service delivery. The causes are many, and range from geography and climate to population and culture. Of particular importance are:

- Geographic isolation of communities and workers;
- Personal safety concerns;
- Adequate and appropriate housing for staff;
- Lack of mentorship support for new graduates;
- Lack of robust training opportunities;
- Lack of comprehensible policies and procedures, set out in a practice manual;
- An unregulated Social Work profession;
- Only producing Northern Diploma graduates while positions require a Bachelor of Social Work (BSW), or the equivalent, to enter the workforce;
- Lack of an efficient computerized information system, suitable for data collection and ongoing analysis.

How does the NWT’s unique culture and ethnicity affect the delivery of child and family services?

The NWT population is divided almost equally between aboriginal and non-aboriginal northerners. However, these two groups are very unevenly distributed throughout the territory. Roughly 70% of the non-aboriginal people live in Yellowknife, with most of the remainder residing in regional centres. Overall, a slight majority of aboriginal people live in small, more traditional communities, leaving almost half the aboriginal population living in regional centres. This has had a tremendous effect on the delivery of child and family services.
Not only has government been historically dominated by non-aboriginal northerners, but government-run child welfare agencies have been criticized for continuing a legacy of service inconsistent with aboriginal culture. In many jurisdictions across Canada, child welfare agencies have struggled to shed their poor reputation – one that stems from the days of residential schools and the aboriginal child welfare policies of the federal government.

“I was passionate about it [social work] but left because I was tired. My strongest belief is that legislation should reflect the NWT’s uniqueness. I had to do a permanent wardship application for a child and I didn’t agree with it. It was the department’s recommendation, not mine. I decided not to go to court because I couldn’t go through with it. They used my case notes and put the child in permanent wardship. I felt I failed and the department failed, not the parents. The girl felt that they gave up on her parents. Permanent wardship isn’t right for small aboriginal communities. Extended family should be included and should take the children.”

– Violet Edgi, former child protection worker in Fort Good Hope and Tulita

The delivery of child and family services in the NWT continues to be burdened by southern-dominated policy and practice. This problem is compounded by the human resources challenges facing the department, which have forced it to look south when hiring new recruits. Many child protection workers are coming from outside the NWT, which multiplies the challenges they face in adapting to the remote northern lifestyle. Too little has been done to help them overcome culture shock, build awareness of aboriginal culture, and familiarize southern-hires with northern communities. At the same time, training and recruiting aboriginal child protection workers continues to be difficult.

“Social workers need to be trained to differentiate when a parent is unable to meet a child’s basic needs due to poverty and wilful neglect. The former should not be grounds for removal, but rather calls for in-home investments which are at least on par with what a foster payment would be, to keep the child safely at home.” – Cindy Blackstock, from “I Want To Grow Up In My Community: A Review of the Child & Family Services Act”

Aboriginal health and well-being is a core objective of the department. Although general health has improved in recent decades, when compared to the rest of the NWT, aboriginal people continue to have poorer than average health. Social, cultural and economic factors such as low income, poor housing conditions, and low educational achievement get in the way of a healthy lifestyle. This is, once again, the legacy of residential schools and cultural loss.

According to the Department of Health and Social Services’ 2009/2010 Annual Business Plan;

“Children in Care: Over the past decade in Canada, studies have shown that children in need of protection are increasing significantly. The Child Welfare League of Canada reported that in 1997 there were 36,080 children in care (excluding Quebec) and in 1998/99 this number increased to 46,397 children in care (excluding Quebec). Nationally, 30-40% of children in care are aboriginal. An annual March snapshot indicates that the number of children in the NWT receiving [child welfare] services has increased in the past five years, from 508 children in 2003 to 625 children in 2008: an overall increase of 117 children receiving services. The number of children in permanent custody has also increased from 171 children in 2003 to 223 children in 2008.”

We can see there are very real and significant challenges to the delivery of child and family services in the Northwest Territories. Let is examine how Child and Family Services has been dealing with them.
FACTS AND FIGURES

Earlier we described how the NWT compares to Canada in terms of the rate of maltreatment of children. Now we will go into more detail about the children in care, and the implementation of child welfare in the Northwest Territories. Our purpose is to analyse whether the principles and objectives of the Child and Family Services Act are being carried out and realized.

How is Child and Family Services doing in terms of prevention and family support?

“…the family is the basic unit of society and its well-being should be supported and promoted…”

— Preamble of the Child and Family Services Act

The Child and Family Services Act represents a break from the previous Child Welfare Act of 1988. For the first time, the Act enabled Child and Family Services to serve and support families before a child was found to be in need of protection. However, our prevention services are probably more accurately described as ‘early intervention services’ because they are designed for families and children already experiencing one form of difficulty or another, raising the potential for more serious protection measures. There are two routes to receiving services from Child and Family Services; if a child protection worker investigates a referral and finds that a child is not in need of protection, but that protection concerns may develop; or, by self-referral, when parents come to Child and Family Services to ask for help when they are experiencing a crisis or stress.

The Healthy Families Program is an important and highly-valued component of Child and Family Services, active in four communities: Yellowknife, Hay River, Fort Smith, Behcho K‘o. It is a free and voluntary home visitation program for families with prenatal to five-year-old children. The home-visitors promote positive parenting, healthy childhood growth and development, and parent-child bonding. In addition, home-visitors link parents with other services and programs available in the community. Families can either refer themselves or be referred by a doctor or nurse. Unfortunately, the resources available to the Healthy Families Program limit how many families can be assisted at any one time. In all four communities, the program is fully subscribed and demand for it exceeds capacity.

Despite earlier interventions and the limited prevention services available to NWT residents, child protection and welfare is still a growing issue. According to the 2003 NWT Incidence Study (NWTIS), child maltreatment continues to increase in the territory. Figure 7 shows a significant increase in children receiving help from Child and Family Services between 1999 and 2002. But since that time, the numbers have been relatively stable, between 970 and 1075, which is inconsistent with the rise in maltreatment reported across Canada and in the NWT. About one out of every 12 children in the NWT receives one or more child welfare service.

“The higher rate of substantiated neglect and exposure to domestic violence in the NWT identifies the need to examine alternative styles of service delivery best-suited to support families at risk for neglect, and families experiencing domestic violence within the home.”

Figure 7: Total Number of Children Receiving Services by Fiscal Year in the NWT

![Total Number of Children Receiving Services by Fiscal Year](image)

Source: Child and Family Services presentation to the Standing Committee on Social Programs, November 2009

Figure 7 shows the 1999-2002 increase in children accessing Child and Family Services, following the coming into force of the current Child and Family Services Act in 1998, and the expansion of voluntary services that became available to families. However, Figure 8 shows that voluntary services make up less than half the services provided by Child and Family Services, though they approach more even proportions. Between 2000 and 2009, an average of 223 children and their families have accessed voluntary services each year, in a total of 33 communities. This is a relatively small number of families accessing prevention or early intervention services for child welfare, considering the magnitude of the problem in the NWT.

Figure 8: Comparison of Children under Protection Status versus Voluntary Status

![Comparison of March 31 Day Count Protection vs. Voluntary Status](image)

Source: Child and Family Services presentation to the Standing Committee on Social Programs, November 2009
As we have discussed earlier in this report, there are many non-child welfare related reasons for children being at risk of maltreatment – poverty, homelessness and poor housing, alcoholism, instability, lack of education, poor literacy, etc. These problems do not get enough attention from government. By failing to fight poverty and the root causes of maltreatment, government is contributing to the problem. An effective and coordinated response must come from multiple departments, particularly Health and Social Services; Education, Culture and Employment; Justice; and the NWT Housing Corporation.

"My son has to raise his family in the bush because he has no work, no house, no childcare. I have to drive out to the bush to visit them. Grandparents like me feel helpless to help our grandkids. We didn’t have all the supports when I grew up and we got by, but now it’s impossible." – Mariah Storr, Inuvik

Are we using the least intrusive measures?

“…services to children and their families should cause the least amount of disruption to the family and should promote the early reunification of the child with the family…”

– Principle 2(k) of the Child and Family Services Act

In many communities, Child and Family Services is synonymous with removing children from their homes and sending them far away, even outside the NWT in many cases. Figure 9 shows that since 2000 there has been some increase in the number of children receiving services outside the NWT, but this number has remained below 6% of all children receiving services. Figure 9 also shows a slow increase in the number of children receiving services in their homes. Meanwhile, the majority of children receiving services continue to get them outside their homes – in some form of placement such as foster care, group homes, or treatment centres.

Figure 9: Location of Placement for Children Receiving Services

Placement of Children Receiving Services Yearly One Day Count as of March 31st

Source: Child and Family Services presentation to the Standing Committee on Social Programs, November 2009

*Note: “In NWT” refers to all out-of-parent/guardian home placements, such as foster care or treatment centers within the NWT.
Table 2 indicates that in 2007, the NWT had the highest proportion of children in out-of-home care in all of Canada. Figure 9 and Table 2 show that the NWT is having the greatest trouble keeping families that require services together. Of course, what these do not show is how many children are taken out of their communities and brought to either Yellowknife or a regional centre for placement. So, while it is a positive sign that relatively few children require services that cannot be provided in the NWT, many continue to be moved far from their families. This is done because services and/or placements are unavailable in their home communities. Intrusive measures like this cause great disruption in the family, and dim the prospects for reunification.

Table 2: Children and Youth in Out-of-Home Care in 2007 by Jurisdiction

<table>
<thead>
<tr>
<th>Province</th>
<th>Children in care</th>
<th>Child (0-18) population</th>
<th>Rate per 1000</th>
</tr>
</thead>
<tbody>
<tr>
<td>British Columbia</td>
<td>9,271</td>
<td>915,168</td>
<td>10.1</td>
</tr>
<tr>
<td>Alberta</td>
<td>8,891</td>
<td>841,392</td>
<td>10.6</td>
</tr>
<tr>
<td>Saskatchewan</td>
<td>5,447</td>
<td>251,271</td>
<td>21.7</td>
</tr>
<tr>
<td>Manitoba</td>
<td>7,241</td>
<td>297,004</td>
<td>24.4</td>
</tr>
<tr>
<td>Ontario</td>
<td>18,763</td>
<td>2,931,745</td>
<td>6.4</td>
</tr>
<tr>
<td>Quebec</td>
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<td>1,625,581</td>
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<tr>
<td>New Brunswick</td>
<td>1,388</td>
<td>154,395</td>
<td>9.0</td>
</tr>
<tr>
<td>Nova Scotia</td>
<td>1,706</td>
<td>194,389</td>
<td>8.8</td>
</tr>
<tr>
<td>Prince Edward Island</td>
<td>166</td>
<td>31,713</td>
<td>5.2</td>
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<tr>
<td>Newfoundland</td>
<td>1,329</td>
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<td>12.9</td>
</tr>
<tr>
<td>Yukon</td>
<td>178</td>
<td>7,212</td>
<td>24.7</td>
</tr>
<tr>
<td><strong>Northwest Territories</strong></td>
<td><strong>395</strong></td>
<td><strong>12,810</strong></td>
<td><strong>30.8</strong></td>
</tr>
<tr>
<td>Nunavut</td>
<td>197</td>
<td>12,839</td>
<td>15.3</td>
</tr>
<tr>
<td><strong>Canadian Total</strong></td>
<td><strong>67,706</strong></td>
<td><strong>7,378,376</strong></td>
<td><strong>9.2</strong></td>
</tr>
</tbody>
</table>

Source: Mulcahy and Trocme (2010), Children and Youth in Out-of-home Care in Canada, CECW 2010 #78E

On a more positive note, the ability for families to receive voluntary services has stimulated the use of less intrusive measures. Voluntary services, when they reduce the threat of harm to a child and support and strengthen the family, are an effective way to manage protection concerns. While much harder to measure, prevention services and family supports are also crucial to reducing the use of drastic measures, such as apprehension of children.

What is the state of community engagement and empowerment in child welfare?

“…communities should be encouraged to provide, wherever possible, their own child and family services…”
– *Principle 2(e) of the Child and Family Services Act*

As of April 2010, the Director of Child and Family Services had only one community agreement for a local Child and Family Services Committee, with the Tetl’it...
Gwich’in Band in Fort McPherson. It is expected to be operating by the time this report is released. While Fort McPherson had formed a Child and Family Services Committee a couple of years earlier, it was no longer functioning as of April, 2010. The Tlíchō Government has provisions in its land claim for taking over responsibility for child and family services, but they have not yet been implemented.

Have there been improvements?

The Child and Family Services Act brought the possibility of providing voluntary and early intervention services to families in crisis. This was a significant departure from the purely protectionist approach taken under the previous Child Welfare Act. As shown above, use of voluntary services is growing and becoming more important in the implementation of the Act. With interventions happening earlier, more children are able to stay at home while receiving services.

Figure 10 shows that between 2004 and 2008 there has been a decline in apprehensions lasting longer than 72 hours. This means that when a child is apprehended, the problem is either being resolved within the 72-hour period and the child is returned home, or fewer children are being apprehended in the first place. Both are positive indicators that fewer children are entering into care through apprehension.

Figure 10: Number of New Apprehensions Longer than 72 hours, by Calendar Year

![Graph showing the number of new apprehensions longer than 72 hours by calendar year](image)

Source: Child and Family Services presentation to the Standing Committee on Social Programs, November 2009

Figure 11 shows a sharp decline in children entering permanent custody. Between 2004 and 2008 the number of new permanent wards has been cut in half. This is significant; however, it is partly explained by a large increase in children placed under permanent custody of the director in 2004.
The implementation of the *Child and Family Services Act* in 1998 resulted in several changes in the way children came into permanent custody. The maximum length of temporary custody was reduced to 24 consecutive months. That resulted in the need to make quicker decisions about seeking permanent custody orders for children in care. The consequence of this pressure was to push a larger number of children into permanent care in a short period of time.
Conclusions

Measuring child welfare outcomes is very challenging. There are several problems: knowing what to measure and how; having the resources and technology to collect data; and collecting data regularly enough to make it useful in time comparisons. This analysis has made use of most of the limited data available to Child and Family Services. Many questions remain unanswered – there are vast gaps in knowledge and information on child welfare in the NWT. A major contributor to the problem is the lack of a modern, efficient and suitable computerized information system, and a shortage of the resources necessary to overhaul the system.

Some jurisdictions have greater resources for data collection and analysis than the Northwest Territories, but most face the same kind of other limitations.

Despite our limitations, the information we have available shows great potential to:

- Make more use of prevention and early intervention services;
- Increase awareness and use of voluntary programs to improve child welfare;
- Increase the number of children receiving services in their homes instead of in custody;
- Involve communities in solutions by reaching community agreements and establishing effective Child and Family Services Committees.

These measures will serve the ultimate goal of reducing the number of children who need to be placed in permanent care, reducing the human and financial costs, and building stronger families.
PAST REPORTS AND REVIEWS

INTRODUCTION

Given the importance of child welfare in the north, it is no surprise that several studies, reports and evaluations have taken place over the last several decades. It is important to note that the Child and Family Services Act did not exist prior to 1998 and before that, child welfare was implemented under different legislation. Not only was legislation different, but child welfare philosophy, policy and practice have changed significantly since 1977, when the first of these reports was written. Noting these differences, it is interesting to read these reports with an eye for what issues have changed, what remains the same, and what progress has been made.

1977

_The study of child welfare services in the Northwest Territories for the Department of Social Development of the Government of the NWT_

By Geoffrey L. Pawson and Shirley Skinner of the University of Regina School of Social Work, November 1977

The Study on Child Welfare Services was commissioned by the Department of Social Development to determine the state of services provided under the (now repealed) Child Welfare Act of 1988. The aim was to strengthen services and lay the foundation for a new service delivery model.

Researchers had difficulty evaluating services because of the poor condition of case files. Almost 50% of the 83 cases analysed were so poorly documented that researchers could not reconstruct complete child case histories. Additionally, researchers noted that the department was not tracking some crucial areas of service evaluation, such as the “suitability of placements”. 1. A child’s “educational progress” and “future plans” were only tracked in 23% of case files.

“The Child Welfare program of the Department appears to be doing only crisis service with a small segment of the child population and only in situations where the conditions under which the child is situated cannot be tolerated.” (The Study, p. 137)

Findings:

Service availability

The Child Welfare program was only reaching children in four regional centres – Yellowknife, Inuvik, Hay River, and Fort Smith – while children in smaller communities received no protective services at all.
Overall, the quantity of services rather than the quality was found to be a problem.

More placement services were available to children in Yellowknife and Inuvik, meaning that children requiring placement services in Hay River or Fort Smith were more often sent out-of-territory for placement.

There was a distinct lack of early intervention and prevention services, and it appeared that the department was intervening only in extreme crisis situations.

Generally, the public was unhappy with the management and delivery of services and held a negative image of social workers.

Gap in services for children aged 13-18

Because of difficulty recruiting and maintaining foster homes for children between ages 13 and 18, 31% of children in this age group were placed outside the NWT.

The department was concentrating on younger children as the target group for its services and was less likely to protect children between ages 13 and 18.

Lack of clarity about what to do with children who “age-out” after being in care for an extended period of time.

Characteristics of children and families receiving services

All children receiving services had to be placed in care by the department, although 2% were placed in the home of a parent, and another 2% were placed in the home of an extended family member.

A disproportionately high number of children were experiencing educational difficulty.

Many children were expressing a variety of functioning issues (physical, emotional, cognitive or behavioural problems), which the department was not dealing with in an appropriate and timely manner.

Parental problems were the main cause of children being taken into care; among these, alcohol overuse was the most common difficulty in 64% of cases, and it triggered many of the other problems parents encountered.

Family destitution or poverty was a significant problem for 33% of families in contact with Child Welfare.

Removal and placement

At the time of the study, 309 children were in the care of the superintendent.

Almost 50% of children receiving services from the Child Welfare Program were in permanent custody.

There was an over-reliance on temporary receiving homes and a shortage of stable, long-term placement options.

The majority of foster parents were non-aboriginal.

Public opinion supported placing aboriginal children in aboriginal homes and keeping them in their communities; however, foster care standards did not translate to aboriginal homes.

Clear policy and procedures for removal were identified as being a requirement.

The need to develop a monitoring system, and more thorough and appropriate training was required for social workers.

Greater stress on existing resources was predicted for the future.
In October 1998, after the Child and Family Services Act came into force, the Department of Health and Social Services asked the Child Welfare League of Canada (CWLC) for a proactive review of child welfare services in the NWT. It was to be a comprehensive evaluation of the services, structure, management and functional performance of the Child and Family Services program, with practical recommendations to strengthen it.

The evaluation included over 200 interviews with northerners from eight communities across the NWT, and a review of 100 case files. The CWLC examined the legislation, protocols, standards and procedures governing the program, and collected caseload numbers in order to quantify case volume.

Findings:

Legislation

- The Child and Family Services Act provides a good overall foundation to develop an effective service system for children and families.
- The majority of people interviewed believed that the problems with Child and Family Services were as a result of implementation challenges rather than the Act itself.
- The addition of the Plan of Care agreement and Child and Family Services Committees are both positive aspects of the Act.
- There is greater community control in the Act; however, it is not sufficient in preparation for self-government.
- There is a significant service gap for youth 16 and 17 years old who are no longer entitled to the same services as those in permanent custody.

- In some cases, the timelines stated in the Act are not appropriate and should be evaluated.
- Case workers are challenged by the complexity and legalities of the process.
- Case workers felt that there is too great an emphasis on paperwork in the Act and forms are not being completed reliably.

"In summary, the NWT child welfare services are functioning precariously close to the edge. There are a number of warning signs that have been discussed... most notably, under-resourcing, uneven management and supervision, and weak accountability systems, which should cause concern and be prime motivators for change. ... On the other hand, the child welfare services are well positioned to take great strides forward... There are no serious impediments for change beyond the one of financial resourcing." (CWLC, p.65)

Governance and Management

- The department has been committed to the enhancement of child welfare services as much as possible with available resources.
- Social workers felt that the department has not fulfilled its management duties in terms of leadership, ability to motivate, and develop capacity of child welfare programs.
• Resource shortages are the most significant challenges facing Child and Family Services; particularly for prevention and early intervention services.
• Management and supervisory competency and capacity differ across regions.
• Managers were carrying cases, taking away from their ability to perform managerial duties.

Implementation
• There has been greater participation of community service partners, including NGOs and community organizations.
• Tools for conducting investigations are consistently used across the NWT.
• Files were being maintained following the format in the Standards Manual.
• Caseloads are too high and were stretching the limits of staff capacity.
• Case workers are operating on a reactive crisis-response basis and do not have time to be involved in ongoing counselling and community development activities.
• Little evidence of case planning or meaningful family involvement.
• The quality of Plan of Care agreements was poor and showed little evidence of child or family participation.

Human Resources
• Despite the eagerness and dedication of social workers and foster parents, there were significant deficiencies in screening, training and orientation.
• There was a lack of aboriginal persons in management, and a perceived lack of advancement opportunities for aboriginal case workers.
• A major challenge facing the department was the recruitment and retention of experienced, skilled social workers; particularly aboriginal social workers.
• Lack of training opportunities for social workers in the NWT.
• Little evidence of work with families after apprehension.
• Of children receiving services, 62% were admitted to care while only 38% were receiving services in their homes – this compared poorly to the Canadian average.
• Foster parents were concerned with the lack of process, orientation and training as well as ongoing social worker involvement and planning for children.
• Professional clinical services were inaccessible to residents of remote northern communities.

By Bruce MacLaurin, Nico Trocmè, Barbara Fallon, Lisa Pitman, and Megan McCormack

The Northwest Territories Incidence Study (NWTIS-2003) was the first territory-wide study to examine the rate of reported child maltreatment, and the characteristics of the children and families investigated by the Department of Health and Social Services’ Child and Family Services Division.

NWTIS-2003 tracked 372 child maltreatment investigations conducted across the NWT over a three-month period in fall of 2003.

Findings:

**Child Maltreatment Investigations**

<table>
<thead>
<tr>
<th></th>
<th>Total number of referrals</th>
<th>Percentage of total referrals</th>
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</thead>
<tbody>
<tr>
<td>Substantiated</td>
<td>706</td>
<td>47%</td>
</tr>
<tr>
<td>Suspected</td>
<td>327</td>
<td>21%</td>
</tr>
<tr>
<td>Unsubstantiated</td>
<td>483</td>
<td>32%</td>
</tr>
<tr>
<td></td>
<td>1,516</td>
<td>100%</td>
</tr>
</tbody>
</table>

- After neglect, exposure to domestic violence was the second most frequently substantiated category – 27% of cases.

**Child Characteristics**

- Female children made up 60% of victims of maltreatment.
- The highest incidence rates were for female children 12 to 15 years old, and female infants.
- Girls made up a larger proportion of substantiated cases involving sexual abuse, neglect and exposure to domestic violence.
- Boys were more often victims of physical and emotional abuse.
- Almost half of all substantiated cases involved a child with at least one physical, emotional, cognitive or behavioural issue.
- In 91% of substantiated cases the child was of aboriginal heritage.

**Caregiver Characteristics**

- In 43% of cases, children lived with both their biological parents, while 34% lived in a single-parent household.
- In 88% of cases, at least one physical, emotional, cognitive or behavioural issue was identified in the female caregiver. Most frequently; victim of domestic abuse (73%), alcohol abuse (61%), few social supports (47%), and a history of being maltreated as a child (38%).
- In 37% of investigations, the families made their income from full-time employment, while 25% received benefits, employment insurance, or social insurance, and the remaining 38% had unstable or unreliable sources of income.

- Most unsubstantiated referrals were made in good faith.
- Only 4% of allegations were judged to be intentionally false, while in another 10% of cases the investigating worker was unable to determine whether the referral was made in good faith.
- The majority of malicious referrals were made by parents and relatives, and involved allegations of neglect.

**Categories of Maltreatment**

- Neglect was the most common form of substantiated maltreatment – 51% of cases.
- Physical neglect, followed by abandonment, was the most common form of investigated neglect.
Case Characteristics

- In 74% of substantiated cases there had been at least one previous case opening.
- Investigations involving neglect had the highest rate of previous case opening – 81% of cases.
- In 69% of cases a referral was made by someone other than the case worker; 48% of all referrals were made by professionals who had contact with the child.
- In 13% of all cases, a referral was made for mediation or alternative response mechanisms.
- Aboriginal children experienced higher rates of ongoing service, child welfare court intervention and placement than non-aboriginal children.
- In 22% of cases a police investigation related to maltreatment was carried out, and criminal charges were laid in 4% of substantiated investigations.
- In 10% of cases a custody or access dispute was involved.
By Sandy Lee, Chair; Norman Yakeleya, Deputy Chair; and members Bill Braden, Jackson Lafferty, Robert C. McLeod, and Calvin Pokiak.

Members of the Social Programs Committee heard from citizens across the territory who voiced their concerns about the Act and its implementation during the review of Bill 5: an Act to Amend the Child and Family Services Act. These concerns echoed those brought to the attention of MLAs on a regular basis by constituents affected by the Act.

Out of the series of public meetings came six recommendations from the Committee to the Department of Health and Social Services. The recommendations, in order, were as follows:

1. The existing practice of offering translation services be continued, and that Child Protection Workers be required to take into account the emotional state and the cultural background of a person being offered translation services, and, when there is any doubt, provide the necessary translation services as a matter of course;

2. The Minister examine the issue of involving non-custodial parents in caring for apprehended children, and if necessary, make the required legislative and regulatory changes, to allow Child Protection Workers the discretionary powers to place apprehended children with the non-custodial parent on a temporary basis, providing that it is in the best interest of the child;

3. The Minister issue a directive reinforcing the use of extended families in the placement of apprehended children and that every effort be made to place children with extended family within the child’s home community, before a Child Protection Worker considers placement in a foster home, in or outside of the child’s home community;

4. The Minister direct the Department and Authorities to continue with ongoing activities and to design an adequately resourced plan to develop Child and Family Services Committees in the communities and that this plan be presented to the Standing Committee on Social Programs as part of the 2009-2010 Business Plan Review;

5. The Department work towards increasing the number of foster homes in the NWT and that a Plan, complete with numbers of existing foster homes, targeted increases and required resources be presented to the Standing Committee on Social Programs as part of the 2009-2010 Business Plans;

6. The Government provide a comprehensive response to this report within 120 days.

There was no formal response to this report before an election was called, 107 days later. No response was given to the 16th Legislative Assembly.
HAVE THE ISSUES CHANGED?

No. Each of these reports has a different focus, but many problems clearly existed prior to 1977 and continue to exist today. Some of these issues are discussed here.

Gap in services for youth

Very generally, comparing the 1977 report to the GNWT Department of Social Development to later reports shows that a gap in services for youth has existed despite changes to legislation. It appears that serving youth has posed a greater challenge to child welfare agencies because of their independence and more complex needs. The reports show that recruiting and maintaining foster homes for children over age 13 is particularly difficult. Additionally, children who “age-out” of the system after being in care for an extended period have been under-supported throughout the period covered by all these reports. They indicate that because providing appropriate services and support for youth would require additional resources and planning, they have not been adequately developed and implemented.

Removal and placement

Despite public opinion supporting the placement of aboriginal children in aboriginal homes and keeping children in their communities, throughout the period of these reports, the majority of foster parents have continued to be non-aboriginal. An important reason for this is that aboriginal homes have not been meeting the standards set for foster homes. The current Committee found that cultural factors are not sufficiently considered, and supports communities setting their own standards, consistent with provisions of the Act that have not been implemented to date.

The requirement for clear policy and procedures for removal of children from their families was raised in the 1977 report to the Department of Social Development as well as the NWTIS-2003, which indicated that child protection workers were not receiving adequate training and guidance in carrying out important duties. Members of the public remain unclear on, and even disagree about the question of when and under what circumstances children should be removed from their homes. The lack of appropriate monitoring and training for child protection workers are problems that continued to exist throughout the time period of these reports.

Characteristics of children and families receiving services

- A disproportionately high number of children were experiencing educational difficulty.
- Many children were expressing a variety of functioning issues (physical, emotional, cognitive, or behavioural), which the department was not dealing with in an appropriate and timely manner.
- Parental problems were the main cause of children being taken into care; among these, alcohol overuse was the most common difficulty, triggering many of the other problems parents encountered.
- Family destitution or poverty was a significant problem for families in contact with Child Welfare.
Human resource challenges

- Despite the eagerness and dedication of social workers and foster parents, there were significant deficiencies in screening, training and orientation.
- There was a lack of aboriginal people in management positions and a perceived lack of opportunity for advancement by aboriginal case workers.
- A major challenge facing the department was the recruitment and retention of experienced, skilled social workers; particularly aboriginal social workers.
- Lack of training opportunities for social workers in the NWT.

General

- Lack of access to basic services in remote communities.
- Resource shortages were the most significant challenges facing Child and Family Services; particularly for prevention and early intervention services.
- Greater stress on existing resources was predicted for the future.

The Reviews of 2000 and 2007

The only two reviews of the current Child and Family Services Act and its implementation were done in 2000 and 2007. The findings were strikingly consistent with the current findings of this Committee, and a telling indicator that too little has been done to address long-standing problems (in addition to those mentioned above):

- The lack of community agreements and local Child and Family Services Committees;
- A shortage of resources for prevention and early intervention services;
- A lack of community-based counselling and community development;
- Caseloads stretching the limits of staff capacity;
- Poor Plan of Care Agreements with little or no follow-up;
- Insufficient emphasis on placing children with extended family within their home community.

What members of the Standing Committee on Social Programs heard in every community it visited in 2010 is testimony to the hardship created by decades of inaction. The writing has been on the wall for many years, and it is long past time to deliver on the promises made to the people of the Northwest Territories.
RECOMMENDATIONS

MAKE PREVENTION AND FAMILY SUPPORT A CORE COMPONENT OF CHILD AND FAMILY SERVICES’ OPERATIONAL STRATEGY

Overview:

The persistent high rates of child maltreatment in the NWT are a cause of great concern. The reactionary, crisis-response mode that Child and Family Services operates in has not, and is not, solving child welfare problems; nor will it be able to in the future without serious changes.

Maltreatment is damaging children’s health and development, with dire consequences to our society. Maltreated children are more likely than others to suffer from physical, psychological, and social problems that continue well after maltreatment has ended – for most, into adulthood. Victims of maltreatment often enter the child welfare system, which is very costly in itself. If we consider all the costs of case management, administration, services to families and children, foster care, adoption services, hospitalization, mental health care, and law enforcement that stem directly from maltreatment, the expense is alarmingly high. The cost to children and their families, in human terms, is beyond calculation. In that light, Child and Family Services must make proactive prevention and family support a core component of its child welfare and protection strategy.

The Child and Family Services Act not only allows the Director to provide prevention services to children and families, but emphasizes this approach. Although there are currently a few prevention programs supported by Child and Family Services (such as the Healthy Families Program), these programs are starved for resources and lack capacity to take on more clients. The unfortunate reality is that crisis cases eat up the lion’s share of child welfare resources. This crisis-response mode is not sustainable.

Alcohol- and drug-related child neglect, followed closely by domestic violence, is the number one cause of children being referred to Child and Family Services. The majority of the parents involved live in poverty and struggle with mental health issues. To address those issues, it is important that government develop a stronger and more effective social safety net as part of its anti-poverty strategy, considering child welfare programs in the process. There is a great need for better coordination of government services.

Although prevention of child maltreatment requires a government-wide approach, Child and Family Services plays the key role. During the Committee’s visits to the communities, members heard how many parents, especially young parents, would benefit from counselling and support groups. We need to vastly improve pre- and post-natal care and parenting skills, offer respite services and child care, plus in-home supports and home visitation programs. Investing in these prevention programs early will reduce the demand for protection services in the near future.
Prevention services and supports

1. Amend the Act to:
   a. mandate prevention and early intervention; include a presumption of prevention and early intervention in the principles of the Act;
   b. include a presumption of working with, and providing support to the whole family to address protection concerns, and develop policy and standards to support this change;
   c. mandate community-based services that must be provided by the Director in all communities;
   d. oblige the Director of Child and Family Services to consider first local, then regional, and finally territorial treatment options for cases requiring alcohol and drug treatment or rehabilitation;
   e. require the Director to provide adequate, timely support to parents requiring alcohol or drug treatment or rehabilitation so that they are able to complete terms in the Plan of Care agreement within a reasonable timeframe.

2. Develop a comprehensive strategy to provide resources and capacity for prevention and early intervention programming.

3. Work with departments and organizations such as Education, Culture & Employment, NWT Housing Corporation, Justice, Health and Social Services, and the RCMP, to improve coordination of services and supports, at both the policy and delivery levels.

4. Ensure funding for prevention and early intervention programming in every community, and present a budget for it to the Legislative Assembly in the 2011-12 budget session.

5. Expand prevention services at the local level by delegating responsibility and providing support to community agencies.

6. Expand the Healthy Families Program to all communities, with high priority.

7. Develop policy to allow the Director to provide financial support to families in emergency situations.

8. Encourage self-referrals and early intervention by providing more voluntary services.

9. Develop policy that encourages the use of supervision agreements and Plan of Care agreements before apprehension.

10. Provide in-home supports and services as a means of keeping children safe in their homes.
11. Develop public education and community-based parenting programs.

12. Develop services for collaborative crisis planning with families at risk of developing protection concerns, with particular focus on families with infants and youth (because these factors coincide with a high level of stress in the household).

13. Develop more resources for alcohol and drug treatment and rehabilitation in each region, and support local program alternatives.

14. Develop a policy regarding victims of domestic violence that includes:
   a. Providing services and supports that allow them to keep their children safely in their custody;
   b. Advocating for victims and supporting them in criminal proceedings against the perpetrator;
   c. Providing temporary shelter and support to allow victims and their children to leave the homes where abuse is taking place.

15. Provide grants and resources to community organizations to provide community-based services and supports, including: shelters, food banks, counseling resources, treatment programs, healing camps, on-the-land programs, etc.

**TAKE THE LEAST INTRUSIVE AND MOST EFFECTIVE MEASURES TO DELIVER CHILD AND FAMILY SERVICES**

**Overview:**

The legacy of the residential school system, and the historically poor relationship between the communities and the department responsible for child protection, continue to colour people’s present-day experience with Child and Family Services. Their relationship is marred by lack of confidence and trust in the staff, the policy and procedures, and the administration of the Department of Health and Social Services.

In every community visited by the Social Programs Committee during the review, there was unanimous agreement that Child and Family Services’ interventions are too intrusive, and damage children, their families and their communities. One reason for using intrusive measures such as apprehension, the Committee found, was that when communication breaks down between families and child protection workers, the workers feel powerless and are inadequately trained to use alternative solutions to protect children.

The most effective way to reduce the number of children being taken into care — and to ensure that only those who absolutely must be taken from their parents’ custody are removed — is to use collaborative processes that focus on communication and alternative approaches to dispute resolution.
In order for parents and families to participate and communicate effectively with Child and Family Services, it is necessary to use the least intrusive measures possible; develop advocacy tools to ensure that parents’ rights are protected and allow them to participate more equitably; and, engage the community in building the foundation for a new relationship with the department that is meant to serve them.

**Least intrusive measures**

16. Amend the act to:
   a. add consideration for the Canadian Charter of Rights and Freedoms, and the Rights of Aboriginal Peoples to the Principles of the Act;
   b. include the presumption of least intrusive measures, with special focus on prevention, early intervention, and mediation;
   c. include the presumption of working with the whole family;
   d. include the presumption of keeping families together and reunifying separated children and families to the extent possible;
   e. to allow the establishment of an early intervention team for self-referred cases and cases where a referral was investigated and the child is not currently in need of protection, but where protection concerns exist. The early intervention team should be made up of:
      i. The child protection worker,
      ii. immediate and extended family members,
      iii. a member of the child’s band council administration, and
      iv. any professionals with sufficient interest in the child.

17. Change the threshold for apprehension to include:
   a. A child should not be apprehended if the protection concern would be alleviated by providing financial support or other social services to the family;
   b. Confirmation that the child protection worker has considered and/or attempted to provide services, which were ineffective in alleviating the protection concern.

18. Develop policy and practice that is culturally appropriate for the NWT, with special emphasis on consideration for aboriginal culture, extended family support systems, and a community-based approach.
Collaborative process

19. Amend the Act to include a presumption of using collaborative processes, mediation, and dispute resolution, from early intervention and throughout the protection process.

20. Integrate collaborative methods into policy and standards, including dispute resolution, participatory planning, and other tools to improve communication.

21. Include in the policy and procedures a meeting with parents and families for the purpose of outlining all of the options available to them in the child protection process.

22. Language used in the Act, in policy and in practice, should be non-adversarial and contribute to a collaborative process, and building understanding and better communication.

23. A formal conflict resolution policy should be developed by the Department of Health and Social Services that includes the use of dispute resolution techniques and third-party mediators, negotiators or arbitrators.

24. Use dispute resolution to allow placement or return of the child to non-custodial parents, relatives and extended families as a means of avoiding apprehension.

Advocacy and legal process

25. Amend the Act to:
   a. revise section 85(1) and 85(2), to allow the participation of advocates in all meetings between the child and/or parents, and staff of Child and Family Services, court proceedings, and case reviews. An advocate may include:
      i. A legal professional or lawyer;
      ii. A member of the extended family or a friend;
      iii. A member of the parents’ band council administration;
      iv. A member of an organization active in the individual’s community; or
      v. A professional with sufficient interest in the individual.
   b. include that if the child is an aboriginal child and belongs to a band council, notice should be served to the band council prior to both the apprehension hearing and the protection hearing;
   c. make the affidavit available, with the consent of the parents, to the band council of an aboriginal child, if a representative of the band council administration requests it;
d. formalize the child and parents’ rights to legal counsel at all stages of the child protection process;

e. require full disclosure of the Director’s files for the purpose of the court process;

f. revise section 8(4) to provide meaningful access to legal recourse for victims of false reports; and, consider other consequences for knowingly making a false report.

26. Establish a mechanism to ensure that every child’s voice is heard, and that the child understands what is happening to them at every level of the child welfare system.

27. Develop a program for training Child and Family Services committees in such areas as human rights, the child protection process, and advocacy.

28. Encourage band administrations to participate and advocate at all levels of the process and include them in training activities.

29. Work with the Department of Justice to address gaps in services provided by Legal Aid, by:

   a. making lawyers more accessible early in the child protection process;

   b. providing resources for assessments and expert witnesses;

   c. extending the billable case management time lawyers are allowed to work with clients.

30. Start dialogue with lawyers, courts and the Department of Justice to:

   a. integrate dispute resolution and collaborative processes into court processes;

   b. build awareness of child welfare issues and best practices.

**Community engagement**

31. Develop a client service approach at the department and authority levels, supported in policy and procedure, as well as client service training for staff.

32. Enhance Child and Family Services’ relationship with the public by conducting more public education, training, and workshops in communities, for both the public and staff.

33. Rewrite the Act in plain language, with special effort to avoid use of adversarial language and concepts.

34. Develop plain language policy and procedure documents for public information; such as guides, “how to” resources, a website, and pamphlets for parents, families and children involved with the child protection system.
35. Develop policy and guidelines describing who and under what circumstances information from case files may be shared.

**PROVIDE QUALITY INTERVENTIONS AND SERVICES IN RESPONSE TO CHILD AND FAMILY WELFARE CONCERNS**

**Overview:**

It became evident during the review that the department and its authorities face several major administrative challenges, including human resource management, supervision and oversight, monitoring and evaluation, data collection, technical support, and policy development. New approaches and strategies are required.

Case management and social work practice are also challenging the department, authorities and individual workers, reinforcing the need for regulation of social work practice, capacity building, and the development of new policies and procedures.

One of the primary functions of the department is to provide services that lessen the suffering and hardship of children, families and communities. The Committee's findings show that poor program management and failed implementation of the Act contribute to the challenges and hardships of residents of the north. To address this, the department must be able to provide, as a minimum, adequate services to children and youth in care, and ideally, services that help these individuals to thrive.

One key finding of the review is that youth are under-served by the Department of Health and Social Services (and other departments), and are falling into poverty, homelessness, violence and crime. This gap must be addressed, as unequal government services and supports for youth is a violation of their basic human rights.

To reduce child maltreatment and abuse across the territory, quality interventions and support services are required in every community. In the long term, quality interventions at an early stage will replace the volume of crisis-response interventions, which will eventually reduce both the human and financial costs of child protection.

**Child and Family Services administration**

36. Amend the Act to:

a. require the Legislative Assembly, or a committee of the Legislative Assembly designated or established by it, to review the provisions and delivery of the Child and Family Services Act at the next session following each successive fifth anniversary of the tabling of this review in the Legislative Assembly;

b. require the Director to develop a monitoring and evaluation framework, reviewed and updated on a regular basis;
c. ensure regular reviews and updating of policy and standards.

Required policy updates include:

i. Apprehension guidelines;

ii. Guidelines for collaborative processes, collaborative planning and dispute resolution;

iii. Requiring the supervisors to approve interventions;

iv. Policy and guidelines for using least intrusive measures;

v. Guidelines for using supervision agreements, Voluntary Services agreements and Plan of Care agreements as part of early intervention;

vi. Guidelines on privacy and information-sharing that clearly indicate when, what and how to allow access to case information;

vii. Guidelines for the provision of services and supports for prevention and early intervention, after apprehension, and after the child has been returned to the care of the parent(s);

viii. Policy and procedures that minimize the number of moves experienced by children in care.

37. Develop policy and guidelines that prevent inappropriate and potentially harmful placements.

38. Develop a human resource strategy that includes:

a. Reducing caseloads;

b. Hiring more child protection workers and social workers, with special focus on aboriginal recruitment;

c. Using more lay workers where possible;

d. Retention planning;

e. Providing regular and ongoing training and support to child protection workers and social workers;

f. Using legal clerks to assist staff with court documents.

39. Make updating the policy and standards manual a priority by assigning staff to lead and manage the project, and complete it within a reasonable timeframe.
40. Improve supervision and oversight by requiring regular meetings, supervisory approval of interventions, and increasing visibility of supervisors.

41. Develop policy and standards for monitoring and evaluation activities.

42. Replace the Child and Family Information System (CFIS) with a computer program that is up-to-date, user-friendly, and able to assist the department in improving case management, monitoring and evaluation, data collection, and planning.

**Social services practice**

43. Amend the Act to mandate cultural training for social workers and child protection workers.

44. Finalize the social work regulation process; once complete, all designated child protection workers must be certified social workers.

45. Training for child protection workers should be expanded, regular, and ongoing, and should include:
   
   a. Building practical understanding of the Act and familiarization with the policies, procedures and regulations;
   
   b. Training on human rights, the law, legal processes and court documentation;
   
   c. Focus on understanding the options and processes available under the Act;
   
   d. How to refer clients for prevention and support services;
   
   e. Practical training in communication, collaborative process and dispute resolution;
   
   f. Cross-cultural training relevant to the NWT;
   
   g. Case management and least intrusive measures;
   
   h. Training on the implementation of the Access to Information and Protection of Privacy Act (ATIPP) and how to share information within the limits of the both ATIPP and the Child and Family Services Act.

46. Improve case management by developing policy that includes:
   
   a. regular meetings with clients, case review and progress monitoring;
   
   b. regular visits to children in care;
   
   c. providing early intervention and prevention services and supports for clients.
47. Ensure that expertise in mediation and dispute resolution is available to both the department, and at the community level.

48. Create a “Best Interests Assessment” for use by child protection workers during intervention planning to ensure that interventions are done in the best interests of the child.

49. Instead of the child protection worker, another HSS staff person with training in collaborative processes and dispute resolution should have the responsibility of informing parents about the child protection process, their rights and responsibilities, and generally to provide assistance to parents and families.

**Placement services**

50. Amend the act to:

   a. allow the judge overseeing a protection hearing to consider returning a child to a non-custodial parent or an extended family member who has regular care or contact with the child;

   b. allow short-term extended family foster placements, with an expedited community screening process;

   c. allow assisted fostering by extended family, and develop policy to carry it out;

   d. include the consideration of custom adoption as a placement option, and develop policy to implement it;

   e. allow assisted adoptions;

   f. include that the court can consider placement and make a non-binding recommendation to the Director;

   g. require the child protection worker to consider consulting the child’s extended family on placement arrangements and options.

51. Develop a database that flags case files when children become eligible for adoption.

52. Enhance the foster family placement and recruitment program to include:

   a. a focus on aboriginal recruitment;

   b. a more appropriate vetting process;

   c. greater placement flexibility;
d. greater financial, social and other supports for foster families;

e. emphasis on local placement.

53. Create more short-term non-foster placement options, allowing flexibility for community input.

54. Develop therapeutic placement services that include regular counseling and supervision, proper assessments and treatment of disabilities and special needs, and provide the special care that children in care generally require and deserve.

55. In policy, allow foster families to maintain contact with children, and where possible, place children with the same foster families they have been placed with previously.

56. Develop policy and practice to keep siblings together in placements to the greatest extent possible.

57. Develop policy and procedures to provide financial, respite, training, and other services and supports to foster families.

Protection services for youth

58. Amend the Act to:

a. require the Director to offer the same services to youth as to children;

b. define youth as a person from age 16 through 18, who may opt out of services and supports offered by the Director – and opt back into services at a later time;

c. extend the Director’s parental responsibility for permanent wards to the age of 23 years;

d. require the Director to provide services and supports to children and youth transitioning out of care, and develop supporting policy.

59. Develop policy and standards that include following up on children and youth after they have left the care of the Director.

CREATE POSITIVE OUTCOMES FOR CHILDREN, FAMILIES AND COMMUNITIES

Overview:

Positive outcomes will result from combining quality social services and interventions with activities that encourage community participation, ownership and empowerment. As an important step in developing better relations with the community, the department and its authorities must work with
Empowering the communities to take responsibility for their own child protection and family services and supports would go a long way towards effectively managing cases of maltreatment and abuse in a culturally and contextually relevant way.

One of the key ways to empower a community is by developing community agreements, establishing local Child and Family Services Committees, and delegating authority. These provisions currently exist in the Act, but major challenges prevent their implementation. These include the department's fear of risk and liability, gaps in community capacity, resource constraints, lack of public information and awareness in the communities, and lack of initiative at the department and authority levels to engage communities effectively.

**Community empowerment**

60. Amend the Act to:

   a. require the Director to actively pursue the delegation of responsibilities to aboriginal and community organizations, as defined in the regulations;

   b. require the Minister to enter into a community agreement in each community, even if the agreement simply states that the community does not wish to acquire responsibilities from the department or Child and Family Services.

61. Develop capacity for monitoring and oversight at the department and authority levels that would be required with delegation of authority to community organizations.

62. Develop policy and standards for delegating responsibilities and services to community organizations.

63. The department should develop a plan and policy guidelines in preparation for devolution by working with the authorities and communities, including both aboriginal and non-aboriginal northerners in the planning process.

64. Support and encourage interagency meetings and coordination of services at the community level.

**Community Agreements and Child and Family Services Committees**

65. Amend the Act to:

   a. require the Director to provide funds (including a salary for a committee coordinator position and per diems for members), training, and support to Child and Family Services Committees;
b. allow flexibility of mandate and function for the Child and Family Services Committees so that communities can create a model appropriate to their culture and situation;

c. allow and encourage Child and Family Services Committee members to participate in all child protection processes, and develop the supporting policy.

66. Assign one or more staff members to pursue and administer the development of community agreements, community standards, and Child and Family Services Committees; provide public education and capacity building services to communities.

67. Community Agreements should be designed to develop understanding and consensus on contextually appropriate definitions of neglect, harm and abuse.

GENERAL RECOMMENDATIONS AND RECOMMENDATIONS FOR OTHER DEPARTMENTS

Overview:

The Committee recognizes the health and welfare of families are influenced by a great many factors, many of which fall under the control of other divisions of the Department of Health and Social Services, or other GNWT departments altogether. Much can be achieved by taking a unified approach to improving services that often have a profound influence on child welfare.

68. The Department of Justice must increase its support for Legal Aid, and ensure access to Legal Aid for children and families involved with Child and Family Services.

69. The NWT Housing Corporation must:

a. develop and implement policies to ensure that Child and Family Services’ clients are not prevented from reuniting their families due to loss of adequate housing under the control of NWTHC or local housing authorities;

b. ensure that its housing stock is fully utilized, particularly in communities with shortages of public housing;

c. ensure flexibility in dealing with Child and Family Services clients.

70. The Department of Education, Culture and Employment must review its income support and assistance programs, and ensure that:

a. support is sufficient for a family to live on;
b. support is delivered rapidly and efficiently, as called for in current policy;
c. applications and enrolment are simple and efficient;
d. renewals and updates of financial and personal information are required in a reasonable timeframe.

71. The Department of Health and Social Services must expand its addictions treatment programs to include alcohol treatment convenient to every region, and a basic level of treatment and support in every community.

72. The Government of the Northwest Territories must develop and implement a comprehensive anti-poverty strategy, involving all appropriate departments, that includes full consideration of child welfare issues.

73. The Department of Health and Social Services must develop a strategic plan incorporating the recommendations of this report, starting with a response to it within 120 days.
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