

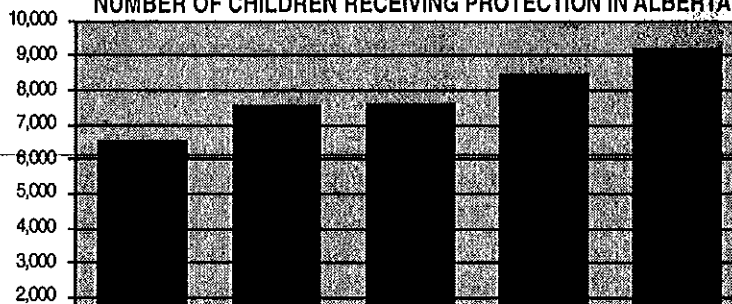
CHILD WELFARE IN ALBERTA

3 years after review

In the summer of 1993 Bernd Walter, then Alberta's Children's Advocate, submitted his report *In Need of Protection—Children and Youth in Alberta* to the minister of Family and Social Services. The report reviewed the implementation and operation of the Child Welfare Act and the delivery of child welfare services. The report was organized into 22 chapters, each looking at a specific topic such as foster family care. Each chapter included recommendations for changes. Three years later the Edmonton Social Planning Council decided to ask community experts to look at the recommendations and comment on what has happened in the last three years. These community people are identified if they wish to be, others wished to remain anonymous.

Eight of the 22 chapters in the Walter's report were examined including: 1) preliminary intervention; 2) children and youth in care: foster, residential and secure treatment; 3) abuse and maltreatment of children in care; 4) non-residential services to children and youth in care; 5) special circumstances for adolescent youth; 6) child welfare and the young offender system; 7) Aboriginal children and the child protection system; and 8) poverty: the socio-economic context of child protection.

NUMBER OF CHILDREN RECEIVING PROTECTION IN ALBERTA



Edmonton Journal April 1, 1996

1) PRELIMINARY INTERVENTION

Input for this section was received from two workers in the child welfare section of the department of Family and Social Services.

Definition—Preliminary intervention involves a three part process of:

- reporting a child thought to be in need of protective services;
- screening or examining the given information to determine whether or not there is a need for further investigation or protective measures;
- investigating where a need is identified.

recommendations

The Children's Advocate made 10 recommendations in this area including:

1. All referrals to community resources should be followed up.
2. An appeal mechanism should be in place to allow for review in cases where a report is made but a file is not opened.
3. Investigation techniques should be reviewed due to the importance of this step.
4. Social workers involved in the system should undergo extensive training in all areas relating to interviewing and investigation

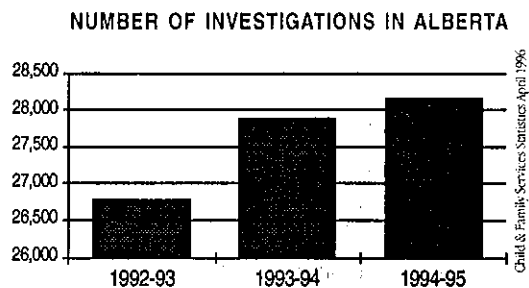
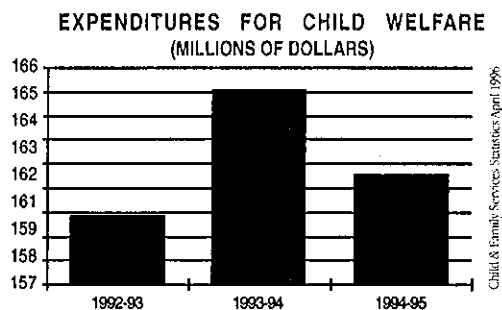
results:

■ Since the recommendations, some changes have been made to procedures surrounding preliminary intervention. One recommendation was that all referrals to community services be followed up. While this has not been implemented as a mandatory step, protocol dictates that when a child is referred to community services it is made clear that child welfare should be notified if a need for protective services arises.

■ It was recommended there be an appeal mechanism put in place to allow for reviews in

techniques be reviewed, as this is a crucial step in protecting at-risk children. It was also recommended that workers in the system undergo extensive training in all areas relating to interviewing and investigation. Since the 1993 review training methods have shifted to become more practise based. A specialized Child Investigation Training course is now offered by the department, but it is *not* mandatory for child welfare workers.

■ **Mandatory Child Protection Services (CPS) training** in place which runs one week a month for four consecutive months. One problem with this training is that, while it is considered mandatory, it is *not* necessary to complete the training prior to being hired and there is often a lengthy period between a worker's start date and the beginning of their CPS training. A second mandatory course has been initiated in cooperation with city police or regional RCMP where child welfare workers receive specialized training focusing on identification and prevention of sexual abuse. This mandatory course runs for four days and, like the CPS course, is often not completed until a worker has been involved in the system for some time.



As of April 1, 1996, 233 child welfare cases were awaiting investigation in the Calgary region.

There was a 230 per cent increase in child apprehensions in Calgary between April 1995 and February 1996

John Messeri, a consultant in child and family services, and others who wished to remain anonymous.

Definition—Children and youth delegated to case managers and then to a) foster or group homes, b) residential, c) secure treatment institutions, or other treatment professionals.

a) Foster Care: *definition*—where surrogate parents function as primary caregivers to children/youth taken into care for extended periods of time.

recommendations

The Children's Advocate made 12 recommendations in this area including:

1. A realistic assessment of the needs of children in care should be done, as well as an assessment of the capacity of foster caregivers.
2. A system should be developed in which all available foster spaces can be tracked.
3. There should be active recruitment of foster parents with a focus on sophisticated, younger caregivers.
4. Clear and consistent criteria must be developed for approving foster homes.
5. There should be a clarification of roles for all parties involved in the foster care system.

results:

■ The 1993 child welfare review made a number of recommendations regarding foster care. Some of these have been acted upon. A new assessment form was developed which rates the child's needs in order to determine the level of care required for foster care. A provincial system has been developed which tracks every foster home space in Alberta. However, foster parent recruitment strategies have not changed and there remains a shortage of qualified foster homes. With fewer foster homes than necessary, children are sometimes placed in the first available home. That may not meet the needs of the child regardless of how they rated on the new assessment form. There are no consistent criteria for approving foster homes and there are no criteria for fee-for-service work. Further study does need to take place in regards to clarification of roles for all parties involved in the foster care system.

b) Residential Care: *definition*—group and institution based care for children or youth within the child welfare system.

recommendations

The Children's Advocate made three recommendations:

1. There should be a reassessment and redistribution of resources based on appropriate principles.
2. Practice and procedures must include:

results:

■ The residential care system has also undergone changes due to the report. Some additional funding has been made available to meet the increased demands for residential beds, however there continues to be discrepancies in funding disbursements throughout the regions. Also, as of October 1995, all contracted services were required to complete the standards review program of the Alberta Association of Services to Children and Families (AASCF). Fee-for-service providers are not required to complete the standards review program. One recommendation, the review of practice and procedures, is currently under way. This has been caused, in part, by the involvement of the Commissioner for Services to Children and Families and the preparation for a new service delivery system.

c) Secure Treatment: *definition—a form of residential care in which youth are confined and treated under controlled circumstance.*

recommendations

The Children's Advocate made seven recommendations in this area including:

1. There should be a review and reassessment of objectives of secure treatment.
2. Framework should be developed for secure services for both children and youth.
3. Treatment standards must be developed in consultation with youth and guardians that address:
 - access to resources;
 - qualifications of professionals involved; and
 - type of measures used within the setting.
4. Secure treatment should be reviewed so that its effect can be determined.
5. The role of the courts in the secure treatment system should be re-examined.

results:

■ Secure treatment has undergone some changes and is now trying to adapt to better meet the needs of the community and of young people. Any young person in secure care more than six weeks now has their case automatically reviewed. Standards for secure care are covered under the Standards Review Program of the AASCF. One recommendation that has not been undertaken is the review of the role of the courts in the secure care system.

Today's foster children are more emotionally and physically damaged than they were 10 years ago. They need more care. There aren't enough trained foster parents to deal with the demand. Currently there are 430 homes in the Edmonton area for 900 to 950 foster children. Last year the province approved 66 new foster homes. The region

3) ABUSE AND MALTREATMENT *of children in care*

Input for this section was received from a source who did not wish to be identified.

Although the system exists to protect children, it must be acknowledged that a significant number of children and youth are mistreated within the child welfare system.

recommendations

The Children's Advocate made recommendations in nine areas regarding abuse in care including:

1. Abuse in care must be acknowledged and concentrated operative efforts taken to prevent it.
2. Practice should be enhanced with regards to placement, monitoring and regulation.
3. More rigid guidelines should exist for care staff and foster parents.
4. There should be more effective response to any allegations of abuse.
5. Legislative standards must be developed in order to regulate staff/foster parent behavior and facilitate the grievance process.

results:

■ Two primary factors have interfered with the incorporation of the advocate's recommendations regarding the abuse and maltreatment of children in care.

1. The redesign of services to children is preoccupying everyone. The system is in a holding pattern, waiting for new model of delivery of services to children.
2. The government is obsessed with fiscal restraint. There is a lack of sufficient fiscal resources, department workers are left wondering how to provide service within existing budgets. Fiscal restraint dictates that service provision is not the primary concern.

■ The advocate's recommendations are service-related, and have been shelved because of redesign initiatives. With fiscal restraint and the changes in the organizational model, not much of what was recommended in 1993 has actually

tion. The source for the other subsections did not wish to be identified.

Non-residential services involves the many services which are necessary to fulfill the emotional and developmental needs of children in care.

a) Children's Mental Health Services

recommendations

The Children's Advocate made 10 recommendations in this area including:

1. Policy and legislation must be put in place to ensure the development of a comprehensive system of children's mental health services.
2. A strategy should be developed to address child and youth mental health issues in Alberta, assessing resources required and taking steps to guarantee availability of those resources.
3. Specific strategies must be developed to address the needs of Aboriginal children and youth.
4. Prevention programming must be implemented.

results:

■ There still has been no clear assignment of who is responsible for children's mental health. Adequate resources have *not* been allocated, resulting in a continued shortage of mental health services for children and adolescents. No definitive policy or legislation has been implemented. Efforts to try and further the development of a comprehensive system (i.e. CAMH-NET) appear to have been made in the Capital Health region. Programs have been initiated in order to try to further comprehensive treatment programming (i.e. Partners Together for Youth, Mobile Crisis affiliation with Glenrose Hospital and CASA). Services still appear to be fragmented between Child Welfare, Education, Justice and Health.

■ Other departments are providing fewer mental health services, particularly those at no cost. Since there is no new children's mental health legislation in place, children who require access to secure treatment continue to face barriers to accessing services. Some child welfare workers are becoming more knowledgeable with regard to mental health problems and consequently are wanting to refer the child to proper treatment services.

■ Some initiatives have been made for early intervention programs. Programs for tertiary serv-

but children and adolescents have not been specifically targeted to receive these monies.

b) Sexual Abuse / Drug & Alcohol Treatment Services

recommendations

The Children's Advocate made five recommendations:

1. There be a coordinated, integrated and comprehensive response to abuse.
2. There be an interdisciplinary approach taken to prevent abuse.
3. Treatment for abuse be child-focused and without time limitations.
4. Treatment include a variety of approaches without time limitations.
5. All children/youth have access to treatment services.

results:

■ A coordinated, integrated and comprehensive response to abuse has *not* occurred. No new primary prevention initiatives have been brought forward. There appears to be no specific sexual abuse treatment agency for children and adolescents, at least in the Edmonton region. During the course of treatment for other mental health issues sexual abuse is often uncovered. There is a gap in specific sexual abuse treatment and so the problem is left to be addressed in the general mental health treatment. The lack of access to resources limits the opportunity for long-term and intensive work, or a variety of approaches to deal with abuse. The focus still remains on providing time-limited interventions due to limited resources. The child protection system is still limiting itself to intra-familial abuse situations, leaving those victims of extra-familial abuse to fend for themselves.

c) Medical Services:

The main concern in this area involves Fetal Alcohol Syndrome /Fetal Alcohol Effect which is caused by pre-natal exposure to alcohol.

recommendations

The Children's Advocate made four recommendations in this area which included:

1. That educators, doctors, caregivers and other professionals who deal with young children be given information and training regarding the assessment and implications of FAS/FAE
2. That preventative programs be implemented, targeting parents who are high risks for alcohol abuse.

results:

■ The department has done a lot of training (FAS/FAE) and a lot of workshops across the province, however there is *no* evidence that there are any preventive programs which target parents who are high risks for alcohol abuse. That's not

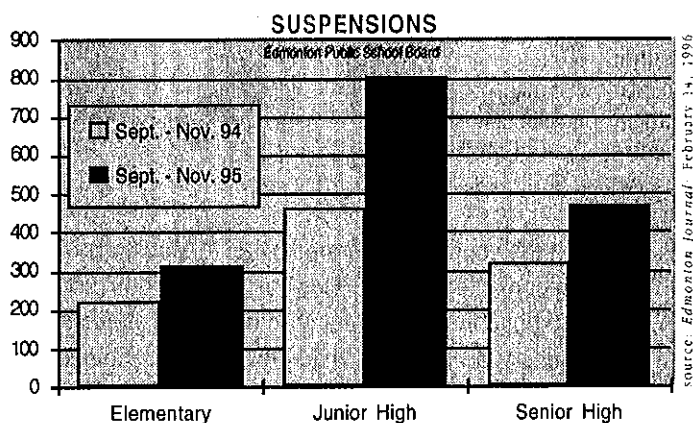
recommendations

The Children's Advocate made seven recommendations which include:

1. Political directives are necessary to assure cooperation between the education system and child welfare.
2. Social workers should have a role in the school system.
3. Alternative programs should be implemented in schools to accommodate special needs and prevent drop outs.

results:

■ There has been little cooperation between the department of education and child welfare. Because of fiscal restraint schools are less willing and less able to accommodate young people who are behaviorally challenged. Instead they often expel and suspend behaviorally challenged youth, who are subsequently labelled unmanageable. At the same time child welfare is less responsive to adolescents than they were years ago, so there are a group of young people who are not being served by either system (education or child welfare).



Note: These figures pertain to Public School Board students and only a portion of these students would have involvement with the child welfare system

e) Legal Services for Children and Youth:

recommendations

The Children's Advocate made 11 recommendations in this area including:

1. Criteria for appointment of Counsel should be changed to ensure that access to counsel is facilitated.
2. Lawyers should be specially trained to deal with children and youth in protection as well as young offenders.
3. Legal representation for children and youth should be evaluated.
4. The role of counsel should be reviewed.

results:

■ There has been no change. There is not very great motivation on the part of lawyers or social services to pursue these recommendations. There is a fiscal

Input for this section was received from Ed Allan, casework supervisor in the Crisis in Community Services Program at the Youth Emergency Shelter. The complexity of the issues facing adolescents today pose great challenges for the child protection system.

recommendations

The Children's Advocate made 19 recommendations in this area including:

1. That an inter-departmental committee for child and youth services be developed allowing for youth input.
2. That a financial system be implemented to provide youth with cheques to cover necessities.
3. Sexuality training and resources must be improved.
4. The delivery of resources addressing street youth and juvenile prostitution must be improved.
5. The problems of older youth must be addressed, ensuring flexibility, alternative placements and emergency placement facilities as well as supported independent living programs.

results:

■ Political expedience is taking precedence over the welfare of children in Alberta. At times accessing funds for some cases has become so difficult that young people are forced back into the family home where it is clearly an unhealthy and potentially volatile situation.

■ Special needs youth, primarily the mentally ill, do not have adequate resources. Independent living programs are important; unfortunately many young people are required to be patient and to wait long periods before more permanent residences can be found for them.

A 1995 Calgary study found:

- 42 per cent of prostitutes were under age 18 and 84 per cent of prostitutes began sex work before 18.
- The decision to enter the sex trade is typically made when a person is 14.

• Approximately 200 children and youth are actively involved in the sex trade in Calgary and the number is growing.

• At least 75 per cent of children and youth

It is important to look at the young offenders system in reviewing the child welfare system as there is a significant overlap between the two in terms of population served.

recommendations:

1. That additional research be done to determine what is currently happening in the system with special emphasis placed on Aboriginal youth.
2. Issues that prevent youth and families from receiving appropriate services must be identified.
3. There must be a clarification of roles with respect to youth and young offenders including case management, advocacy, administration and funding.
4. Specialized Crown counsel should be re-established to handle prosecution in cases involving young offenders.
5. Appropriate treatment and diagnosis must be ensured in dealing with adolescent.

results:

■ There is not so much a lack of research, but inaction by the systems in following through on recommendations. There seems to be little commitment from government to get things moving.

■ With respect to identification of issues that prevent youth and families from receiving appropriate services, that is not of concern at this time. What is of concern is that resources are not there or are unattainable by a young person. There are so many hoops and hurdles that a young person cannot access assistance. A good example is where treatment or a case plan may be in place but there are no means for the young person and/or family to physically get to these services.

■ In regards to the clarification of roles with respect to youth and young offenders including case management, advocacy, administration and funding, this seems to have taken place through the young offender protocol. Upper and middle management appear to be aware of the protocol, but front line staff seem unaware of their specific roles.

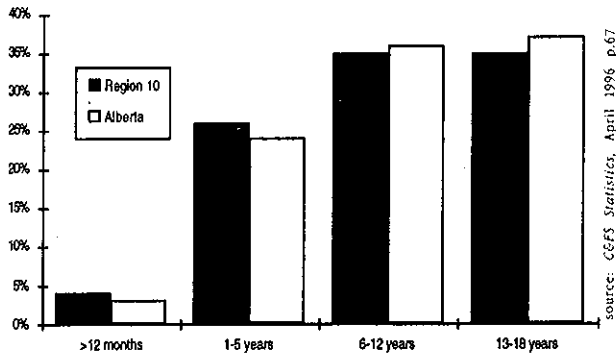
■ The Crown prosecutor's office has had specialized youth court counsel for about two years.

■ In the area of treatment of sexual offenders, there is a crisis situation in that specialised programs within a custodial setting are very limited. There are the Counterpoint Group Home Program and various outreach resources, but, residential treatment for youth outside of a custodial setting is limited to the Phoenix Adolescent Program in Calgary. A concern is that youth who are at a pre-trial or pre-sentence stage, which may last for months, have no access to treatment due to uncertainty as to where the youth will be in a few months.

Teen Suicide: Canada has the third worst rate of teen suicide of twenty-three industrialized countries

Child Poverty in Canada: Report Card 1995 Canadian Press: Toronto

AGE OF CHILDREN IN NEED OF PROTECTION



Of the young offenders admitted to a custodial facility in Edmonton between October 1990 and January 1991, 19 per cent had current child protection status and an additional 42 per cent had previous child protection involvement. Conversely, only 39 per cent of youth admitted had never been involved with child protection (sample size=788). A one day snapshot of caseloads reveals that about 20 per cent of youth, between 12 and 17 years of age, on the Young Offender caseload (either custody or community placement), have child protection status. An additional 17 per cent of such youth had prior child protection involvement.

In Need of Protection: Children and Youth in Alberta, p.217

input for this section was received from First Nations, a community journalist with the Office of the Commissioner of Services for Children and Families.

There is a need to examine the reasons for the disproportionate over-representation of Aboriginal children in the child welfare system as their numbers continue to increase.

recommendations

The Children's Advocate made 60 recommendations which included:

1. Elders should be recognized as expert witnesses in child protection proceedings.
2. Judges should receive cross-cultural awareness training.
3. Native representation on Placement Committees should be mandated.

regarding resources and training:

4. Recruitment procedures should be revised in order to increase native child protection staff.
5. Native child protection policies and procedures should be revised in consultation with Aboriginal communities.
6. A foster care model specific to the needs of native children must be developed.

regarding adoption:

7. Post-adoption assistance should be provided to non-natives who adopt native children to ensure contact with the child's community and culture is maintained.

regarding service provision by native units:

8. There should be a review to examine quality of practice, resources, training and supervision.
9. Aboriginal agencies and communities must be recognized as capable and credible.
10. There should be greater emphasis in schools of social work on issues regarding native children in care.

results:

Many First Nations and Metis children and families still face disadvantages today three years after the advocate's report was released. Current child welfare data indicates that 47 per cent of children and families in the child welfare system are of Aboriginal descent. Of the children in foster care, 50 per cent are of Aboriginal descent. Disproportional numbers of Aboriginal children are found in residential institutions and group care facilities. According to Statistics Canada 1991 Alberta's Aboriginal population is 6.2 per cent of the general population in the province.

In Alberta over one-half of the First Nations communities have child welfare agreements with the provincial government and Metis communities are developing services for their

The federal government is fast-tracking plans for implementing the inherent right of self-government for First Nations, the Metis and Inuit people of Canada. Some Aboriginal communities have developed agreements, protocols, and joint management committees in an effort to ensure services are delivered in a holistic manner, which are community based and community driven—responsible and accountable. Services need to be culturally appropriate and run and managed by Aboriginal people. Preventive services are lacking and standards need to be culturally appropriate. There is a lack of resources and there are some jurisdictional problems.

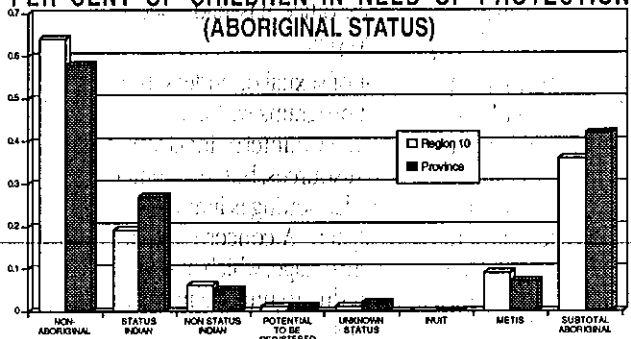
In conclusion, many Aboriginal communities are striving to deliver community based services that are effective, efficient and accountable. Over the last 30 years there have been many achievements (i.e. child welfare agreements with First Nations since 1973), however many other social problems (i.e. racism, poverty, etc.) continue to affect Aboriginal children and families.

Aboriginal children were involved in approximately 53 per cent of the active child protection cases for the province of Alberta in October 1994.

Region 10 (St. Albert and Edmonton) had the highest number of child protection cases which accounted for 28.6 per cent of the provincial total. (45 per cent of children in care during reporting time in region 10 were Aboriginal. However, 99 per cent of the child protection cases involved Aboriginal children in region 17 which is the most northerly region in the province.)

While 18 per cent of all Canadian children live in poverty, the percentage of Aboriginal children growing up in poverty is 51 per cent. *Canadian Institute of Child Health, 1994: 145*

PER CENT OF CHILDREN IN NEED OF PROTECTION (ABORIGINAL STATUS)



Understanding Your Community: A Statistical Guide (RL) Department of Sociology, University of Alberta March 1996

Infant mortality rates for aboriginal kids are 250 percent

Social and economic factors play a clear role in contributing to abuse and neglect. Poor children are disproportionately over-represented in child protection case loads and are more likely to be repeat users of the system than other children.

recommendations

The Children's Advocate made two recommendations:

1. That the government take measures to eliminate poverty, ensure adequate family incomes and quality housing.
2. That the province reconsider its position regarding the United Nations Convention on the Rights of the Child.

results:

■ The Advocate's Report (1993) stresses that "it is the socioeconomic factors associated with poverty which add the stress and pressure which place children at risk" (p.254). Further, the Advocate noted that "103,000 Alberta children are poor..." over 50 per cent of Alberta children in the care of the child welfare system are from poor families" (p.254).

■ Since then child welfare case loads increased 24 per cent (from 7,085 in 1991-92 to 8,782 cases in 1995-96). The chief causes of increase: "guardian unable/unwilling to provide necessities of life," i.e. the guardian is not providing the child with adequate food, clothing or shelter. These poverty based investigations rose 45 per cent (from 3,165 cases in 1991-92 to 4,617 cases in 1994-95).

Edmonton Journal: April 13, 1996 Don Thomas, "Poverty Pegged as Prime Reason for Rising Caseloads"

■ The Supports for Independence (welfare) caseload was reduced from 96,000 in January 1993 to 51,500 in May 1995, according to Alberta's Auditor General, with no clear link "established between caseload reductions, and the various reforms and initiatives introduced."

Edmonton Journal: March 30, 1996 Mark Lisac, "Social Services Minister does his best to look Ridiculous"

■ Two leaked memos from the Edmonton and Calgary child welfare casework supervisors (March 1996), identify child welfare workers' concerns over ever rising caseloads, inadequate resources and poor staff morale. Potential reasons identified for the increase include "a cutback in supports and benefits available

40 per cent of all recipients of social assistance in Alberta are children. Social assistance is not covering basic needs (1993 Health and Welfare Canada). Almost one in five Alberta children live in poverty (1994 Canadian Council on Social Development). Poor kids are almost twice as likely to die in childhood; 2.5 times more likely to die of infectious diseases (1987 Canadian Medical Association). Alberta has the highest turnover rate for child care workers (in child care centres), due to the low minimum wage and labor standards for casual labor.

Source: Calgary Herald, February 15, 1996 David Triguero — excerpts from THE ALBERTA DISADVANTAGED: State of Alberta's Children

■ The Canadian Council on Social Development (CCSD), using 1990-1991 Statistics Canada data (*Lochhead and Shillington, June 1996, A Statistical Profile of Urban Poverty*), lists Edmonton and Calgary as the 6th and 9th highest cities respectively of 26 cities experiencing poverty among all persons. When poverty among two-parent families is considered, Edmonton ranks third and Calgary fifth of the 26 Canadian cities studied.

■ Ironically, the Alberta government proclaimed legislation on July 15, 1996 outlawing discrimination based on source of income, especially on the part of landlords. This would appear to be its sole contribution to the United Nations (1996) International Year for the Eradication of Poverty.

■ In revamping the Alberta Human Rights Commission and combining it with two other government departments, the Government of Alberta ignored the opportunity to surrender its solitary stance in refusing to ratify the UN Convention on the Rights of the Child. As the former Children's Advocate (Bernd Walter) and a former Cabinet Minister (Elaine McCoy) have publicly pointed out, ratification would affect little our domestic/provincial legislation. It is, however, a gesture that is important symbolically, for it could be seen as our declaration that Alberta's children, and especially poor and at risk children, are citizens of Canada with the same rights as adults. *Globe and Mail* July 16, 1996 "Discrimination Against Poor Outlawed"

■ The 1992-93 situation for Alberta's children, as described by the Children's Advocate, has worsened inexorably since his report. These conditions can only worsen further since the April 1, 1996 advent of the Canada Health and Social Transfer Program (CHST) and the demise of the Canada Assistance Plan (CAP), operant 1966-1996, which had guaranteed, at least, a right to sustenance when need was demonstrable. Now, under the CHST, child welfare and income maintenance, never popular causes, must compete with health and post-secondary education for every dollar. The winners will not be the poor children, their parents or the professionals who have been their advocates. And, with the decision to privatize child protective services, the separation of authority from responsibility will be complete.