Saskatchewan First Nations Family and Community Institute conducts research and develops First Nation standards and best practices to support First Nation Child, Family and Community Service. The report and project Voices for Reform: Options for Change to Saskatchewan First Nations Child Welfare were made possible through funding from Indigenous and Northern Affairs Canada (INAC). However, the contents and conclusions of this report are solely that of the authors and not attributable in whole or in part to INAC.

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Report design: Kyle Boyko
Front and back cover photo credit: Donna Heinbecker

The project logo symbolizes the diverse First Nations voices of youth, families and communities coming together through the Child Welfare Engagement Process.

Logo design: April Doepker

Message from Knowledge Keeper

This engagement project is in line with the Treaties as agreed to on this our mother earth and Saskatchewan. We as the Indigenous First Nations agreed upon these Treaties through the guidance of Elders and the Creator. As a traditional knowledge keeper working in collaboration with the Saskatchewan First Nations Child Welfare Engagement Project it is an honor and a privilege to align our way of knowing and understanding within the research and the findings of this report.

As Indigenous people we believe that the health and well-being of an individual refers to a person's whole being which includes aspects of the four dimensions of self, the physical, mental, emotional and spiritual being. When people are faced with personal health issues it is believed that this is a reflection of an imbalance or disharmony in the circle. As part of our healing journey we must nurture and develop all four dimensions to regain our cultural life balance.

We use a circle of rocks that represents the circle of life or the medicine wheel. The five rocks symbolize our connection to the land and all the medicines that we rely on for good health and healing. We refer to the rocks as “grandfathers” and “grandmothers” that guide us and give us strength and direction in our work and throughout life. Tobacco is one of the four sacred plant medicines that we’ve used throughout this engagement project to honour and send prayers that guide and give us strength as we address some sensitive and challenging issues.

The centre rock represents CULTURE as the foundation of all living things and is held in highest regard and respected in all that we do. The four rocks (or functions of Child Welfare) move in a clockwise circular motion starting with FAMILY, we work towards developing and maintaining strong, healthy families; the CHILD must be nurtured especially when in crisis and should always be connected to their families, community and culture; COMMUNITY must provide culturally appropriate services and alternate homes for a child living out of their home. First Nations Child Welfare is a connection to the natural laws and is integrated from a high and spiritual source. The sacred covenant our Indigenous Elders included in our collective Treaties applies to this engagement project. We have always maintained this and to deny our connection to all the elements (earth, air, fire and water) is to create a child welfare system absent of culture and spirit.

Kinanaskomitinawaw - Thank you
Joseph Naytowhow, Knowledge Keeper

Video Resources Available
To learn more about the purpose of the First Nations Community Research Engagement project watch the 1 minute video with Traditional Knowledge Keeper, Joseph Naytowhow, http://www.sfnfci.ca/pages/child-welfare-reform.html

The survey and focus group questions for this research were developed based on culture and the four functions of child welfare. To learn more about these functions and the importance of a cultural foundation watch the short 3 minute video with Traditional Knowledge Keeper, Joseph Naytowhow. http://www.sfnfci.ca/pages/child-welfare-reform.html
## Contents

Message from the Engagement Project Advisory Committee 06  
Acknowledgements 07  
Executive Summary 08

### Section 1 - Introducing the Project
- Project Overview 13  
- Engagement Advisory Committee and Project Research Team 15  
- Conceptual Framework: Functions of Child Welfare 17

### Section 2 - Child Welfare Context
- First Nations Child Welfare Timeline 24  
- Current Trends in First Nations Communities 26

### Section 3 - Engagement Activities
- Project Activities 29  
- Quantitative Methods 30  
- Qualitative Methods 32  
- Project Participants 34

### Section 4 - Project Findings and Actions
- Project Findings - Introduction 39

#### Theme 1 - Programs and Services
- Access to Services 46  
- Availability of Resources 48  
- Rural and Remote 50

#### Theme 2 - Honouring Youth
- Honouring Youth Voices 52  
- Transitions out of Care 54

#### Theme 3 - Capacity Building
- Child Welfare Perception 56  
- Collaboration in Child Welfare 58  
- Recruitment, Retention, Training 60

### Theme 4 - Practice Approach
- Case Planning 64  
- Standards 66  
- Family Connections 68  
- Diversity 70

### Theme 5 - Systemic Factors
- Collective Voice 72  
- Funding 74  
- Infrastructure and Technology 76  
- Legal Rights and Responsibilities 78

### Section 5 - Action Items, Limitations and Conclusions
- Action Items 81  
- Limitations 82  
- Conclusion 84

### Section 6 - References and Appendices
- References 87  
- Appendix A - Project Advisory Committee Terms of Reference 91  
- Appendix B - History of First Nations Child Welfare In Saskatchewan 92  
- Appendix C - Consent to Participate 96  
- Appendix D - Engagement Survey 98  
- Appendix E - Frequently Asked Questions, Child Welfare Functions 108  
- Appendix F - Focus Group Questions 110
From the Engagement Advisory Committee

The role of the Engagement Advisory Committee was to meet regularly to guide and support the research project. Our role and responsibilities included: serving as supporters within our communities to encourage participation; provide advice and feedback to the research team on the development of the survey tools and process; and offer suggestions on the development and implementation of the research project.

We are pleased with the tremendous amount of participation from First Nations in Saskatchewan. We attribute the success in engaging nearly 4500 participants as a result of to two main factors. Firstly, the desire for First Nations representing the different demographic audiences to have their voices heard. Secondly, the First Nations community based approach to research, ethical considerations and investment into local community point people demonstrated our First Nations commitment to honouring the voices.

Thank you to Elder Ernestine Starr for her guidance throughout this project. We would like to honour and thank the participants in voicing their opinions on child welfare reform in Saskatchewan.

Thank you to the staff of the Saskatchewan First Nations Family and Community Institute and research team in coordinating and analyzing the voices in this report. We would also like to thank Indigenous and Northern Affairs Canada for the support in funding this engagement research.

Sincerely,
The Engagement Advisory Committee

Members include:
Ernestine Starr of Starblanket First Nation, Project Elder and Saskatchewan First Nations Family and Community Institute Elder; Treena Wynes, Agency Chiefs CFS; Marlene Bugler, Kanaweyimik CFS; Derald Dubois, Touchwood CFS; Vera Sayese, Peter Ballantyne CFS; Dexter Kinequon, Lac La Ronge CFS; Raymond Shingoose, Yorkton Tribal Council CFS; Lionel Bird, Montreal Lake CFS; Lois Isnana, QBOW CFS; Darlene Rediron, Meadow Lake Tribal Council CFS; Marcel St.Onge, Ministry of Social Services; Mark Ziolkowski, Indigenous and Northern Affairs Canada; Warren Seeseequazi, Federation of Sovereign Indian Nations; Donna Heimbecker, SFNFCI; Shelley Thomas Prokop, SFNFCI; and Tischa Mason, SFNFCI.
EXECUTIVE SUMMARY

In December 2016 Saskatchewan First Nations Family and Community Institute (SFNFCI) launched the Engagement Project. This Indigenous and Northern Affairs Canada (INAC) sponsored project engaged First Nations child welfare stakeholders in discussions about reform to federal First Nations child welfare services. After hosting a meeting with the Minister’s Special Representative, Dr. Cynthia Wesley-Esquimaux, on March 2, 2017, SFNFCI brought together a team of qualified professionals and experts to oversee, design, develop and deliver a plan capable of meeting the project objectives within the established timeframe of this project.

Inspired by Indigenous traditions and protocols of doing things in a good way, a Project Advisory Committee was founded to guide the work of the project. The Project Advisory committee was comprised of a respected Elder, First Nations Child and Family Service (FNCFS) Agency Executive Directors and representatives from the Federation of Sovereign Indigenous Nations (FSIN), Indigenous Northern Affairs Canada (INAC), and Ministry of Social Services (MSS). Under their guidance, information collection and engagement strategies were determined and a timeline of key activities was established.

Community Engagement Liaisons were recruited through First Nations Child and Family Services (FNCFS) agencies across the province and Research Assistants were also hired to execute various tasks associated with the project’s community engagement activities.

The research was completed in the spirit of the OCAP (ownership, control, access, and possession) principles that establish how First Nations data should be collected, protected, used and shared.

A conceptual model was developed as a framework for the study. The model emphasizes culture and identifies the four functions of child welfare from a First Nations perspective:

• Family Centered – focus on families and the promotion of healthy family connections
• Child Centered - focus on the interests and needs of children and young people
• Community Centered (Stewardship) - focus on range of child protection services
• Guardianship - focus on issues of legal guardianship of a children/youth in out-of-home care

Along with results of a comprehensive literature review, the conceptual model informed the development of the study’s main research tools, which were both quantitative and qualitative. The quantitative tools were a detailed survey which was adapted for seven separate participant groups (youth, boards of directors, out of home caregivers, families in care, service providers, FNCFS executive directors and FNCFS staff). Multiple qualitative methods, including key informant interviews and focus groups, were used to collect more narrative based data. The research advisory committee identified key informants to be interviewed who were connected to First Nations child welfare, and purposive and convenience sampling were used to recruit focus group participants. A total of twenty-four focus groups were conducted with 211 participants.

In addition to participating directly through these research activities, many more people across the province were engaged through information booths at Treaty Days, conferences, meetings and by presentations on the project.

Despite the limited timeline of the project, an impressive 4499 people were engaged by this project, through both engagement and research activities.
At the end of the data collection period, the research team, in collaboration with the Project Advisory Committee, carefully considered both quantitative and qualitative results and identified five prominent themes. These themes represent groupings of the most important priorities for reform as voiced by project participants. Further analysis revealed that the themes and priorities they represent align in significant ways to the four child welfare functions of the conceptual model.

<table>
<thead>
<tr>
<th>Function</th>
<th>Themes</th>
<th>Priorities</th>
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<tr>
<td>Family Centered Programs &amp; Services</td>
<td>Access to Services</td>
<td>Availability of Resources</td>
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<td>Rural &amp; Remote</td>
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<td>Diversity</td>
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<td>Funding Infrastructure &amp; Technology</td>
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<td></td>
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<td>Legal Rights and Responsibilities</td>
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It is these five themes and their related priorities that became the basis for the key actions proposed in this report. Through the process of engagement, those who participated in this project were able to voice their ideas and contribute to a shared vision of what a healthy and culturally respectful First Nations child welfare system could look like.

The main actions recommended by the collective participant voice include:

**In order to REFORM PROGRAMS & SERVICES**, First Nations voices for reform call for:
- Access to services that are holistic, interconnected and reflective of local culture
- Investments in resources to support families and communities
- Services that are locally available in rural and remote communities

**In order to HONOUR YOUTH**, First Nations voices for reform call for:
- Mentorship opportunities to motivate and empower youth
- An Action Plan that ensures youth are included and listened to

**In order to SHIFT PRACTICE APPROACHES**, First Nations voices for reform call for:
- A First Nations case management system
- First Nations standards of practice and measurement
- A culturally respectful child welfare framework that goes beyond child protection
- Policies that strengthen families through kinship and community connection

**In order to BUILD CAPACITY**, First Nations voices for reform call for:
- Engaged service providers who participate in the community
- Strategic partnerships based on shared protocols for collective outcomes
- Human resource initiatives that offer incentives and contribute to healthy working environments

**In order to ADDRESS SYSTEMIC FACTORS**, First Nations voices for reform call for:
- Establishment of a National Children’s Advocate or Children’s Commissioner
- Equitable, flexible funding that addresses community needs
- Capital investments into First Nations child and family service agencies
- Training and education on the legal aspects of First Nations child welfare

Importantly, these actions are not presented in order of importance or priority. They are connected to broader principles and themes that are complementary and interrelated.

Guided by the words of Elders and the principle of “By First Nations, For First Nations,” this project exposes the complex, multi-layered issues impacting contemporary child welfare, and points to the beneficial outcomes that may result from bringing Indigenous worldviews and ways into reform efforts.

An approach founded in culture that is sufficiently resourced and which draws upon proven strengths and relational goodwill can indeed produce valuable results with real potential to make substantial positive changes to persistently intractable social issues.

The final report was reviewed by the Project Advisory Committee and Executive Directors of Saskatchewan FNCFSA Agencies. The report was also forwarded to the SFNFCI Board of Directors for approval, and finally to the financial sponsor of the project, Indigenous and Northern Affairs Canada (INAC).
Project Overview

In December 2016, Indigenous and Northern Affairs Canada (INAC) invited First Nations organizations across Canada to engage First Nations Child and Family Services (FNCFS) stakeholders in discussions about reform of First Nations child welfare services. In Saskatchewan the engagement process was divided into two parts - one of engagement of First Nations leadership and the other was to engage stakeholders in the delivery of on-reserve child welfare services. The Federation of Sovereign Indigenous Nations (FSIN) received the contract to engage the leadership throughout Saskatchewan. The Saskatchewan First Nations Family and Community Institute (SFNFCI) was selected to undertake the child welfare stakeholder engagement activities in Saskatchewan. SFNFCI worked collaboratively with FSIN to minimize duplication and support the sharing of pertinent project information to contribute to a collective voice on options for child welfare reform in Saskatchewan. One of the early activities of the project was hosting a meeting with the Minister’s Special Representative, which took place at the SFNFCI offices in Saskatoon on March 2, 2017. This meeting brought the Minister of Indian Affairs’ Special Representative Dr. Cynthia Wesley-Esquimaux together with 12 Saskatchewan FNCFS agencies (represented by 26 FNCFS staff: Executive Directors and front line staff), SFNFCI representatives, and facilitator Dr. Raven Sinclair and her team. A separate report was compiled on this portion of the engagement project; where applicable the comments and information generated through that meeting have been included in this report.

The engagement activities were responsive and conducted in a culturally appropriate way representing all First Nations throughout Saskatchewan. The majority of targeted activities (both research and engagement) were conducted on-reserve under the direction of a specialized Project Research Team.

### Section 1

Introducing the Project

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<th>Engagement Recruitment Priorities</th>
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<td>Families of children in care;</td>
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<td>Elders;</td>
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<td>Youth currently or formerly in care;</td>
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<td>First Nations agencies/service providers, including front-line workers;</td>
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<tr>
<td>Community-based service providers (non-First Nations Child Welfare);</td>
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<tr>
<td>Boards of Directors; Out of home care service providers (Foster Homes, Group Homes);</td>
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<tr>
<td>Executive Directors of First Nations Child and Family Agencies</td>
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</table>
The Engagement Advisory Committee was developed in February 2017 with a Terms of Reference (Appendix A). All FNCF5 Agencies were invited to participate. The committee was comprised of a respected Elder, FNCF5 Agency Executive Directors and representatives from the Federation of Sovereign Indigenous Nations (FSIN), Indigenous and Northern Affairs Canada (INAC), and the Saskatchewan Ministry of Social Services (MSS). The committee met bi-weekly throughout the project.

Under the direction of the Engagement Advisory Committee, a Project Research Team was contracted to develop and implement activities to fulfill the goals established in the contract with INAC. The goal of the project was to coordinate engagement sessions for First Nations technical experts, provincial representatives and others to discuss issues affecting on-reserve child and family services and to share knowledge and expertise on options to reform First Nations Child and Family Services. The Project Research Team drew upon people with expertise: SFNFCI staff, a coordinator, scholars and established researchers. In order to meet the project goals and timelines, SFNFC1 contracted a number of individuals who could serve as research assistants to the project. To support cultural relevance and understanding it was important that people involved with the project possess the same values and characteristics as the participants they would be interacting with. All 12 research assistants were of Indigenous ancestry several of whom were fluent First Nations language speakers. The research assistants received training and fulfilled multiple roles including: facilitators, interviewers and note takers.

To maximize the participation of the FNCF5 Agencies, the Project Research Team drew upon elements of community-based research and created a plan to work in conjunction with individuals who had experiential knowledge of the FNCF5 Agencies and communities they serve. Rather than asking the FNCF5 Agencies to contribute worker time as an in-kind donation to the project, a budget line was created to support agency based point people (i.e., community liaisons). Following protocol, the FNCF5 Agency Executive Directors were invited to designate a Community Liaison to work in collaboration with the Project Research Team. In consultation with the Community Liaisons, the research assistants were matched with communities who were interested in participating in the project.

Identified tasks for the Community Liaisons were to guide the coordination, communication, roll-out and follow-up of engagement activities in their First Nations communities throughout the province contingent upon the project timelines and competing community events. The Liaisons identified opportunities for community-based engagement, and in conjunction with the project coordinator a schedule of community engagement activities was developed.

The Project Research Team created a work plan and timeline that would engage First Nations community members and seek the opinions of people with first-hand experience of First Nations child welfare in Saskatchewan, (e.g., youth, currently or formerly in care), families with children in care, FNCF5 Agency staff, community service providers, out of home caregivers, Elders, boards of directors, executive directors of FNCF5 Agencies, and related stakeholders.)

An initial task of the Project Research Team was to develop an information collection strategy to identify gaps in services, best practices, impacts of intergenerational trauma, and child welfare needs and challenges. In meetings with the Engagement Advisory Committee, it was determined that the complete scope of child welfare reform needed to engage a broader definition of child welfare services. The literature review identified that a fully developed child welfare system should not be limited only to child protection services. Rather it should include the voices of the many people impacted by child welfare including a broader continuum of service providers (e.g., family service workers, counsellors/therapists, nurses) across numerous fields (e.g., social work, education, mental health, addictions, criminal justice, and medical).

In order to meet the timelines associated with the contract deliverables, the Project Research Team established the timeline for data collection to occur between April 19 and June 2, 2017. The report had to be completed by July 31st, 2017 and this limitation required the Research Project Team to complete the engagement activities within a condensed time frame.
SFNFCI and the entire Research Project Team followed Indigenous principles of ethical research (i.e., Ownership, Control, Access, Possession) (http://cahr.uvic.ca/nearbc/documents/2009/FNC-OCAP.pdf) in the development, communication, delivery, roll-up and reporting of project data and events. The collected information and data was respected at all times by using ethical practices such as informed consent. SFNFCI supported all those involved in the project to learn and understand local protocol.

Given the limited time restraints, the project team realized the importance of clear messaging about the scope of the SFNFCI Engagement. Given that other activities were happening at the same time throughout the province, (e.g. MMIW Task Force, the FSIN Leadership Engagement Project and MSR Visit and Report.) and the potential for confusion regarding the SFNFCI Engagement Project the Project Research Team created a communications strategy to maximize the opportunity to contribute to conversations and methods on reform of the First Nations Child Welfare in Saskatchewan. This communication strategy included the production of audio visual materials that introduced the SFNFCI Child Welfare Engagement project and presented the important elements of child welfare practice for discussion. Produced in a cultural, respectful and appropriate way; these videos can be viewed at www.SFNFCI.ca website. The SFNFCI website also posted monthly/weekly updates included an on-going post on summarized data and project progress.

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Conceptual Framework: Functions of Child Welfare

This report describes an Indigenous led engagement and research process that demonstrated the importance of incorporating Indigenous ways into professional practices. The report shows that capacity exists within First Nations to design, implement and complete research that establishes high quality and rigorous results. The process was conducted in a way that clearly aligned with Indigenous cultural values. Rather than evaluating the issues people have had with the current First Nations child welfare system, the Project Research Team took a future oriented approach to seek opportunities for creating a culturally informed child welfare model/practice and services.

Because of the sacred responsibility associated with working with First Nations children, the efforts of the Project Research Team and those who assisted with the project had to be surrounded, grounded and guided by Elders, prayer and protocol. This project was completed by First Nations for First Nations. Before starting any activities associated with the collection of data and the voices of people impacted by the child welfare system, the research team offered prayers for direction on working in a good way. These cultural protocols helped the research team to understand the need to look at the child welfare system through a strength-based lens. It was also decided by the Engagement Advisory Committee that the research would not be evaluative of the current child welfare system, instead it would provide direction and understanding of what child welfare could look like and its strengths.
people. Guided by the key objective of this project (to identify options for reforming child welfare in Saskatchewan), the research team considered multiple models while also maintaining a focus on the cultural foundations of First Nations traditions. In the end, the Project Research Team developed a concept of four key child welfare functions, which are all grounded in culture:

- **Family centered** models (emphasizing parental rights)
- **Child centered** models (emphasizing children’s rights),
- **Community-based (Stewardship)** models (collective responsibilities),
- **Guardianship** models focusing on systems/organizations to care for a child out of the home.

An image of this concept was developed to ensure continuity of messaging. We developed materials that presented the key distinguishing factors of each function and consistently introduced this information throughout all the engagement materials (e.g. focus group handouts and videos). For the purposes of this study, we refer to the activities associated with the four functions as First Nations Child Welfare Functions.

It became evident that as a starting point we needed to identify common elements found within child welfare systems around the world. All communities want child welfare systems to ensure that cultural values are transmitted from one generation to the next. As First Nations, we understand and appreciate that culture is the foundation of healthy families. We respect cultural differences amongst our First Nations and we know that all our work must aim to strengthen our traditions as we strive to rebuild and reconnect our children, youth, families and communities. The project process was responsive to understanding the diversity of First Nations cultures, protocols and processes.

Our initial review of systemic commonalities indicated four key functions of child welfare that must be present in order to ensure the well-being of children and families in healthy communities. The primary function of child welfare is to ensure that children are raised in healthy and safe environments and where they have opportunities to develop to their maximum potential and to understand who they are as cultural human beings. These commonalities are supported by the United Nations Convention on the Rights of the Child of the UN Declaration on the Rights of Indigenous Peoples. Article 24, “You have the right to the best healthcare possible, safe water to drink, nutritious food, a clean and safe environment, and information to help you stay well” (UNCRC) and Article 34, “Indigenous peoples have the right to promote, develop and maintain their institutional structures and their distinctive customs, spirituality, traditions, procedures, practices and, in the cases where they exist, juridical systems or customs, in accordance with international human rights standards” (UNDRIP). In order for this to happen, certain preconditions must be met. In mainstream child welfare these functions, have been manifested in models and roles associated with providing services to children, families and vulnerable

Information Table at Treaty Days - May 2017

Photo Credit: Donna Heimbecker
At the core of this concept is culture. Concepts emphasizing cultural appropriateness were thus woven throughout all elements of this study. In First Nations communities, culture is the foundation of our relationships and ways of being and knowing. This was evident in the numerous statements and comments provided by the participants.

Supporting a child who is facing serious problems or limitations
Culturally appropriate plans that fulfill the developmental needs for the health and well being of the child
Child Centred functions focus on the interests and needs of children and young people, and include concerns of involvement in the child welfare system or promoting competent communication and learning.

Supporting families in crisis/stress
Keeping families together
Building the capacity of the family
Family Centred functions identify concern for families, including involvement in the child welfare system, promoting a healthy connection between parents and their children, or the extent to which various community services and programs (e.g., recreational activities, mental health services) strengthen the resilience of families.
With an understanding that all of these Child Welfare Functions are all equally necessary to ensure the safety and well-being of children and vulnerable people, the expectation was to learn from the research participants the value of each function and the details that are most important in each function.

In order to ensure that these functions were incorporated into all of our data collection instruments, we asked questions specifically related to each function.

Service Provider Focus Group - June 2017

Taking steps to keep children safe from harm

Culturally appropriate supports to ensure that children maintain strong attachments to family, culture, and community.

Community Centered (Stewardship) Functions involve matters of child protection services, which includes responding to reports of mistreatment, investigating allegations of abuse or neglect; representing of children in proceedings, or providing supervision in the home.

When a child and/or parent does not bond with each other

Providing culturally appropriate substitute care for the child until they can return home or be on their own.

Guardianship-Centred Functions involve issues of legal guardianship of a child in out-of-home care. Guardianship orders aim to provide greater stability for children and young people when a court makes a decision that they cannot live with their parents.

SECTION 2

Child Welfare Context
THE HISTORY OF THE FIRST NATIONS CHILD

1700's
- Royal Proclamation 1763
- Late 1800's Residential School System

1800's
- 1867 British North America Act
- 1876 Indian Act
- Between 1870 and 1905 Treaties

1900's
- 1908 The Child Welfare Act
- 1951 Provincial Laws of General Applications
- Between Mid 1960's and Late 1980's Adoption Indian Missis (AIM) Program
- 1990 Indian Child Welfare and Family Support Act (ICWFSA)
- 1992 Canada's Constitution Act - Canadian Charter of Rights and Freedoms
- 1994 Saskatchewan's Children Advocate
- Mid 1990's Greater Control for First Nations
- 1995 Funding Agreements
- 1976 Legal Jurisdiction of the Province

WELFARE SYSTEM IN SASKATCHEWAN

1900's
- 1991 INAC Resource Allocation Program
- 1995 New Funding Formula

2000's
- 2005 Kelowna Accord Negotiated
- 2009 Jordan's Principle
- 2007 Enhanced Prevention Funding Model
- 2015 TRC Calls to Action
- 2016 Canadian Human Rights Tribunal Ruling
- 2011 Auditor General of Canada Report
- 2017 SFNPCI Engagement Project
- 2015 Ministry of Social Services Statement
- 2009 Truth and Reconciliation Commission
- 2007 Funding Inequality Lawsuit
- 2000 National Policy Review

See Appendix B for more detail
In order to capture those most important factors an information collection strategy was developed to focus on gaps in service, best practices, impacts of intergenerational trauma, and child welfare needs and challenges.

In order to present a rigorous report of the findings, the Project Research Team determined that it was critical to measure the magnitude of the opinions on these issues without losing sight of important contextual factors associated with these issues. Many of these contextual factors had been determined in previous reports and studies.

The First Nations child welfare system has many areas that interact with each other in multiple ways, sometimes culminating in greater order, sometimes not. The historic actions of Federal Departments, Provincial Ministries and the profession of Social Work sought to assimilate Aboriginal peoples. Consequently the Canadian socio-economic circumstances of many Aboriginal people reinforces an intergenerational cycle of abuse and neglect (Gone, 2013; Lavoie et al. 2013; Haworth-Brockman, Bent, & Havelock, 2009).

Regardless if they are employed by a provincial authority or First Nations Agency, Child welfare workers face growing caseloads of children in care. Powerful social, economic and cultural factors (e.g., alcohol dependency, poverty, crime, family violence, mental health problems, and marginalization) continue to drive demand for child welfare services.

A literature and knowledge review was conducted to further understand the current structure of FNCF, including its strengths and challenges that have been documented by provincial, regional, and national reports, organizations and people. Several reports identified a number of recurring problems with the First Nations child welfare system in Saskatchewan. For example, in 2015, the SFNFCI identified eight main types of service gaps in on-reserve service referrals.

Providing culturally appropriate care must be a priority and must emphasize building collaborative relationships with respect to child welfare services across professional boundaries and Ministries. A variety of services such as family violence, mental health, and addiction services must be made available, and the court system must work more efficiently. It is also widely understood that remote regions must develop strategies to recruit and retain staff (Government of Saskatchewan, 2010).
Project Activities

Between mid-April, 2017 and early June, 2017 the research team engaged a diverse sample of participants from various communities across the province on the topic of First Nations child welfare reform. Engagement activities included face-to-face discussions about the engagement project at First Nations community events that took place throughout Saskatchewan during the data collection period.

Activities included Treaty Days, conferences, meetings and presentations. To reach a broad audience in the FNCFCS agency communities, information tables were set up to share Child Welfare Engagement Project information with community members, who were also given the opportunity to complete a survey that allowed them to share their opinions about reforming the child welfare system. The participants were thus recruited largely through convenience sampling. Consequently, we cannot make generalizations about the total population because the sample is not representative of a particular population. However, this sampling approach has numerous advantages because this method is speedy, easy, and cost effective, making it an attractive option when sampling for proportionality is not the primary concern (Henry, 1990). The total number of people engaged in this project was 4499, 1333 of whom also participated in more in-depth research activities (described in greater detail below).

### Project Participants

<table>
<thead>
<tr>
<th>Activity</th>
<th>Count</th>
</tr>
</thead>
<tbody>
<tr>
<td>Treaty Days - Info. Table</td>
<td>2690</td>
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<tr>
<td>Conference Info Tables</td>
<td>402</td>
</tr>
<tr>
<td>Meetings</td>
<td>35</td>
</tr>
<tr>
<td>Research Assistants - Liaisons, Notetakers &amp; Other</td>
<td>12</td>
</tr>
<tr>
<td>Staff &amp; Contractors</td>
<td>18</td>
</tr>
<tr>
<td>Advisory Committee</td>
<td>9</td>
</tr>
<tr>
<td>Sub Total</td>
<td>3166</td>
</tr>
<tr>
<td>Key Informant Interviews</td>
<td>13</td>
</tr>
<tr>
<td>Surveys</td>
<td>1109</td>
</tr>
<tr>
<td>Focus Groups</td>
<td>211</td>
</tr>
<tr>
<td>Total Project Participants</td>
<td>4499</td>
</tr>
</tbody>
</table>
Of the 4499 individuals who were engaged, a smaller sub-set contributed their opinions through a variety of more in-depth research activities (Appendix C). These research activities included both qualitative (focus groups, and KIs) and quantitative methods (surveys) and included 1333 individuals.

### Quantitative Methods

Seven survey tools were created in order to engage different stakeholder groups in First Nations Child Welfare in Saskatchewan. The most comprehensive survey, FNCFS Staff Survey is included in the appendices for reference (Appendix D). All other surveys were derived from the staff survey and customized for the various roles in First Nations Child Welfare. If you require information on the remaining six surveys, please contact SFNFCI. These stakeholder groups included:

**Youth:**  Anyone aged 29 years and younger.

**Boards of Directors:**  Members of any of the 17 FNCFS agencies in the province.

**Families in Care:**  Any family member of a child or youth currently or was in care.

#### Out of Home Caregivers:
Those who are or who have provided foster care service including caregivers and group home staff.

#### Service Providers:
Those who currently provide professional services to children, youth and families.

#### FNCFS Agency Staff:
Those who are currently employed or who have previously been employed at one of 17 FNCFS agencies in the province.

#### FNCFS Agency Executive Directors:
Individuals who are or who have acted as the executive director in one 17 FNCFS agencies in the province.

Survey Monkey survey design software was used to design and layout the seven different survey instruments. The statements asked on each of the seven instruments were developed out of the literature review which identified issues of importance in First Nations Child Welfare. A 5 - point Likert scale of importance was developed for the participant to rate the value of the statement (https://www.socialresearchmethods.net/kb/scallik.php). The scale ranged from not at all important to very important. The seven distinct surveys were modified to align with the participant group characteristics e.g. reading limitations, English as a second language, age appropriateness). For example the Youth Survey instrument was modified to reflect three response options rather than five, as it was found during the pilot study, that some youth had difficulty differentiating the subtle differences between five response options rather than three.

It was initially envisioned that the survey participants would complete the surveys using online technology. However, many First Nations communities do not have access to internet services and were unable to complete the survey online. Consequently 34 of 1109 surveys were completed online. When needed the Research Assistants helped the participants to complete the surveys (E.g. language proficiency or clarification of terminology).

The completed hard copy surveys were couriered to the project coordinator at the SFNFCI office at English River First Nation. The SFNFCI’s Research Assistant inputted the data into the Survey Monkey software, then imported into SPSS for analysis by the Research Team. Quantitative (survey) data were statistically analyzed by a project researcher using the Statistical Package for the Social Sciences (SPSS 23). The quantitative data analysis looked at frequency of response, cross tabulation comparing different groups and frequency distribution within the data sets. The data files were checked for input errors before detailed analysis.

The Project Research Team presented preliminary findings to the Engagement Advisory Committee for their feedback at three points during the data analysis phase.
Qualitative Methods

Multiple qualitative methods were used to collect more individualized and narrative based data. Focus group and Key Informant Interview (KII) questions were based on survey questions that expanded with detail and were action oriented. For example in the survey a statement would be about the importance of culture in case planning, in a focus group it would ask what are ways to include culture in case planning. Focus groups and interviews were conducted by a trained facilitator. Each category of participant was asked a number of questions relevant to their relationship with the child welfare system; that is, the questions asked of a service provider might be different from the questions asked of an Executive Director.

Key Informant Interviews

The research advisory committee identified key informants to be interviewed who were connected to First Nations child welfare. These were organizations or people that would not have completed a survey but were asked to participate in an interview representing their organization. Convenient dates and locations were agreed upon for interviews. Four interviews were conducted in-person or via telephone/video conference with a total of 13 participants.

The interviewer was provided interview guides and gifts for interviewees, a frequently asked questions sheet and a functions chart (Appendix E). The process for the interview included providing a consent forms and agreement to be audio recorded to each participant. At the beginning of the interview each participant was shown the project video, and then systematically went through the questionnaire. For consistency all interviews were conducted by the same researcher. Interviews were transcribed into word documents.

The analysis of the interviews were completed by importing the Word documents to NVIVO 11 data analysis software. Coding by the research team was done by key word search, frequency and a constant comparative method aligned with qualitative data analysis. Themes were developed that were related to the preliminary findings of the quantitative data to produce the report findings.

Focus Groups

Identification of key stakeholders groups were used by purposive and convenience sampling, these groups included mostly those connected to First Nations Agencies and First Nations Group Homes.

Efforts were made to seek First Nations stakeholders at already planned gatherings (i.e. meetings and conferences). The project coordinator scheduled dates in consultation with the Community Engagement Liaison and information kits were forwarded to the liaisons who coordinated with their home community the logistics of the focus groups. Cultural and community protocols were followed as per discussions with the community liaisons.

A total of twenty-four focus groups were conducted with 211 participants. Similar materials were used for the focus group as with the KIIs: facilitator guide, note taker guide and participant handout (Appendix F). Each participant was provided a frequently asked questions, functions chart and a consent form that included a photo waiver. A gift was provided for each participant.

All focus group participates were invited to participate at the scheduled time and place. The facilitators prepared the space with Elders including protocols and prayers. Similar to the interviews introductions were completed, signed consent forms, participants were shown the project video, facilitators then proceeded to pose the set questions and recorded comments on flips and the note taker (when available) took verbatim recorded notes. Catered meals were provided to each focus group.

Focus group materials were collected and returned to the coordinator. Notes were recorded in excel then imported into NVIVO 11 data analysis software. Coding by research team looked for key word search, frequency and a constant comparative method aligned with qualitative data analysis. Themes were developed then were related to the preliminary findings of the quantitative data to produce the report findings.

Assumptions were made that the region of the province where the research took place represented the home region of the participant.

Qualitative Data from Surveys

A final source of qualitative data came from surveys, which included a comment sections allowing the participants to include any final comments. All the statements were compiled for qualitative data analysis.
As a project focusing on First Nations child welfare, it is important to represent the voices of First Nations people in our province. It is noteworthy that 95% of survey participants identified as Aboriginal.

When the age of participants is considered, 44% of participants were between the ages 18 to 29; 43% of participants were between the ages 30 to 59, and; 13% were over 59 years of age.

In terms of gender, 74% of participants were female and 26% were male.

While demographic information was only collected from those who participated in the survey portion of the research activities, this number remains very high at 1109, or 25% of the 4499 total. In the discussion to follow some important pieces of demographic data will be presented, in order to provide additional insights into those who participated in this portion of the project.

### Project Participants

Given the timeframe of this project, the number of individuals, communities, and organized groups engaged is significant. Moreover, those engaged represent all regions of the province:

<table>
<thead>
<tr>
<th>Participants By Region</th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>North</td>
<td>Prince Albert and North</td>
</tr>
<tr>
<td>Central</td>
<td>South of Prince Albert to Davidson, SK</td>
</tr>
<tr>
<td>South</td>
<td>South of Davidson, SK to the U.S. Border</td>
</tr>
<tr>
<td>Uncategorized</td>
<td>South of Davidson, SK to the U.S. Border</td>
</tr>
<tr>
<td>Total</td>
<td>4499</td>
</tr>
</tbody>
</table>

As a project focusing on First Nations child welfare, it is important to represent the voices of First Nations people in our province. It is noteworthy that 95% of survey participants identified as Aboriginal.

When the age of participants is considered, 44% of participants were between the ages 18 to 29; 43% of participants were between the ages 30 to 59, and; 13% were over 59 years of age.

In terms of gender, 74% of participants were female and 26% were male.
Moving into more meaningful demographic content, survey participants were asked: “Have you or members of your family attended residential school?” 79% of participants across three age groups either attended a residential school or had a family member who attended a school. The largest age group who either personally attended a residential school or who had a family member who attended is between 30 to 59 years of age.

A majority of participants (56%) also indicated they had themselves previously been in care (kinship, foster, or adoptive care).

### Responses by Self or Family Member Attending Residential School

<table>
<thead>
<tr>
<th>Age Grouping</th>
<th>Statement Response</th>
<th>Total</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>18 - 29 Years</td>
<td>180</td>
<td>66</td>
</tr>
<tr>
<td>30 - 59 Years</td>
<td>398</td>
<td>81</td>
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<tr>
<td>59+ Years</td>
<td>109</td>
<td>38</td>
</tr>
<tr>
<td>Total</td>
<td>687</td>
<td>185</td>
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### Responses by Self or Family Member Having Been in Care

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<th>Age Grouping</th>
<th>Statement Response</th>
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</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>18 - 29 Years</td>
<td>134</td>
<td>131</td>
</tr>
<tr>
<td>30 - 59 Years</td>
<td>287</td>
<td>192</td>
</tr>
<tr>
<td>59+ Years</td>
<td>75</td>
<td>68</td>
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<tr>
<td>Total</td>
<td>496</td>
<td>391</td>
</tr>
</tbody>
</table>
Project Findings - Introduction

The findings of this engagement project are based on a comprehensive analysis of both the quantitative (survey) and qualitative (focus groups, KIIs, survey comments) data. In collaboration with the Project Advisory Committee, the research team carefully considered these data and identified five prominent themes. These themes were derived from the highest ranked survey statements and the most repeated and consistent ideas from KIIs and focus groups. In other words, these themes represent groupings of the most important priorities for reform as voiced by the participants. Further analysis revealed that the themes and priorities they represent align in significant ways to the four child welfare functions. The specific priorities included in each theme as well as action items connected to these priorities are summarized in the chart and diagram on the following pages. These findings are not presented in any particular order, however, they are clearly inter-connected.
<table>
<thead>
<tr>
<th>Function</th>
<th>Themes</th>
<th>Priorities</th>
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</thead>
<tbody>
<tr>
<td>Family Centered</td>
<td>Programs &amp; Services</td>
<td>Access to Services</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Availability of Resources</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Rural &amp; Remote</td>
</tr>
<tr>
<td>Child Centered</td>
<td>Honouring Youth</td>
<td>Honouring Youth Voices</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Transitions Out of Care</td>
</tr>
<tr>
<td>Community Centered</td>
<td>Capacity Building</td>
<td>Child Welfare Perception</td>
</tr>
<tr>
<td>/Stewardship</td>
<td></td>
<td>Collaboration In Child Welfare</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Recruitment, Retention &amp; Training</td>
</tr>
<tr>
<td>Guardianship</td>
<td>Practice Approach</td>
<td>Case Planning</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Standards</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Maintaining Family Connections</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Diversity</td>
</tr>
<tr>
<td>All Functions</td>
<td>Systemic Factors</td>
<td>Collective Voice</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Funding</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Infrastructure &amp; Technology</td>
</tr>
<tr>
<td></td>
<td></td>
<td>Legal Rights and Responsibilities</td>
</tr>
</tbody>
</table>
Culture

This diagram emphasizes culture, a foundational grounding point not only for the findings, but as previously described, for the approach, processes, and intentions of this community-based project. While definitions of culture abound, project participants and collaborators (including Elders and Knowledge Keepers) offered insightful perspectives on how they themselves understand the concept of culture and how it relates to their ideas of First Nations child welfare:

"Culture plays a very important role; It's the core of who we are as First Nations people; Identity, language, ceremonies; Connection with Elders as teachers, role models and culture helps to decolonize our minds"
Board of Directors Focus Group Participant

"Walk the walk; Sweats; Sundance; Chicken dance; Pow wow; Church; Story Telling; Feasts; Smudging; Moon ceremony; Listening – Learn when attending ceremonies"
Out of Home Caregivers Focus Group Participant

"You know another thing I would say around culture and we talk a lot about our front line staff needing to understand culture and know more culture but I think it's the leadership too. We make assumptions that the leadership understands all of this and knows all of this information too and I don't think that's necessarily always true so although we focus on that group of new employees I think it goes through all levels."
KII Participant

"It is very hard in an agency that pushes for all programs to be culturally relevant, when not all families are cultural. Some mothers that I have worked with, feel that, at times, culture takes over the real teachings that are needed. Too busy trying to be cultural. Language is, also, different than cultural, spiritual teachings, yet it is combined so intricately, that it cannot be separated. Some mothers want the language but not the spiritual teachings. Some have been raised to believe in Christianity. There is no consideration for this at all or even discriminated against. This may cause a resistance to the help that is so needed."
Survey Comments: FNCF5 Staff

"We as a nation should manage the outcome of all kids, cultural, mental and spiritual aspects of their young lives. Native people were able to take care of each other, elders and kids alike. We need more of that today."
Out of Home Caregiver Survey Participant

"Culture camps, rites of passage, ceremonies, Cree songs, language, culture is important to providing services to youth."
Youth Focus Group Participant

Photo Credit: Donna Heimbecker
Theme 1 - Programs & Services

This first theme, which aligns to the family-centered function, is related to the programs, services, and resources that participants identified as essential to building and sustaining healthy and resilient communities. From their perspectives, having locally available and accessible services is a major determining factor of well-being – at the level of the individual, family, and community as a whole.

The presentation of the key priorities and actions associated to this theme will highlight many of the gaps that currently exist in these areas as well as the challenges posed by the rural and remote locations of many of the province's First Nations communities. Additionally, the highest resource-based priorities of the communities will also be discussed and linked to specific actions.

Theme 2 - Honouring Youth

The theme of honouring the voices, experiences, and ideas of First Nations youth is connected to the Child Centered function, which focuses on the interests and needs of children and young people. Here, the priorities of empowering youth through meaningful engagement, sincere listening, and responsive support are connected as well to the preparations and planning involved in transitioning out of care. The action items connected to this function, theme and priorities express a desire for stronger alliances with First Nations youth, and more proactive approaches to addressing the complex issues they face while in care and for those preparing to transition out of care.

The theme of honouring the voices, experiences, and ideas of First Nations youth is connected to the Child Centered function, which focuses on the interests and needs of children and young people. Here, the priorities of empowering youth through meaningful engagement, sincere listening, and responsive support are connected as well to the preparations and planning involved in transitioning out of care. The action items connected to this function, theme and priorities express a desire for stronger alliances with First Nations youth, and more proactive approaches to addressing the complex issues they face while in care and for those preparing to transition out of care.

Theme 3 - Capacity Building

Supporting and increasing capacity within First Nations child welfare is at the heart of this theme. Connected to the Community Centered (Stewardship) Function, priorities within this theme concentrate on the recruitment, retention and training of high quality staff, as well as collaboration in Child Welfare and Child Welfare perception. The actions emerging here address the need to nurture healthy and competent front line workers who are embedded in the cultures and traditions of those they serve. Building capacity among individual workers and agencies will strengthen the entire First Nations child welfare system in the province and naturally foster greater communication and collaboration.

Theme 4 - Practice Approach

The fourth key theme encompasses the philosophies and general approaches in First Nations child welfare and the ways that they shape specific elements of practice. The related function is guardianship, which addresses issues of placing children in out-of-home care. The three main priorities included in this theme emphasize the need to maintain family connections, to account for diversity and the unique circumstances and contexts of the families involved with agencies, and also the specifics of case planning and standards of care. The actions likewise emphasize child welfare practices that are rooted in First Nations culture and the value and importance of respectful relationships.

Theme 5 - Systemic Factors

The final key theme moves beyond the four functions and addresses high-level factors that both shape and impact the functioning of large, complex and interconnected systems including the First Nations child welfare system, provincial and federal governments, and First Nations leadership. The priorities in this theme relate, therefore, to areas such as funding, infrastructure and technology, and legal rights and responsibilities. Project participants also prioritized the need for the First Nations CFS agencies to come together through one collective voice. The actions associated with these priorities express a desire for more transparent and collaborative working relationships, greater autonomy for First Nations, and equitable funding and processes for First Nations children in care.
Access to services was very important to all research participants. Access to services was understood as the accessibility of mainly health services in their First Nations community. Some service examples include: mental health, physical disabilities, cognitive disabilities and addictions. This finding also covers the time, location, cultural appropriateness and transferability of services that relate to accessibility.

In the youth survey, 96% of the respondents representing 296 youth indicated important to very important when asked, “When a kid has to live away from their family and they get special services, they should be able to keep those same services when they return home (e.g., wheelchair, special food, medication, therapy)” (Statement 6.13). This is a very strong response from youth as they strive to transition back to their communities. Critical to reunification and connection with their community culture, the mobility of services may be a stumbling block to fully realising access to services.

More survey results address other aspects of accessibility. The Family in Care Survey, recorded 86% (31 people) indicating very important for the statement, “It is important children and families to get services (assessment, diagnoses, and treatment) when they need it” (Statement 8.20). Also supporting a similar statement, the Board of Directors, rated 94% very important, “It is important for families to get better services (addictions, mental health, parenting skills) where they live” (Statement 6.23, Board of Directors Survey). The Service Provider Survey went a bit further in terms of better access to services, with 81% (representing 201 service providers) rating the following statement as very important: “If a family can get better services (addictions, mental health, parenting skills) where they live, children could be safe and healthy in their home” (Statement 9.22). This message was shared in a Service Provider survey comment which stated, “On Reserve families should not have to travel 2 to 3 hours for services relating to better a child or family. Services are very limited to our families on the reserve”. This opinion is supported by a study in Manitoba looking at on-reserve health services: “While the federal government provides a transportation subsidy to those who must travel to access care off-reserve, this budget is constantly strained by demands, and delays in approval as well as cut backs have been reported. Although this factor applies to all communities, communities with no or limited local access to care may be particularly disadvantaged” (Lavoie et al., 2010, p. 722).

Focus Group participants also had responses to accessibility. When asked, “What are some ways to provide services to First Nations children and youth with diverse needs?” one focus group stated: “Every child who has special needs should qualify for services; qualify without being labelled; services should happen immediately vs. being pushed aside; have adequate needed services in the community” (Board of Directors Focus Group).

A key informant responded to, “What role does your organization have in ensuring children and youth with diverse needs receive services that are culturally appropriate, equitable, accessible and in a timely manner?” (Question 7) with the following comment, “Family can’t do it if they are living in a remote community to care for the medical needs of their children but a child should never come into care just because the family can’t meet the medical needs so it’s a huge issue” (KII 04).

Research participants also commented on types of services, emphasizing mental health, culturally appropriate services, and services for children with disabilities. One FNCFS Staff Survey comment noted that “Mental Health Services must be available in each community. Some families/clients have no way of getting into the cities where Mental Health services are provided.”

A key informant commented on the cultural appropriateness of providing services off-reserve, “Like smudging – it’s such a huge barrier; Yes such a huge barrier; When you have a family and you want to smudge, you can’t do it here and you can’t do it there. That’s just a tiny limitation but it has a bigger affect; There’s differences depending on the building because we have a place where we can smudge – that’s a government owned building yet here that’s not an option so there’s differences depending on where you are too” (KII 04). FNCFS staff also support culturally appropriate delivery of services: “It is important for services to be delivered in a culturally appropriate and respectful way” (FNCFS Staff Survey Comment).

There is overwhelming evidence from research participants regarding the lack of accessibility to services that are culturally appropriate, provided in a timely manner, and in the community. Some of these comments can be related to recent developments with Jordan’s Principle. The Engagement Project did not specifically seek out opinions on Jordan’s Principle, therefore, these are general inferences based on comments and experiences shared by research participants. Accessibility of services is complex and layered with multiple challenges at the government and provider levels. Improving accessibility in one area may have immense impact in many areas which could contribute to the improvement of services in on-reserve child welfare.

Quotes

“Every child who has special needs should qualify for services; qualify without being labelled; services should happen immediately vs. being pushed aside; have adequate needed services in the community” (Board of Directors Focus Group).

“On Reserve families should not have to travel 2 to 3 hours for services relating to better a child or family. Services are very limited to our families on the reserve”. (Service Provider Survey)

“Every child who has special needs should qualify for services; qualify without being labelled; services should happen immediately vs. being pushed aside; have adequate needed services in the community” (Board of Directors Focus Group).

“It is important for services to be delivered in a culturally appropriate and respectful way” (FNCFS Staff Survey Comment)
Prevention programming has been part of most Saskatchewan FNCFS since 2008. The goal of prevention is to strengthen families in the community. This fits into the availability of resources finding, however, research participants indicated more is needed to strengthen families.

The types of programming participants want to see work toward building a social safety net, however these require more robust development and investment in building the capacity of the community. Acknowledging that poverty is one of the main reasons children and youth are coming into care (Public Health Agency of Canada, 2008; Office of the Child and Youth Advocate Alberta, 2016; TRC, 2015), the development of a collective community framework would work towards strengthening the community.

The specific programs research participants discussed included:

"Safe homes for families to go to in times of crisis" (FNCFS Staff Focus Group).


"Recreation & workers, education, churches, evening programs, leadership workshops for young people, need infrastructure – no facilities, youth leadership programs, gathering, training, mentorship programs, Elders, appreciation of service providers" (Families in Care Focus Group).

The availability of resources refers to supports in the community that help strengthen families and specific groups such as youth. Research participants indicated resources in the community should be culturally relevant and include activities and or programs that are targeted to specific groups and family, such as: culture camps, safe homes, healthy lifestyle activities, recreation, and parenting. When asked to rate the statement, "When there are more things for my family to do (e.g., activities, playgrounds, recreation, sports) in my community I feel safer and stronger" (Statement 6.15, Youth Survey), 95% of youth indicated important and very important. Similar ratings to this comment were evident in the SFNFCI Staff and Out of Home Care and Caregivers Surveys. The FNCFS Staff Survey statement, “More supports (homemakers, parenting programs, and family counselling) are needed to help reduce the number of children coming into care” was rated very important by 81% of FNCFS staff.

There was a wide range of suggestions by research participants which may not be realistic for one organization or service provider, however, this may open the door for opportunities of inter-agency work, blended approaches, and an overall community plan.
For First Nations in Saskatchewan, rural and remote living are an everyday reality that affect the access and availability of resources. This relates directly to the last two sections of accessibility of services and availability of resources. Rural is understood as a population living outside larger urban centers. Remote is understood as a location situated far from the main centers of population.

Three survey groups were asked about providing services in a remote community, FNCFS Staff, FNCFS Board of Directors, and Family in Care Survey. All three averaged an 84% rating as very important when asked, “It is important for service providers to address the unique challenges faced by remote communities” (FNCFS Staff Survey).

For First Nations children and youth residing in rural or remote communities, many basic necessities are not available without having to leave their families and communities.

A full continuum of child welfare services is limited in rural and remote contexts. For example, a youth may need a specific type of out of home care service; although there are seven group homes in Saskatchewan, they may not offer services needed by a youth or may not be located in areas accessible to the family. Having youth reside in non-First Nations therapeutic group homes, often far from community and culture, can increase the trauma experienced by the youth and family and minimize opportunities for support.

Access to multiple related services is limited and sometimes non-existent in rural and remote communities. Most First Nations communities have doctor services throughout the month, however, once a physician has seen the child and offers referrals, it may mean several trips to multiple destinations to fulfill the physician’s request and care for the child. Seeing different professionals, in different places and at different times extends the costs of time and money as well as the child’s welfare experience. In most experiences, appointments are not easily coordinated and often involve extended waitlists.

When research participants were asked about their experiences in a rural and/or remote communities they stated: “Health professional workers to work with the kids; Referred out – have to wait lengthy times; Medical transportation is difficult [lots of restrictions]; for disabilities, can’t travel on bus, need escorts; Government cuts, money” (Service Provider Focus Group).

“Family can’t do it if they are living in a remote community to care for the medical needs of their children but a child should never come into care just because the family can’t meet the medical needs so it’s a huge issue” (KII 04).

“There will always be people living on reserve, availability of services should be bought up to standards and not third world conditions. There has been improvements but not fast enough for some, where it’s too late” (Service Providers Survey Comment).

Leaving the community can be very overwhelming for families. They are leaving their culture, language, and family to receive services that are important to their health and wellbeing. Ironically, leaving the community may also negatively affect their health and wellbeing. The National Collaborating Center for Aboriginal Health indicates, “Access to health services refers to the ability of individuals or groups to obtain services they seek, and is widely regarded as an important determinant of health” they also note that “Aboriginal peoples, in particular are an underserved group” (2011, p.1).

Rural and remote residents face many other challenges not specifically discussed in this report, relating to jurisdiction and the proximity to services.
Honouring Youth

Honouring Youth Voices

The youth voice is becoming more important in First Nations communities as the youth population continues to excel beyond national and provincial growth rates in Canada. In 2011, the National Household Survey indicated First Nations people were the youngest in Saskatchewan and had the youngest median age of 20 years across Canada. The survey also noted that, “The 2011 NHS showed that there were 39,275 First Nations children aged 14 and under in Saskatchewan. They represented 38.1% of First Nations people in that province, and 20.0% of all children in Saskatchewan” (Statistics Canada, 2011). In Saskatchewan, research and publications on the health and wellbeing of First Nations children and youth are continually increasing. Much of this research is driven by social issues including mental health, suicide, addictions, and involvement with the justice system. As a result, community based organizations and government are beginning to respond with services and processes that are inclusive and respectful of the youth voice. This response needs to be supported by an injection of funds and infrastructure for a long term, collective youth action plan.

In total, 521 youth under the age of 29 years filled out an engagement survey, which is 44% (521 of 1189) of the total respondents. 325 of these youth filled out the specific youth survey. 74% of the youth survey participants were female and 95% of all youth participants identified as Aboriginal. Youth also participated in two focus groups. Their readiness to be involved in child welfare discussions was demonstrated by their active participation in this project.

In the youth survey, respondents used a three point scale to indicate how important a given statement was. The table below highlights youth survey findings:

### Youth Survey Statements (N=325)

<table>
<thead>
<tr>
<th>Statement</th>
<th>Important</th>
<th>Very Important N (%)</th>
</tr>
</thead>
<tbody>
<tr>
<td>6.1 It is important for me to talk to other kids who I feel safe with and who understand me</td>
<td>288</td>
<td>90%</td>
</tr>
<tr>
<td>6.2Kids must be able to get help with their feelings when they want it</td>
<td>305</td>
<td>96%</td>
</tr>
<tr>
<td>6.3 It is important to me to learn about my culture and participate in cultural activities (e.g., singing, dancing, beading and ceremonies)</td>
<td>310</td>
<td>97%</td>
</tr>
<tr>
<td>6.4 Kids who can’t stay at home must be connected with their community and culture</td>
<td>299</td>
<td>95%</td>
</tr>
<tr>
<td>6.5 It’s important for a kid to stay connected to their family when they can’t stay at home</td>
<td>302</td>
<td>94%</td>
</tr>
<tr>
<td>6.6 It’s important for me to know how legal decisions will affect me and my family</td>
<td>302</td>
<td>95%</td>
</tr>
<tr>
<td>6.8 Kids must have a say in the decisions that affect them</td>
<td>299</td>
<td>95%</td>
</tr>
<tr>
<td>6.14 People who are trying to help kids must speak in a way that kids can understand and can relate to</td>
<td>290</td>
<td>94%</td>
</tr>
<tr>
<td>6.15 When there are more things for my family to do (e.g., activities, playgrounds, recreation, sports) in my community I feel safer and stronger</td>
<td>293</td>
<td>94%</td>
</tr>
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The priority of honouring the voice of youth may be accomplished in many diverse ways, most of which are rooted in culture and traditional teachings:

- **Encourage youth leadership – cultural based.** (Stopping the cycle) – Role modelling & Mentoring (FNCFSS Staff Focus Group).
- **Ensure that practitioners are trained to be sensitive to the range of issues youth in care have to deal with;** Undertake research to identify best practices in this area and develop resources to assist practitioners (Service Provider Focus Group).
- **The children need to be heard and not looked at as as a dollar figure. Helping them understand who they can become as opposed to the negativity that has been instilled due to the lack of parenting skills** (Out of Home Caregivers Survey Comment).
- **Honouring the children in care is very important as they know they are from the community and it instills pride in themselves and being part of community. We ours with star blankets** (Out of Home Caregivers Survey Comment).

**Quotes**

- “Honouring the children in care is very important as they know they are from the community and it instills pride in themselves and being part of community. We ours with star blankets” (Out of Home Caregivers Survey Comment).
- “Teach them about the cycle of life; medicine wheel teachings – physical, emotional, mental and spiritual to be a healthier person; teaching them that they are special and loved; incorporating traditional cultural teachings; coming into care and ripped away from their family rips their spirits; rejected and feel useless” (Board of Directors Focus Group).
- “I think that we still prescribe and I will say even in our First Nations, we still prescribe you know from the Chief and Council level, we still prescribe. I think we need to listen at all levels to our children, our youth” (Kill 01)

In this project, the youth voice was clear - they want to be involved in decisions, they want to have more culturally relevant services targeted towards children and youth and supported by the UN Convention on the Rights of the Child, Article 30, “You have the right to practice your own culture, language, and religion. Minority and Indigenous groups need special protection of this right”.

### Caregivers Survey Comment

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<tr>
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<td>5.1 Youths with special needs and a very sensitive emotional make up need the complexity of care that is provided by a First Nations Caregiver</td>
<td>252</td>
</tr>
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<td>252</td>
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Honouring Youth
TRANSITIONS OUT OF CARE

The process of transitioning out of care can happen in many different ways and times throughout the period when a child/youth is in care. It can happen as they transition from out of a caregiver/foster home and move back to their family home, or it can happen when they age out of care. In this project, the focus was on aging out of care. Findings speak to the challenges involved with such transitions, linking them to government policy and recommending that resources available to youth in such situations be culturally relevant.

Many youth leave care at 16 years of age, some return to care before their 18th birthday as they realize the challenges of being on their own. In First Nations communities there is minimal development of peer homes, which support youth to be on their own within their community (when they are not able to stay in their family home). Expanding the continuum of care for youth throughout this transition was emphasized. Executive Directors, Out of Home Caregivers, and Group Home staff all indicated very high importance for the statement that “youth aging out of care needing more supports (medical, vocational, financial) as they move into independent living” (Statement 18).

Working with a youth to build confidence and skills in peer homes could be beneficial to their growth and development and create greater readiness for the next phase of their lives. A Key Informant indicated, “We hear it from leadership. They graduate out of child welfare and end up over at income assistance right away to get a welfare check. Need to break that dependency. There are those coming out of care that need a higher level of service, cognitive or physical disability. But there are many that leave care that are not launched properly” (KII - 02). Others stated that we are “not helping youth transitioning – the youth are struggling; Youth would be homeless / lost; Youth are moving place to place; Youth have needs and support; Provide more programming; Need support until they can support themselves” (Out of Home Caregivers Focus Group). Research supports this idea, emphasizing the need and benefit of mentorship: “a relationship with a competent, caring adult, such as a mentor, may serve protectively for vulnerable youth, and a nascent yet growing body of literature suggests that naturally occurring mentoring relationships from within youth’s social networks are associated with improved outcomes among young people in foster care during adolescence and the transition to adulthood” (Thompson, Greeson, & Brunsink, 2016). Given the very grim Saskatchewan youth suicide statistics, it is essential that we seek additional ways of supporting youth in care: “In northern Saskatchewan, where First Nations and Métis people make up 85% of the population, suicide rates are well above the national rate. The majority of reported suicides in this region are committed by adolescents and young adults” (Tait et al., 2017).

It is problematic to send an 18 year old out on their own because funding has stopped, several caregivers suggest, “rather it would be more helpful I would say that children that come home from care should be cared for until they are stable in their living environment, housing, and something to live on, and not just to be sent home after they turn 18” (Out of Home Caregivers Survey Comment). A Key Informant shared their thoughts on transitioning out of care, “One of the things I see is we don’t start soon enough and by the time they are 16 or 18 or 21, we have lost them and we need to start at a younger age developing lifelong plans for these children and I know that legislation too is looking at extending the age of adulthood to 18 and being able to care for a youth until they are 24 instead of 21 and expanding those because there needs to be more time, we can’t just say you’re 18 and we are done with you, goodbye, there has to be a little bit more leeway to plan for those kids better” (KII 04).

Currently there are limited resources for youth transitioning out of care as a result of aging out in both rural and urban centers. Saskatchewan currently has seven First Nations group homes on-reserve serving children and youth 6-15 years old, limited resources are available to open up youth specific homes. Current group home funding is based on a fee for service model; resources are only sufficient if all beds are occupied. This type of service funding model is extremely restrictive and is not in alignment with a supportive client centered model.

Focusing on helping youth grow and develop until they are ready to be on their own is part of the continuum of care that is culturally imbedded in First Nations. It is especially important for transitions to be proactively addressed and for youth to be intimately involved. These needs are only amplified for youth who have been diagnosed with a mental illness, cognitive disability, or physical disability.

Quotes

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“Many of us parents don’t kick our child out when they turn 18 and say ‘good luck’ but that’s exactly what happens to many of the youth in the child welfare system and many of them are not able to function as an adult because we haven’t given them the skills that they need to make that transition” (KII 01)

“All kids aging out of care should have a place to go, a safe place.” (Board of Directors Focus Group)
When First Nations Child and Family Services first started in Saskatchewan (in the late 1980’s) the prevalent approach was a deficit-focused one concentrating on protection services. Because this approach, as reflected in provincial policy, did not align to First Nations ideology, it contributed to communities developing a somewhat negative perception of First Nations child and family service agencies. Many efforts have been made to understand and develop strategies to shift both perceptions and practices in First Nations child welfare (see: McDonald & Ladd, 2000; MacDonald & Craddock, 2005; TRC, 2015). Positive reputational shifts have occurred since prevention was introduced in 2008, enabling agencies to more fully implement community based programming models that align to their respective culture(s). From participant perspectives, positive perceptions may be further enhanced in a number of ways:

“Respect the community, be honest; lateral violence and bullying is an issue in our communities and needs to be addressed” (Board of Directors Focus Group).

“we need to get involved in our communities; attend community events; get to know the community members; need to visit; get out into our communities; go knock on doors” (Board of Directors Focus Group).

“To be seen out there, visit, communication; Community dinners / get to know families” (FNCFS Staff Focus Group).


“Transparency; Confidentiality” (FNCFS Staff Focus Group).

“Get client feedback” (FNCFS Staff Focus Group).

Three First Nations child and family services agencies in Saskatchewan have achieved accreditation, a process that ensures community consultation and feedback. While other agencies have not gone through a formal accreditation process, they are engaged in positive community engagement, including soliciting community feedback and inviting greater community participation in program design.

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Collaboration is integral to the health and wellness of all communities. Building partnerships that benefit the community overall and target at risk individual(s) and group(s) is a priority for participants in reforming First Nations child welfare.

In some communities there is overlap of programs and some silo driven departments. In many instances needs are community wide and could be worked on collaboratively. Findings suggest that inter agency cooperation should happen at the community level to ensure a team approach that completes the circle of care. Such an approach would also lead to more culturally relevant programming by having programs delivered by community members or those who are familiar with the culture of the community, and by reducing the need for people to leave the community. The Board of Directors Survey had high ratings (88% and 91%) for the following statements, “A strategic plan must include elements that support a culturally grounded practice that addresses serious problems that children face” and “that support a culturally grounded practice for children living in out-of-home care” (Statements 6.1 and 6.3). Thus, incorporating culture as a foundation for collaboration is a key factor in this priority.

Participants clearly feel that “More of a team approach for children in care is needed” for the best interest of the child. More contact between agencies in the school” (Service Providers Survey Comment). They also provided many suggestions on how working together at the community level and between departments within agencies and organizations might be achieved:

“Be respectful and confidential; not sending private information by fax to the band office; follow policies” (Board of Directors Focus Group)

“Pooling our resources through First Nations Agencies; work together utilizing our network of programs and services” (Board of Directors Focus Group)

“Don’t duplicate. Cost share” (FNCFS Staff Focus Group)

“Monthly meetings; Care conferences; Exchange information; Information sharing” (Out of Home Caregivers Focus Group)

“Communication - Talking with every organization involved” (Out of Home Caregivers Focus Group).

“Visit other First Nations to see how they work” (Service Provider Focus Group).

Collaboration among those serving families is essential for success and for the general strengthening of First Nations communities. The team approach sounds promising, however, more formal agreements and partnerships with collective outcomes are needed to ensure confidentiality and to maintain effective roles and responsibilities while serving community members. 84% of Boards of Directors survey respondent indicated that it was very important that agencies “have clear procedures on sharing information with community members” (Statement 6.9). 75% also felt that it was very important to “share/report with leadership of the communities we serve” (Statement 6.10).

Overall, this priority speaks to the need to develop policies and information sharing protocols to better support the relationship between clients and service providers. Such policies could provide a strong framework for collaboration, ensuring that the needs of children and families are consistently met in ways which benefit the community as a whole.

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Capacity Building

RECRUITMENT, RETENTION, TRAINING

Recruitment, retention and training are crucial determining factors of capacity in First Nations child and family service agencies. Project surveys, focus groups, and interviews addressed these topics and also asked participants about best practices and general recruitment, retention, and training strategies.

In the context of this project, recruitment means finding new people to join an organization. In most FNCFCS agencies, recruitment involves hiring professionals from within the community. These people usually share the culture and understanding of the community, have a desire to help their people and live in the community. This intention is very good, however, participants indicate that finding educationally qualified employees for each job is challenging. In some cases, agencies under-fill positions, investing in people who are completing their education while maintaining employment. Although there is no published data on the experiences of recruiting staff in Saskatchewan First Nations child welfare, the provincial ministerial system has indicated challenges with recruitment: “A ‘severe shortage’ of social workers in northern Saskatchewan is affecting not only the remaining workers, but the thousands of people who rely on them for help…” (Star Phoenix, 2017). Recruitment challenges are intensified for northern FNCFCS agencies as the ten are located north of Prince Albert serve 37 First Nations communities. This makes for a competitive market, even without factoring in provincial social work jobs or the fact that FNCFCS workers are not paid at par with provincial counterparts.

FNCFCS Agencies have noted their efforts to attract new employees, including offering additional perks, subsidized housing, flexible work hours, and a desirable work environment. Some have suggested that it is the lack of infrastructure in the communities that turns potential employees away. It is also difficult to attract employees who have knowledge and experience with First Nations. Another challenge is working in protection, for as an FNCFCS Agency Executive Director notes, “it’s a tough job and people don’t want to do it, if they do they burn out quick”.

Recruitment is often challenged further by limiting the pool of potential hires to those with specific, localized knowledge and life experience: “I am a strong believer that First Nations Child and Family Services work should be done by First Nations workers who have a firsthand experience and knowledge of the struggles, hardships, trauma, and resiliency that First Nations families and children face” (FNCFCS Staff Survey Comment). Moreover, while there is an emphasis on culturally relevant services and a desire to hire First Nations workers, some note that “we also need to understand that a lot of our First Nations people don’t even understand themselves …a lot of our people don’t even understand that they come from dysfunction or that they did have this history [re: referring to knowledge and familiarity with colonialism, the legacy of residential schools, etc.]” (KII 03).

Suggestions for addressing the challenge of recruitment included developing relationships and agreements and mentorship programs with local universities (KII 02), creating “more housing for staff” (FNCFCS Staff Focus Group), offering “incentives, paid vacations and keeping employees happy- staff appreciation; healthy working environment, staff retreat; more staff, staff get burned out” (Out of Home Caregivers Focus Group). More research that looks at strengths and successes in recruitment is needed to better understand potential solutions.

Quotes

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Recruitment, Retention Training (Cont’d.)

Retention, in this project, refers to the ability of an organization to maintain its employees. Once FNCFs hires employees the next challenge is to keep them and to train them in ways that adequately prepare and support them in their position. One of the main challenges highlighted by participants here is the risk of burn-out, particularly within understaffed agencies – “we need full complements staff at all times [or it causes] Overload/backload on current staff” (FNCFs Staff Focus Group).

FNCFs staff also mentioned the need to feel safe and protected in their positions, recommending “whistle blower protection” within the agencies (FNCFs Staff Focus Group). Staff also identify the need for “more support when things go wrong” (FNCFs Staff Focus Group). Additionally, many noted a lack of adequate orientation and support for new staff as a major problem: “Sink or swim vs proper orientation; no orientation provided. “This ‘fend for yourself’ mode is not working. Need oversight from management” (FNCFs Staff Focus Group).

Finally, “nepotism” was identified as a problem impacting retention, along with the fact that “some people are afraid of change (Out of Home Caregivers Focus Group). Participants are thus pointing to the need for significant reform within the agencies and with the overall approach to staffing and employee management.

Training is another key component of capacity that was addressed often by a range of participants. As one key informant states, “training is a huge priority as well for FN child welfare. Different training opportunities that need to happen between non first nations child welfare” (KII 02). Although similar job titles exist throughout FNCFs Agencies, the scope of each position ranges considerably, resulting in the need for customized training that aligns to position/roles and responsibilities, policy, and the culture and needs of each community. Some challenges in regards to training include the fact that training is costly for agencies.

Additionally, “investing employees comes at a risk, sometimes they are all trained then leave to another CFS or the city” (FNCFs Executive Directors Focus Group). Regardless of this risk, many emphasize the need for “more specialized training – i.e. suicide prevention training, FAS training, training on special needs” (Out of Home Caregivers Focus Group) and Boards of Directors are also of the mind that “culturally appropriate training and professional development is very important” (Board of Directors Focus Group). Indeed, the Truth and Reconciliation Commissions call to action include ensuring that child welfare workers are “are properly educated and trained about the history and impacts of residential schools.” (TRC, 2015, 1.i.i). Participants suggest training with Elders and the inclusion of Elders in multiple areas of staff support as an important means of addressing specialized training needs (Service Provider Focus Group).

While challenges defining recruitment, retention, and training are significant, participants provided numerous practical means of addresses these challenges. It appears that a collective, comprehensive, and culturally relevant strategy relating to these areas may prove extremely beneficial for the continued development and delivery of First Nations children welfare services.

Quotes

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- “more specialized training – i.e. suicide prevention training, FAS training, training on special needs” (Out of Home Caregivers Focus Group)
- “culturally appropriate training and professional development is very important” (Board of Directors Focus Group)
Practice Approach

CASE PLANNING

Participants prioritized the practices underlying child welfare work with First Nations families as a key area for reform. They voiced a desire for new and more culturally appropriate ways of doing this work: “Break the cycle of child welfare services; stop the loss of our children and the white man’s way that isn’t working for our children and families” (Board of Directors Focus Group). Participants are also interested in new practices, for example, the idea of removing parents, instead of children, from the home was voiced often as an alternative practice approach.

Culture is thus central to suggestions for reform in this area. From the perspective of those working within the system, they feel “It is important for services to be delivered in a culturally appropriate and respectful way” (Survey Comment: FNCFS Staff). New approaches to case planning should also, from the participants’ points of view, be based on more inclusive team approaches: “We need a holistic process where a team of individuals who are important to a child’s well-being (e.g., family, service providers, Elders, community members) work together to develop a child’s care plan” (Out of Home Caregivers Survey Comment). 95% (299 of 325) of youth surveyed felt it was important/very important that “Kids must have a say in the decisions that affect them” (Statement 6.8). Indeed participants express a desire for case planning approaches that are rooted not only in First Nations culture, but in children’s rights (e.g., United Nations Convention on the Rights of the Child (1989) and advocacy (e.g., partnerships and collaboration with the Saskatchewan Children’s Advocate, etc.).

Another shift in practice that participants would like to see is a greater focus on holistic, community-based prevention. “I think with their [province] legislation is more protective based versus preventative, so First Nations agencies are trying to do the prevention side of it. But we need legislation to support that too” (KII 01). Out of Home Caregivers agree, stating that “more preventative programming that is family centered” is needed (Out of Home Caregivers Focus Group). Participants feel that focusing on prevention would mean spending more efforts on: 1. keeping children from coming into care in the first place, 2. bringing children home from care in more expedient ways; and 3. Supporting families and keeping them healthy through community-based, culturally relevant programs and services. The benefits and inherent potential in such community and culture based approaches to practice have been noted elsewhere as well: “Community development approaches also afford the opportunity to celebrate and leverage the resiliency founded in cultural ways of knowing and being” (Blackstock & Trocmé, 2005, p. 30).

In order to support new practice approaches, participants emphasized the need for improved communication and information sharing practices: “If you’re integrating shared info into case management it will be helpful; Need to share information; bring each other on board” (Families in Care Focus Group). It was also emphasized that more information on children needs to be shared with foster parents: “Communication; Full report from agency worker to foster parents’ (Out of Home Caregivers Focus Group). As a complement to this, some expressed that “more thorough information” should be “collected about caregivers. I find there are too many reports about abuse…it’s the adults that need to be watched” (Out of Home Caregivers Survey Comment). Lastly, there was consistent focus on the need for training to support practice changes, not just among child welfare workers, but for caregivers and the community as well; “Get caregivers more workshops and training with families too. Agencies should do more home visits to children. More info on childcare too” (Out of Home Caregivers Survey Comment).

All in all, this priority demonstrates an interest in innovation and transformation. Those involved in the First Nations child welfare system are hungry for change - they feel it is evident that the current system is failing, and feel that now is the time to explore new and different alternatives.

Quotes

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“more preventative programming that is family centered is needed” (Out of Home Caregivers Focus Group)

“Community approach to working with families. Community mentorship. Parent/community networking. It takes a community to raise a child” (FNCFS Staff Focus Group)
Standards of Care: First Nations Group Home Standards (2008) that was accepted by the FSIN Chiefs and deemed equivalent by the Ministry of Social Services. The SFNFCI has also worked with human resource and finance personnel to develop standards of practice in these respective areas. Additionally, prevention policies were developed with FNCF to guide practice. These efforts are the beginning of standardized practice within First Nation Child Welfare, as standards are culturally relevant and reflective of community and program needs.

Three FNCF Agencies have achieved accreditation, demonstrating their ability to work within relevant standards aligned to their community needs, policies, and legislation. However, as indicated by participants, there is more work to be done and further to go in developing and implementing First Nations standards of practice.

95% of Board of Director survey participants (29 of 33) felt that it was important/very important that “An agency must have policies and standards to support the delivery of culturally appropriate services” (Statement 6.8, Board of Directors Survey). FNCF Executive Directors noted, “These standards should be collectively developed, have measures, and align to community expectations.”

There is support for a First Nations child welfare standards. The Engagement Advisory Committee has likewise emphasized that First Nations policies and standards should become a cornerstone for doing things differently in child welfare.

In fact, in 1990 the FSIN developed the Indian Child Welfare and Family Support Act (ICWFS) which puts forward general standards for First Nations child welfare agencies in Saskatchewan. In response, the provincial government made amendments to its Child and Family Services Act, adding special considerations for Aboriginal children (Saskatchewan Child and Family Services Act, c.C-7.2, s.61(1) 2006). In 1996, a Bilateral Accord was negotiated and signed, formalizing the Ministry of Social Services’ willingness to work with First Nations to provide “joint protective mechanisms” (Flett, 2016). Substantial work has been done in honouring the right and ability of First Nations to manage child welfare within their own communities. The SFNFCI collectively created the Customary Standards of Practice Approach

As part of reforming child welfare practice approaches, one key priority voiced by participants was standards. In acknowledging the various ways that the current child welfare system and approach is not working, participants emphasized the need for First Nations specific legislation and care standards.

Along these lines, several participants suggested developing “appropriate legislation that allows Agencies to do child protection in different ways” (FNCF Staff Focus Group). One Key Informant said “It’s the quality of care you know, there should be a standard and there should be equality….I think a national sort of an organization or development of these standards would help” (KII 01).

Board of Directors Focus Group – April 2017

FNCF Staff Focus Group – May 2017

Quotes

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Practice Approach

FAMILY CONNECTIONS

Maintaining family connections is one of the most salient participant priorities. The importance of supporting families and keeping them together was echoed across numerous participant groups. One member of FNCFS Board suggested: "We need a child first accountability framework that focuses on children and their families. The present system is structured to keep children in care and excludes their mom and dad, family, language, culture, history and the land." (Board of Directors Survey Comment). "Holistic, wrap-around programs and services" (Service providers Focus Group) were recommended to "prevent children from coming into care" and to provide them with "a sense of belonging" (FNCFS Staff Focus Group).

Caregivers emphasized that "It is important to provide more supports to First Nations families so that they can keep their children at home" 216 of 308 (71%) rated this as important/very important. (Statement 8.15). One service provider stated: "We would love to see less children in care. If we can provide and offer more support for our families before apprehending this way the child can be home or with family. Let’s find ways to help, support first before always jumping to apprehending children" (Service Providers Survey Comment).

Keeping families together was addressed by caregivers as well. As one foster parent implored, "Please don’t separate siblings no matter what age. Sometimes it is the only family they have" (Out of Home Caregivers Survey Comment).

Participants’ focus on families reflects what is commonly referred to as family-centered practice, where “the family unit remains the focus of attention; practitioners are committed to engaging and preserving the family whenever possible" (Lietz & Geiger, 2017, p. 1). This approach is strength-based in that it builds on internal strengths and “reinforces the idea that change happens in the context of positive helping relationships…Additionally, it is expected that the cultural and personal preferences of the child and family are incorporated into decision making” (Lietz & Geiger, 2017, p. 1). Project participants seem to overwhelmingly support this practice approach and many strongly expressed that “Children should be placed with family, not with strangers” (Service Providers Survey Comment).

In cases where apprehension and out of home placement are in the best interest of the child, participants still feel that encouraging family contact and connection is essential. 96% of youth surveyed (305 of 325) ranked the following statement as important/very important: “It’s important for parents to stay connected to their kids when they can’t stay at home” (Statement 6.6 Youth Survey). Others likewise suggest that we should “make it easier for kids adopted out to connect/contact family of origin” (Service Provider Focus Group).

Families with children in care want “more frequent family visits” and proposed that “technology (like Face Time) should be involved to make or establish a relationship with families” (Families in Care Focus Group).

Overall, in reforming child welfare practice approaches, participants feel strongly that kinship and community connections are a crucial priority worthy of great attention.

Quotes

"We need a child first accountability framework that focuses on children and their families. The present system is structured to keep children in care and excludes their mom and dad, family, language, culture, history and the land." (Board of Directors Survey Comment)

"It’s important for parents to stay connected to their kids when they can’t stay at home." (Statement 6.6 Youth Survey).

"We would love to see less children in care. If we can provide and offer more support for our families before apprehending this way the child can be home or with family. Let’s find ways to help, support first before always jumping to apprehending children." (Service Providers Survey Comment)
In the context of this study, the priority of diversity refers to recognizing the variety of unique cultural contexts that define the province's First Nations. In the words of one key informant, “one size does not fit all so whatever the plan forward is, it needs to consider the unique circumstances of different areas or communities. You can’t just say this works here so it’s going to work everywhere” (KII 04). Agency staff agree, similarly asserting that we “can’t have a ‘one size fits all’. Be sensitive to child’s needs. [Recognize and provide] Individualized teachings” (FNCFS Staff Focus Group). In their survey responses, 82% (124 of 141) of FNCFS staff felt that it was important/very important “for those that serve Aboriginal people to understand a community’s unique history” (Statement 8.40, FNCFS Staff Survey). Along similar lines, Caregivers expressed that in Saskatchewan, First Nations “have similar stories but are culturally different” (Out of Home Caregivers Focus Group).

Participants’ comments express that recognizing diversity and increasing our collective understanding of variability within our First Nations communities should be reflected in the programs and services offered within the child welfare system. From many participants’ perspectives this includes differences that exist between on- and off-reserve contexts and experiences: “There are different types of relationships that need to happen on reserve than off reserve. Not just with parents and families, also with different service providers in the community” (KII 02). Caregivers acknowledge as much when they suggest that there should be “differences in teaching life skills for urban and non” (Out of Home Caregivers Focus Group).

Participants also point to diversity in sexual orientation and gender identity as an important component of community diversity that needs to be reflected in reform efforts. The Project Advisory Committee in particular voiced the need to consider and protect those identifying as lesbian, gay, bisexual, trans and queer (LGBTQ). They emphasize the need to develop a culturally respectful framework that underlies the First Nations child welfare system in order to ensure that all forms of diversity and uniqueness are honoured. The priority of diversity is aligned in many ways to various recommendations calling for culturally relevant First Nations services and approaches not only in child welfare, but in areas from health and justice to sport and recreation (TRC, 2015). Developing services and practice approaches tailored to the specific needs of particular communities and community members is thus a priority participants would like to see reflected in child welfare reform efforts.

"one size does not fit all so whatever the plan forward is, it needs to consider the unique circumstances of different areas or communities." (KII 04)

“There are different types of relationships that need to happen on reserve than off reserve. Not just with parents and families, also with different service providers in the community” (KII 02)

“Be aware of different cultures, different backgrounds, different needs on reserve as opposed to off.” (KII 02)
The call for a collective voice in First Nations Child Welfare was raised clearly by the participants in the Engagement Project. Although Canada became a signatory to the United Nations Convention on the Rights of the Child in 1990, no Federal government has yet installed a National Children’s Commissioner to speak on behalf of ALL Canadian children. The 2012 compliance review undertaken by the United Nations Committee on the Rights of the Child recommended that Canada take actions to “56(f) Intensify cooperation with all minority community leaders and communities to find suitable solutions for children from these communities in need of alternative care, such as for example, kinship care” (UNCRC, 2012).

While many Provincial and Territorial Authorities have created officers (e.g., Children’s Advocate) with mandates to speak to issues relating to children, few such offices were developed in consultation with First Nations. Accordingly, tensions sometimes arise when statements are issued that purport to speak on behalf of First Nations children, and recommendations for systemic change are made without due consideration for the unique factors facing First Nations Child and Family Service Agencies. A National Child Commissioner whose authority clearly extends across Provincial, Territorial and First Nations jurisdictions would greatly assist Child Welfare services to speak with a common voice.

The desire for greater collaborative unity between all parties across the entire range of child and family services was articulated by many participants. For example, 100% of the First Nations Agency executive directors identified the statement that “It is important that First Nations child welfare speaks with a collective voice (leadership, executive, staff)” as important/very important in their surveys (Statement 10.11, Executive Directors Survey). And while unity is important within First Nations agencies and communities, participants focused significantly on the need for First Nations (all levels, from chiefs and councils to children and youth) to be equal partners in policy development and implementation: “solutions can’t come from outside, they can’t come from Regina, they can’t come from the Minister’s Office…the solutions start with the people that we are affecting the most and I’ll take that down to the children and the youth. We can’t do reform without talking to them, without asking them what’s good about this system, what needs to be fixed, what’s broken” (KII 01). Caregivers were particularly vocal about the need for more meaningful partnership and collaboration with First Nations, whom they feel should “Sit at the same table and have equal input into all decision making.” (Out of Home Caregivers Focus Group). They also suggested that “Chief and Council need to be more involved and not at arm’s length.”

The priority is thus for “more Indigenous community involvement and partnerships and collaborations, genuine relationships” (Service Providers Focus Group). Specifically, participants see collaboration between the Ministry of Social Services and First Nations agencies as a primary priority. “I would like to see more collaboration with the Ministry, a more seamless crossover so that we are at the same leadership tables, that we are sharing information more regularly…also a shared database so that children and families aren’t slipping through the cracks” (KII 04). In brief, many participants believe that “there needs to be a shared approach to Child Welfare to improve the outcomes for children and families” (KII 04) and that together “as a group, First Nations and government, need to focus on a more appropriate continuum of care… if we were doing it together it may be more successful than each of us trying to do it on our own” (KII 04).

Quotes

“It is important that First Nations child welfare speaks with a collective voice (leadership, executive, staff)” (Statement 10.11, Executive Directors Survey)

“more Indigenous community involvement and partnerships and collaborations, genuine relationships” (Service Providers Focus Group)

“Yearly Saskatchewan conference for child welfare – with communities, academics, Elders” (Service Provider Focus Group)

Some of the solutions, or at least options, that participants offer for addressing the priority of collective voice include: “Yearly Saskatchewan conference for child welfare – with communities, academics, Elders” (Service Provider Focus Group); and “forums [about] how to do this together but in different and in better ways” (KII 04).

Systemic Factors

COLLECTIVE VOICE
Systemic Factors

FUNDING

Adequate funding is necessary to provide a full range of child and family services to First Nations residing on-reserve in Saskatchewan. Within the Canada's health care system, the principle of universality indicates that “All insured residents are entitled to the same level of health care”, and this principle has been extended to services provided to First Nations people living on reserve (Canada Health Act). Section 15(1) of Canada’s Constitution guarantees “equal benefit of the law without discrimination” (Constitution Act, 1982), which suggests that the funding of universal social programs (e.g., Child Welfare) for all Canadians should be equitable regardless of where in Canada a person resides. Within Canada, the authority for social programs delivered on reserve falls to the Federal government, therefore First Nations child welfare programs are funded by Indigenous and Northern Affairs Canada.

Issues related to adequate and equitable funding for First Nations child welfare services have been debated and discussed for decades. In 2007 the First Nations Child and Family Caring Society of Canada and the Assembly of First Nations filed a Human Rights complaint against the Government of Canada, asserting inequitable discrimination with respect to the funding of social services for people living on-reserve. The complaint claimed that First Nations child welfare programs were receiving an estimated 22% less funding per child compared to similar off-reserve services (Blackstock & Trocme, 2005; Sinha et al., 2011). In 2016, the Canadian Human Rights Tribunal ruled in favour of the plaintiffs finding that First Nations children were being discriminated against and that the Federally-funded First Nations Child and Family Services Program (CFS Program) denied services to many First Nations children and families living on-reserve resulted in adverse impacts (FNFCSC, 2016).

In keeping with the Engagement Project’s stated imperative to focus on future reforms rather than already well-documented issues, the Research Team did not deliberately seek out participant comments on topics related to funding. Consequently, participants were not specifically asked their opinions on the adequacy or equity of current First Nations Child Welfare funding models. Nevertheless, issues related to funding were identified as a significant systemic factor affecting Child Welfare reform by many project participants.

For example, one key informant spoke to the adequacy of funding available for First Nations child welfare when stating that First Nations Agencies need “access to capital dollars. There are lots of things that agencies would like to do that are unique but require capital-emergency receiving homes, those types of things” (KI 02). Within the Out of Home Caregivers survey, the issue of adequate funding was also addressed in the commentary of one participant who indicated: “Why is it getting harder and harder for financial support? … We need leadership to voice for our children to get better financial care instead of less compared to non-aboriginal caregivers (Out of Home Caregivers).

Alongside issues related to organizational funding, additional issues related to the financial hardships facing individuals involved with the Child Welfare system were also articulated. Caregivers voiced a desire for more support, including financial assistance with the adoption process: “I am currently trying to go through court to get my foster son out of the system… I can’t get the help I need to do this. All the financial cost is all up to me. No one can even point me into the right direction for any help. My son is not a file in a drawer or a number. He is my son. Agencies need to have things in place and ready for parents that are so ready and willing to do this” (Out of Home Caregivers Survey Comment).

Numerous participants acknowledged that funding limitations in the child welfare system are only part of the problem. Because of the interconnections and service needs that cross sectorial mandates, when there are inadequate funds for social programs such as education, health, housing, this has a direct impact of children and families in care. “When you look at child welfare, it goes beyond just the services that we provide right. I mean so what about Health or around Addictions or Justice to Violence? I think those are big pieces - so yeah, we need funding for that type of thing” (KI 04). As noted by Blackstock and Trocme, funding can help address some of these challenges within the community; “Stronger communities equipped with the governance structure and the resources to address child poverty, inadequate housing and substance abuse are required to stem the tide of Aboriginal children coming into the child welfare system. Resilient Aboriginal communities provide the best chance for resilient, safe and well Aboriginal children, young people and families” (2005, p. 30-1).

Certainly the Enhanced Prevention Focused funding model enables First Nations Agencies to provide a wider range of services than the Federal Directive 20-1 model. However, even with this enhancement, there is still no formal mechanism for linking Federal funding levels to the shifting responsibilities mandated by Provinces and specifically the unique needs of the communities.

The MSR report noted in its funding roundtable, “…funding is not provided according to the needs and there is a discrepancy between INAC funding formula and how funding is distributed”. If funding was more responsive to the needs, “…there is general agreement that prevention could be enhanced and expanded if the ICFS agencies knew they had financial resources.” Funding inequities still exist, as does the clear inadequacy of funding available to First Nations for the provision of Child Welfare programs in communities afflicted by decades of social underdevelopment and the lingering effects of residential schools and other assimilationist policies.

Action: Equitable, Flexible Funding Reflecting Community Needs
Systemic Factors

INFRASTRUCTURE & TECHNOLOGY

Systemic issues associated with obtaining and maintaining the infrastructure necessary to deliver health and social programs in First Nations communities are numerous and profound. For decades, First Nations communities have struggled to obtain funding for, build and maintain adequate housing, water treatment facilities, firefighting equipment and telecommunications infrastructure so that Band members can raise their children in safe and healthy environments. The systemic limitations associated with low quality and insufficient infrastructure, equipment and technology also impacts the work of FNCFS Agencies, whose offices are located on-reserve, especially when it comes to case planning aimed at keeping families together. No amount of parent education programming can ameliorate the risks to children that comes with living in an overcrowded house or a building infested with black mold.

The 2005 Wen:de: We are Coming to the Light of Day report documented the cost of doing nothing with respect to inadequate Management Information Systems (i.e., technology) and insufficient funding for capital expenditures (i.e., buildings, vehicles). (pp. 26-28). A plan to inject $1.6 billion to address insufficient and inadequate on-reserve housing and infrastructure as a means to reduce infant mortality and improve the health outcomes for First Nations was unveiled in 2005 (Kelowna Accord), however this plan was never implemented, and many First Nations continue to be afflicted substandard infrastructure and technology. Participants in the Engagement Project commented on the importance of addressing systemic factors associated with infrastructure and technology. Within the FNCFS Staff survey, 80% of respondents (N=121.) ranked the following statement as somewhat or very important, “It is important to me that the infrastructure of my organization support the practice of culturally relevant programs and services” (Statement 8.27). In response to statement 8.22 of this same survey, “It is important to understand how a community’s socioeconomic conditions impact family functioning (crime, unemployment, substance use, housing, poverty);” the ranking of 79% of the respondents clearly demonstrated their understanding of the interconnectedness of socioeconomic factors related to inadequate infrastructure (i.e., housing) to child welfare involvement.

Within the qualitative comments received over the course of data collection, the influence of this systemic factor was reflected in comments such as: “Other challenges with CFS – housing. It’s all those other determinants that impact child welfare. Child welfare has no control over housing. Poverty is a huge issue. The majority of kids that are in care due to neglect, it’s poverty and housing that are doing that.” (KII 02). This dynamic was echoed in the words of two FNCFS Staff respondents who commented “More housing please!” and “There will always be people living on reserve. Availability of services should be brought up to standards and not third world conditions. There has been improvements but not fast enough for some, where it’s too late.” (FNCFS Staff Focus Group)

Additionally, the report of the SFNFCI Meeting with the Ministerial Special Representative (March 2, 2017) highlighted numerous systemic factors that impact the ability of FNCFS Agencies to provide services. Comments relating to inadequate reserve-based infrastructure (e.g., housing, offices, cell phone towers) and technology (e.g., IT and Case Management systems were clearly articulated.

Although calls for reform to First Nations child welfare, typically do not draw public attention to inadequate and insufficient infrastructure, equipment and technology in remote and on-reserve communities, these factors do significantly impact the capacity of First Nations to care for their children. When parents, caregivers, workers and administrators do not have the built infrastructure (e.g., safe buildings, stable electricity, reliable vehicles) and technologic infrastructure (e.g., up to date computer systems, functioning telephone, internet connectivity) necessary for them to access public health information and to exchange information in a confidential, secure and timely manner, risk factors that impact children may quickly become magnified. If calls for reform to the First Nations child welfare system do not include solutions that address systemic factors associated with infrastructure and technology, the long-term sustainability of any new policy or programmatic changes will be severely limited.

Quotes

“There will always be people living on reserve. Availability of services should be brought up to standards and not third world conditions. There has been improvements but not fast enough for some, where it’s too late.” (FNCFS Staff Focus Group)

“Child welfare has no control over housing. Poverty is a huge issue. The majority of kids that are in care due to neglect, it’s poverty and housing that are doing that.” (KII 02)

“It is important to me that the infrastructure of my organization support the practice of culturally relevant programs and services” (Statement 8.27 FNCFS Staff survey)
I mean we can learn from those and try to prevent them, but it’s a double standard” (KII 01). The perceived disparity in application of legislative authority was also reflected in the comments of participants at a Board of Directors Focus Group who indicated: “[We] should have our own First Nations Governance; already been fighting for it; Treaty rights are all being taken away; have our own governance system; government trying to squash treaty rights”.

The comments of a participant who completed the Out of Home Caregivers Survey indicated the need for on-going education with respect to the ever changing legal environment when requesting: “Caregivers meetings at least 4 times a year in our own communities to show others how we are connecting to children and youth and … to discuss the legal rights and obligations of caregivers and rights and obligations children and youth have” (Survey Comment).

As the legal and human rights landscape has gradually become more defined in Saskatchewan, so too have the accountability measures ascribed to those entrusted with caring for children. With the introduction and periodic revisions of child welfare policies, regulations and standards, it is important that everyone involved in providing services to children know the limits of their roles and the procedures associated with keeping children safe. Participants suggest that ongoing training and professional development, along with consistently orientating health, school, and social services workers to their responsibilities in child welfare protocols, are good practices that contribute to improving the safety and well-being of First Nations children.

Quotes

"It was very important for them “to know my legal rights and obligations in my role as a Service Provider” (Statement 8.13 Service Provider Survey)

"As a Board Member, I must know the legal roles and responsibilities of being a Board Member” (Statement 6.11 Board of Directors Survey)

"Caregivers meetings at least 4 times a year in our own communities to show others how we are connecting to children and youth and … to discuss the legal rights and obligations of caregivers and rights and obligations children and youth have” (Out of Home Care Survey Comment)
This project has engaged a broad spectrum of stakeholders, soliciting their opinions and ideas on reforming First Nations child welfare. As described in the preceding sections, these ideas are rooted in culture, touch on all four functions of First Nations child welfare, and encompass five main themes and sixteen priority areas. The collective voice of participants, as articulated in the themes and priorities, may be heard more clearly when considered in terms of key actions.

**Action Items**

In order to **REFORM PROGRAMS & SERVICES**, First Nations voices for reform call for:
- Access to services that are holistic, interconnected and reflective of local culture
- Investments in resources to support families and communities
- Services that are locally available in rural and remote communities

In order to **HONOUR YOUTH**, First Nations voices for reform call for:
- Mentorship opportunities to motivate and empower youth
- An Action Plan that ensures youth are included and listened to

In order to **SHIFT PRACTICE APPROACHES**, First Nations voices for reform call for:
- A First Nations case management system
- First Nations standards of practice and measurement
- A culturally respectful child welfare framework that goes beyond child protection
- Policies that strengthen families through kinship and community connection

In order to **BUILD CAPACITY**, First Nations voices for reform call for:
- Engaged service providers who participate in the community
- Strategic partnerships based on shared protocols for collective outcomes
- Human resource initiatives that offer incentives and contribute to healthy working environments

In order to **ADDRESS SYSTEMIC FACTORS**, First Nations voices for reform call for:
- Establishment of a National Children's Advocate or Children's Commissioner
- Equitable, flexible funding that addresses community needs
- Capital investments into First Nations child and family service agencies
- Training and education on the legal aspects of First Nations child welfare

Section 5

**Action Items, Limitations and Conclusion**
Limitations

Although this project was conducted with great respect and care, certain limitations may be acknowledged.

Timeline & Scope

The Engagement Project had to be completed within a very short time frame, about 4 months. Specific milestones had to be reached at specific times, temporary personnel had to be hired, individual tasks had to be decided, and advisory committee members had to be consulted. In most studies of this magnitude 1-2 years is taken to complete a community-based project of similar scope with a standardized sampling techniques. For this project however, the participant pool was comprised entirely of First Nations, for whom an Indigenous research design was more appropriate. Drawing upon Indigenous research principles demands additional considerations be taken to ensure good relations and protocols have been followed and respected. To conduct research in a good way, it takes time, respect, energy and money. Additionally, the mass of data provided by the diverse First Nations participant sample required that extra time be spent to analyse the data in a culturally sensitive manner before synthesising the emergent findings into a final report.

Participants and Sampling

The research component of the project involved two nonprobability sampling techniques: purposive and convenience. While such approaches are helpful when proportionality between a sample and its population is not important, the samples do not represent a population in a straightforward one-to-one manner. Over 1333 people participated in the research activities and while all FNCFS were invited to participate, not all were able to do so. For this reason, while the prospective participant pool for this project was large, the findings are not necessarily generalizable or representative of every First Nations community in Saskatchewan.

This project was also limited in certain ways by the difficulty some participants had in considering child welfare outside of its current context. The Project Research Team used the concept of the four functions in an effort to guide thoughts and discussions, but for some participants it was still difficult to envision a child welfare system that could be significantly different than the current one.

Methods

With additional time at the beginning of the study, more pilot studies could have been conducted to strengthen the scope and specificity of the tools used for data collection. Results have been reported in terms of themes or trends garnered from participant responses across both qualitative and quantitative tools. Because limited research has been done on First Nations child welfare in Saskatchewan and because many of those engaged had not previously had a meaningful opportunity to share their thoughts and opinions, it was not unusual for participants to indicate many of their responses as being very important. Accordingly when analysing the data for magnitude effects, many statements and ideas emerged as being a high priority item. Thus, only high rated survey statements were given priority for the report. For this reason, and given the immense amount of data that was collected, further analysis of the data is warranted.
Conclusion

The objective of the SFNFCI Child Welfare Reform Engagement Project was to coordinate engagement sessions for First Nations technical experts, provincial representatives and others to discuss issues affecting on-reserve child and family services and share knowledge and expertise on options to reform First Nations Child and Family Services. Inspired by Indigenous traditions and protocols of doing things in a good way, the SFNFCI brought together a team of qualified professionals and experts to oversee, design, develop and deliver a plan capable of meeting the project objectives within the established timeframe. This report is the culmination of the work of the SFNFCI engagement research team, including the Project Advisory Committee, SFNFCI staff, FNCFPS Agencies, community partners and numerous contracted service providers. 4499 individuals were engaged through the engagement project activities.

The products generated by this Project are valuable in multiple ways. Foremost, the findings emerge from the voices of more than 1300 research participants from across Saskatchewan First Nations; many of these voices were those of young people, and the vast majority of comments gathered were provided by reserve-based First Nations individuals. Any report that engages such a large proportion of typically ‘hard-to-reach’ populations is itself very significant.

This process was enabled through visionary planning and disciplined action which anticipated and accommodated for Indigenous principles of relationality, reciprocity and respect. For example, the offering of small tokens of appreciation to each participant demonstrated respect for the valuable opinions they shared with the research team. Such exchanges cement relationships of trust which ensure that participants’ information would not be misrepresented or misused.

Secondly, this report demonstrates the significant human-resource capacity that has been built within Saskatchewan First Nations communities. Many of the Project Research Team members associated with this Project possess both the professional credentials and the blessings of Indigenous Elders and Knowledge Keepers that are necessary to bridge Western and Indigenous knowledge systems and First Nations community traditions. Bearing in mind that such opportunities had long been denied to previous generations of First Nations people and the witnessing of our actions by community-members holding good reasons to distrust child welfare research, the Project Research Team

sought to uphold Indigenous traditions of role-modelling good relations. Through humbleness and professionalism, the Project Research Team demonstrated that the production of trustworthy scholarship is no longer entirely reliant upon mainstream institutions (e.g. universities) and non-Aboriginal experts. First Nations community-based organizations that are guided by First Nations values of respect, relationality and reciprocity have arrived and can deliver.  

Finally, bearing in mind the Indigenous prophetic visions that ask us to consider the impact of our actions seven generations forward and seven generations back, the Research Team bore in mind that the products of this Engagement Project may not be realized for some time yet to come. Designing our data collection tools to incorporate a future-based orientation rather than evaluating the pressing issues of the present day or enumerating the bad-practices of the past provides the Institute and the audiences of this report with an opportunity to identify and explore emergent opportunities for collaboration and partnership. Because such a wide-ranging approach informed the Project’s participant sampling and data collection, the potential for secondary analyses of the volumes of data accumulated by the SFNFCI is great. Requests for secondary analysis will take resources to fulfill, the least of which is to accommodate the requirement to work within the spirit of the Indigenous ethical principles of Ownership, Control, Access and Possession of research by First Nations.
References


Section 6
References & Appendices
**Appendix A**

**Engagement Project Advisory Committee, Terms of Reference**  
**Feb. 9, 2017**

**PURPOSE:** The Reform Project working group will come together to support and guide the project.

**OBJECTIVES:**

**Agency Rep Role**
- FNCFS Executive Director or designate
- Assist in coordinating local meetings, supporting local point people
- Bring project information back to Agency to share with staff and board, community
- Provide feedback, vetting, expertise to the SFNFCI and contracted services
- Recommend final report for final approval

**SFNFCI Role**
- coordinate meetings: planning, agenda development, sending out meeting notes within 7-10 business days of meeting
- SFNFCI covers the cost of travel, accommodations and meals while attending the reform meetings
- The SFNFCI covers the cost of meeting room, lunch, snacks, beverages throughout the day, Elder participation.

**MEMBERSHIP:** FNCFS Executive Director’s or designates, MSS designate, INAC designate.

**ACCOUNTABILITY:** It is the responsibility of participants to ensure that they have the support of their respective Executive Directors or Board of Directors to participate with the working group.

The Institute does not have the authority to speak on behalf of First Nations child and family service agencies.

**DURATION OF MEETINGS:** 1 day in length or determined as needed.

**FUNCTIONS:** Standing items on agenda- review of project timeline, update from contracted services, budget update, development of key messages, risk management

**COMMUNICATION:** to SFNFCI Board of Directors, Regional Table, FSIN

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**References**


The History of the First Nations Child Welfare System in Saskatchewan

The following have been identified as key events presented in chronological order in the development of First Nations Child Welfare in Saskatchewan.

- A Royal Proclamation of 1763 established the constitutional framework for the negotiation of treaties with the Aboriginal inhabitants of large sections of Canada. It has been called an “Indian Bill of Rights” (Wood, 2002).

- Beginning in the late 1800s, the Canadian government officially encouraged the growth of the residential school system as a component in a wider policy of integrating Indigenous people with European-Canadian society (Gordon & White, 2014).

- In 1867, the British North America Act created the Dominion of Canada and established criteria for citizenship (i.e., British Subjects). Responsibilities were divided between the Federal and Provincial governments, with responsibility for providing a select range of health and social services to Canada’s First Peoples falling to the Federal government. (Historica Canada, 2013).

- In 1876, the Federal Indian Act removed British Subject status from First Nations people and created a system for classifying First Nations ‘wards of the State’ as status Indians. Federal legislation, policies and programs intended to preserve the health and protect the safety of vulnerable First Nations were established with respect to policing, justice, hospitals, sanatoriums, and schools.

- Between 1870 and 1906 a series of Treaties were established between the Federal Crown and the First Peoples of the Great Plains area of Canada previously known as Rupert’s Land. Treaties recognized First Nations sovereignty and established ‘lands reserved for Indians’ (i.e., Reserves). Treaties also enabled more social programs to be provided on First Nations (e.g., housing, social assistance, day schools).

- In 1908 the Government of Saskatchewan enacted the Child Welfare Act which required Saskatchewan cities with populations of over 10,000 to provide and maintain temporary homes or shelters for orphans, underprivileged, retarded and delinquent children. (SAIN, 2017) As Provincial legislation, this law was not in effect on-Reserve, although non-Status Indians and Metis children and families living in larger cities were impacted.

- In 1946, the Saskatchewan Child Welfare Act was amended and those children in care of city-based children’s aid societies became wards of the provincial government. Children were placed in foster homes that were approved by social workers of the Department of Social Welfare and Rehabilitation.

- In 1951, the Federal Government revised the Indian Act to extend the reach of Provincial Laws of General Application onto First Nations reserves. Rather than creating distinct Child Welfare legislation that would be applicable on-Reserve, Section 88 enabled officers of the court (e.g., police, social workers) to travel onto First Nations and take actions necessary to protect vulnerable people.

- In 1965, funding agreements were established between Federal and Provincial governments across Canada to compensate Provincial governments for social services being provided on-Reserve. Creating procedure for the payment of expenses related to child protection services, services provided to children in care, and administrative services provided by Provincial social workers to First Nations led to a large increase in the number of children coming into child welfare care (i.e., the 60’s scoop).

- Between the mid-1960’s and the late 1980’s as the rates of children coming into Provincial government care rose, the Saskatchewan Department of Welfare (1965-1972) / Department of Social Services (1972-2003) implemented programs to reduce the number of children in care (SAIN, 2017). Programs such as the Adopt Indian Métis (AIM) Program saw many Aboriginal children become adopted into non-Aboriginal homes. Other programs sought to support parents (e.g., children with disabilities) and improve parenting (e.g., pregnant teens and young moms programs), however few such programs were offered to on-Reserve residents as there was no funding mechanism in place to offset costs.

- In 1976, the Supreme Court of Canada confirmed that the legal jurisdiction of the Province’s ability to extend child welfare services onto reserves, regardless of the provincial incursion into a federal sphere of responsibility. (Hudson & McKenzie, 1985).

- In 1982, Canada’s Constitution Act became law. Section 35 recognized Aboriginal and Treaty Rights and the Canadian Charter of Rights and Freedoms was created to protect Canadians from injustice. These newly recognized rights empowered First Nations to seek redress related to issues related to inequitable treatment by Federal and Provincial governments.

- In the mid-1980’s, numerous First Nations across Canada began to demand greater control of the child welfare services being provided to their members and several First Nations in Saskatchewan began delivering a select range of child welfare services to their on-Reserve members.

- In 1990, The Federation of Saskatchewan Indian Nations (FSIN) developed the Indian Child Welfare and Family Support Act (ICWFSA) which outlined the roles and responsibilities of First Nations child welfare agencies and a provision allowing individual agencies to develop their own standards. The Saskatchewan legislature did not pass the ICWFSA, but they did officially recognize it as consistent with provincial legislation and therefore equivalent to ministerial policies and standards (Kozlowski, Sinha, Hartsook, Thomas, & Montgomery, 2011). Subsequently, All First Nations child welfare agencies in Saskatchewan have the legal right to conduct child welfare investigations, and have the legal authority to enforce the Saskatchewan Child and Family Services Act, 1989-90 (Saskatchewan Minister of Social Services, 1993).

- In 1991, Indian and Northern Affairs Canada implemented a program to allocate resources to Indian Child and Family Service agencies in a systematic way, and a moratorium was introduced on the development of new agencies until a National policy could be developed.

- In 1994, the first Saskatchewan Children’s Advocate was appointed. Drawing upon the Canadian Charter of Rights and Freedoms and other international rights frameworks (e.g., UN
Convention on the Rights of the Child), the CAO established advocacy services as a primary focus. (CAO Report, 2005). Since the founding of the CAO, numerous reports have recommended reform to Saskatchewan’s child welfare system.

- In 1995, INAC introduced a new funding formula for creating and operating new First Nations Child and Family Service Agencies and the moratorium on the development of new Agencies was lifted. Directive 20-1 constrained the range of services being provided by First Nations child welfare agencies by requiring social workers to provide only those services that ‘meet or beat’ provincial standards. Enhanced financial reporting associated with Directive 20-1 led First Nations Agencies to focus on child protection services and the payment of approved caregivers.

- In 2000, a joint National Policy Review of Federal Directive 20-1 identified numerous gaps in the funding model impacting the ability of First Nations Child and Family Service Agencies to provide a similar range of services to those available off-Reserve. (McDonald & Ladd, 2000).

- In 2005, the Kelowna Accord was negotiated between First Nations and the Government of Canada. This agreement included provisions to address some of the inequities identified in the 2000 National Policy Review, however the Kelowna Accord never became national policy after the election of a new Federal government that same year.

- In 2006, following a class action lawsuit, the Truth and Reconciliation Commission on Indian Residential Schools (TRC) was established. Over the next 6 years, the voices of First Nations who had been impacted by out-of-home care placements in Institutional care (i.e., Residential Schools) were heard and a report compiled.

- In 2007, the Federal government formally supported Jordan’s Principle, which was an initiative intended to ensure that First Nations children receive needed services without experiencing delays or disruptions caused by disputes between federal and provincial or territorial governments or departments about payment for services. (MacDonald & Craddock, 2005)

- Also in 2007, a lawsuit was filed in Federal Court and a Human Rights Complaint was jointly lodged by the First Nations Caring Society of Canada and the Assembly of First Nations. These actions sought to remedy the well-documented funding inequities related to the provision of child welfare services to on-Reserve residents.

- In 2009, an Enhanced Prevention Funding model for child welfare services was introduced by Aboriginal and Northern Development Canada. Under this regional policy, First Nations Child and Family Services Agencies in Saskatchewan who terminated their earlier agreements received additional funds to develop community-based programs aimed at reducing the numbers of First Nations children entering the care of child welfare authorities.

- In 2011, the Auditor General of Canada issued a report on the Federal Government’s administration of First Nations child welfare. The report indicated that First Nations child welfare programs were being persistently underfunded and recommended action be taken to remedy the situation. (Auditor General of Canada, 2011)

- In 2015, the Calls to Action arising from the report of the TRC was released. The Commission put forward 94 recommendations that address the legacy of residential schools, several of which directly indicate reforms necessary to reform Canada’s child welfare system.

- Also in 2015, the Government of Saskatchewan issued a statement following the release of the summary final report from the TRC. The Ministry of Social Services committed itself to working with First Nations people to renew Saskatchewan’s child welfare system (Government of Saskatchewan, 2017).

- In 2016, the Canadian Human Rights Tribunal ruled that the federal government discriminates against First Nations children on reserves by failing to provide the same level of welfare services that exist elsewhere (Chambers & Burnett, 2017).

- In 2017, the Saskatchewan First Nations Family and Community Institute received funding from Indigenous and Northern Affairs Canada to engage Saskatchewan First Nations on matters relating to the delivery of child welfare services to on-Reserve residents. This report is the culmination of the engagement process.
CONSENT TO PARTICIPATE IN A FOCUS GROUP

Engagement Project 2017

Purpose of the Study
The Saskatchewan First Nations Family and Community Institute (SFNFCI) is conducting research throughout Saskatchewan to learn more about the First Nations child welfare system from April 19 to June 2, 2017.

The SFNFCI is collecting information from people about First Nations child welfare in Saskatchewan using various methods including surveys, focus groups and one on one interviews.

Focus group participants are presented with a set of questions, within small groups of 5 to 10 people. Participant feedback will be recorded by the research team on a flip chart. The focus groups will be completed within 1.5 hours.

Ethics
The project research activities of the SFNFCI have been approved and are supported by the SFNFCI board of directors. Ethics for the research project are aligned with the SFNFCI mission, vision, values and principles and the OCAP principles of research including Ownership, Control, Access and Possession.

Gifting for Participation
As part of our First Nations tradition of gifting for knowledge and keeping in mind the topic area of First Nations child welfare; the Institute will provide each participant with a gift as a token of appreciation.

What Type of Personal Information Will Be Collected?
No personal identifying information will be collected in this research project, and all participants shall remain anonymous in the research reporting processes and documents.

We would like to know your opinions about First Nations child welfare services in your area. Any information you provide will be used to inform options for change to the First Nations child welfare system.

Are There Risks or Benefits If I Participate?
There is no risk identified in participating in the Engagement Project 2017. The focus group is to listen to suggestions and better understand the needs, concerns, and views, and to utilize the feedback to inform options for change in First Nations child welfare.

Participation in this research project is completely voluntary. Your decision to withdraw from a focus group will be accepted and respected at any point in time that you wish. If you decide to withdraw from a focus group; however, you may not re-enter a group after making this choice, as integrity in group process must be preserved. If you decide to withdraw part-way through a focus group, due to the interactive nature of the process, any data you may have contributed will be retained and/or included in the study.

The benefits of participating in the project is to ensure your voice is included in the project report and that you have had an opportunity to contribute to informing reform for First Nations Child Welfare. If you choose to participate in this study, and experience any concerns as a result, you may contact the researcher and/or their supervisor directly if you wish to do so.

What Happens To The Information I Provide?
Focus group participants are guaranteed confidentiality and anonymity by the research team. Due to the interactive nature of focus groups, participants will be aware of each other’s identities. The research team will ask participants to agree to respect the confidentiality of other participants and emphasize the importance of doing so; however, we cannot guarantee absolutely that participants will maintain each other’s anonymity and confidentiality. Only the researchers, supervisor and representatives assisting the focus group procedure will be allowed to see or hear any of the answers to the interview guideline/flip chart.

Focus group responses will be analyzed and reported only in terms of themes and trends of participants who report similar perceptions on informing options for First Nations child welfare. During the research project, the data is kept in secure storage on SFNFCI office computer systems and/or in locked filing cabinets in staff offices accessible only to the research team and supervisor. The anonymous, aggregated data will be stored for one year on an electronic system, at which time, it will be permanently erased.

The final report will be reviewed by the Engagement research advisory committee and Executive Directors of the Saskatchewan First Nations Child and Family Services agencies. The report will then be forwarded to the SFNFCI board of directors for approval. Then the document will be forwarded to the financial sponsor for the project, Indigenous and Northern Affairs Canada (INAC). As well a copy of the report will be posted on our website www.sfncfi.ca.

Signatures (written consent)
Your signature on this form indicates that 1) you understand to your satisfaction the information provided to you about your participation in this research project, and 2) you agree to participate.

In no way does this waive your legal rights nor release the investigators, sponsors, or involved institutions from their legal and professional responsibilities. You are free to withdraw from this research project at any time. You should feel free to ask for clarification or new information throughout your participation.

Participant's Name: (please print) __________________________ Date: ______________
Researcher's Name: (please print) __________________________ Date: ______________
Researcher's Signature: __________________________________ Date: ______________

Questions/ Concerns
If you have further questions or want further clarification regarding this research and/or your participation, please contact:

Researcher: Donna Heimbecker 306-373-2874 ext. 233 donna@sfncfi.ca

Supervisor: SFNFCI Executive Director: Tischa Mason, 306-373-2874 ext. 222 tischa@sfncfi.ca
The Saskatchewan First Nations Family and Community Institute (SFNFCI) is conducting research throughout Saskatchewan to learn more about the First Nations child welfare system between April 19-June 2, 2017. The SFNFCI is collecting information from people about First Nations child welfare in Saskatchewan in many ways: surveys, one on one interviews, and focus groups.

We would like to know your opinions about First Nations child welfare services in your area. Your participation is anonymous and confidential. When it comes time to draft the final report, no names will be used, so please express your opinions freely. Any information you provide will be used to inform options for change to the child welfare system. The final report will be reviewed by the Engagement research advisory committee and Executive Directors of the Saskatchewan First Nations Child and Family Services agencies. The report will then be forwarded to the SFNFCI board of directors for approval. The final report will be reviewed by the Engagement research advisory committee and Executive Directors of the Saskatchewan First Nations Child and Family Services agencies. The report will then be forwarded to the SFNFCI board of directors for approval. Then the document will be forwarded to the financial sponsor for the project, Indigenous and Northern Affairs Canada (INAC). As well a copy of the report will be posted on SFNFCI.CA.

The project research activities of the SFNFCI have been approved and are supported by the SFNFCI board of directors. Ethics for the research project are aligned with the SFNFCI mission, vision, values and principles and the OCAP principles of research including Ownership, Control, Access and Possession.

If you have any questions about the project please contact Tischa Mason, 306-373-2874 ext 222 or tischa@sfnfci.ca

1. Age (Select one)
   - 18 years and under
   - 19 years to 29 years
   - 30 years to 39 years
   - 40 years to 49 years
   - 50 years to 59 years
   - 60 years to 69 years
   - 69 and over

2. Indicate you gender:
   - Female
   - Male
   - No response
   - Other (please specify)

3. Do you identify as being Aboriginal (First Nations, Metis & Inuit):
   - Yes
   - No

4. Have you or members of your family attended residential school?
   - Yes
   - No
   - Don't know
   - Prefer not to answer

5. Have you or your family members ever been in kinship care, foster care, adoptive care?
   - Yes
   - No
   - Don't know
   - Prefer not to answer
6. What is your role?
- Front line worker
- Administration/office
- Supervisor
- Management
- Volunteer
- Elder
- Other (please specify)

7. Where do you provide services at this time (check one)
- On-reserve
- Off-reserve
- Both on and off-reserve

8. The following response options range from Not at all Important to Very Important. If you do not have an opinion, please indicate No Opinion.
Please rate the importance of the following statements:

<table>
<thead>
<tr>
<th>Statement</th>
<th>Not at all Important</th>
<th>Slightly Important</th>
<th>Important</th>
<th>Somewhat Important</th>
<th>Very Important</th>
<th>No Opinion</th>
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<tr>
<td>When a child in care is leaving residential care, and they were receiving special services, they should continue receiving similar services.</td>
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<td>Child welfare assessments (e.g., child risk, family safety, home study) must be culturally-appropriate.</td>
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<td>Child welfare assessments must be completed in a timely manner.</td>
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<td>Question</td>
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<td>In the development of a child's care plan, appropriate extended family members must be encouraged to participate and be supported (financially).</td>
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<td>The legal rights and obligations of children and youth in care must be given more of a priority.</td>
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<td>Youth aging out of care need more supports (medical, vocational, financial) as they move into independent living.</td>
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<td>Youth in care need more support to navigate the justice system (family court and criminal court).</td>
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<td>A broader continuum of care strategy (from safe houses to institutional care) is required for children and youth in care.</td>
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<td>Knowing what information I am responsible to collect and how to legally manage the records is important to me.</td>
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<td>It is important to understand the cultural diversity of local First Nations.</td>
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<td>It is important for services to be delivered in a culturally appropriate and respectful way.</td>
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<td>It is important for me to know my legal rights and obligations in my role as a Service Provider.</td>
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<td>It is important for me to know the client's legal rights and obligations in my role as a Service Provider.</td>
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<td>The social and cultural rights and roles of families must be identified and supported in case plans.</td>
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<td>It is important to understand how a community's socioeconomic conditions impact family functioning (crime, unemployment, substance use, housing, poverty).</td>
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<td>A Saskatchewan First Nations wide employment, recruitment and retention strategy that supports First Nations Agency employees and practitioners is important.</td>
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<td>It is important that more training and curriculum is developed and delivered that incorporates current best practices in First Nations/Aboriginal Child Welfare</td>
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It is important for children, youth and families to have access to regularly-structured positive lifestyle activities.

Service Providers need to better understand provincial and federal legislation and international agreements with respect to Indigenous child welfare.

It is important to me that the infrastructure of my organization support the practice of culturally relevant programs and services.

We need a holistic process where a team of individuals who are important to a child’s well-being (e.g., family, service providers, Elders, community members) work together to develop a child’s care plan.

More community-based services (e.g. recreation, sports, and libraries) are necessary to promote the health and well-being of children, youth and families.

As a service provider working in a culturally appropriate way, I need to know who can &/or cannot be involved in decisions being made about a child’s care plan.

It is important that service providers be able to connect children, youth and families to cultural Knowledge Keepers (Elders, Traditional Counselors, and Medicine People).

Where appropriate, people with an interest in the child’s care (parents, extended family, Elders, Grandmothers), must be involved in decision making processes (mediation, orders and placement decisions).

It is important to know more about how services and practices can vary between different on reserve, off reserve and remote communities.

Communication on the full range of services being provided to First Nations children and families is necessary for community accountability.
An inter-agency strategy must be developed that demonstrates the range of services for children and families provided by community-based service providers.

It is important that First Nations communities have a cultural preservation plan to help their members (especially children) to rebuild, reconnect and maintain their cultural identity and language.

More supports (e.g., home makers, parenting programs and family counselling) are needed to help reduce the number of children coming into care.

It is important to understand how a community’s socioeconomic conditions impact children (crime, unemployment, substance use, housing, poverty).

If families could get better services (addictions, mental health, and parenting skills) where they live, children could be safe and healthy in their own home.

It is important for those that serve Aboriginal people to understand a community’s unique history.

It is important for children and families to get services (assessment, diagnosis and treatment) when they need it.

It is important for service providers to address the unique challenges faced by remote communities.

9. Are there any final comments you would like to add?
Frequently Asked Questions

What is the Engagement Project?
The Saskatchewan First Nations Family and Community Institute (SFNFCI) is conducting research throughout Saskatchewan to learn more about the First Nations child welfare system from April 19 to June 2, 2017. Information is being collected by: surveys, one on one interviews, and focus groups. Any information you provide will be used to inform options for change to the child welfare system.

Who is involved in the research project?
The First Nations research team is working with the FNCFS agencies to schedule visits to their communities to speak with youth, families, FNCFS staff, board members, service providers, and Elders within the data collection period.

What are the ethics of the research project?
Your participation is anonymous and confidential. When it comes time to draft the final report, no names will be used, so please express your opinions freely. The project research activities of the SFNFCI have been approved and are supported by the SFNFCI board of directors. Ethics for the research project are aligned with the SFNFCI mission, vision, values and principles and the OCAP principles of research including Ownership, Control, Access and Possession.

What happens to all the research information?
All the research information will be analyzed and reported only in terms of themes and trends of participants pertinent project information that can contribute to a collective voice on options for reform in Saskatchewan.

How do I participate in the research project?
Participation in this research project is completely voluntary. Each person can participate by:

1. Filling out a survey, found on our website: http://www.sfnfci.ca/pages/child-welfare-reform.html
2. Attending a focus group in your region. Contact Donna Heimbecker for dates and events in your area.

FOR MORE INFORMATION ON THE PROJECT PLEASE CONTACT:
donna@sfnfci.ca or 306-373-2874 EXT 233 or tischa@sfnfci.ca or 306-373-2874 EXT 222

The final report will be reviewed by the Engagement research advisory committee and Executive Directors of the Saskatchewan First Nations Child and Family Services agencies. The report will then be forwarded to the SFNFCI board of directors for approval. Then the document will be forwarded to the financial sponsor for the project, Indigenous and Northern Affairs Canada (INAC). As well a copy of the report will be posted on www.sfnfci.ca.
The project research team completed a literature review of previous research reports and discussed child welfare with practitioners and experts and we have chosen 5 main areas to ask about child welfare through the focus groups.

Please note the intent of research is not to evaluate the current system. Our intent is to share best practices and identify the key functions that are most important to a First Nations Child Welfare community.

The 5 main areas that we will be discussing through this focus group include:

1. History
2. Culture
3. Training & Employment
4. Governance
5. Services

1. History
   a) What are some ways that Agency staff can learn more about the history of the communities you serve and the diversity of the Aboriginal peoples who live there?

2. Culture
   a) How is culture practiced in the communities you serve?
   b) What are some ways that Agency staff can learn more about the cultural diversity and traditional practices of the communities you serve?
   c) What are some ways to connect children, youth and families to cultural Knowledge Keepers?

3. Training & Employment
   a) What are some ways to stay current with best practices in First Nations/Aboriginal Child Welfare?
   b) How can my agency recruit and retain qualified employees to meet the needs of our communities?
   c) How can my agency work in collaboration with other service providers and other professionals that serve children and families in child welfare?

4. Governance
   a) How can child welfare demonstrate a better relationship in the communities given the history of Child Welfare with First Nations people?
   b) What role should First Nations Child and Family Service Agencies have in the development of future legislation, policy and standards?
   c) What are some ways to ensure confidential and respectful information sharing/reporting between organizations and in the community?

5. Services
   a) How can we better provide culturally appropriate services to strengthen First Nations children, youth and families and keep them safe where they live?
   b) How can we better provide culturally appropriate services to First Nations children in care and their caregivers?
   c) How can we better provide culturally appropriate services to First Nations youth who are transitioning out of care?
   d) How can we better provide culturally appropriate services to First Nations children with disabilities and diverse needs in our communities?
   e) As a staff member, what would best practices look like in First Nations Child Welfare?
   f) As a staff member, what are the most important priorities to consider that will inform change to the First Nations Child Welfare System and why?
   g) As a staff member, what type of resources are required to fulfill these priorities?
Honouring
The Voices For Reform

Indigenous cultures use sage as one of the four sacred medicine plants that is used in many different ways. As the smoke rises from the smudge, our prayers rise up to the Spirit World to the Grandfathers, Grandmothers and the Creator. Negative energy, feelings, and emotions are lifted away. It is also used for healing of the mind, body and spirit, as well as balancing of energies. As our Elders have taught us, all ceremonies must be entered into with good intent. We honor and thank the Elders and the many people throughout Saskatchewan who prayed and smudged for good energy, strength, wisdom and clarity of purpose for those who collaborated on this project and for those who had the courage to share their voices for reform. We honour you through this report.

Kinanaskomitinawaw - Thank you

Joseph Naytowhow, Knowledge Keeper