



A N N U A L 2014 R E P O R T

 SASKATCHEWAN
advocate
a Voice for Children and Youth

Letter of Transmittal



Letter of Transmittal

April 30, 2015

The Honourable Dan D'Autremont
Speaker of the Legislative Assembly
Legislative Building
2405 Legislative Drive
Regina SK S4S 0B3

Dear Mr. Speaker:

In accordance with section 39 of *The Advocate for Children and Youth Act*, it is my duty and privilege to submit to you and the members of the Legislative Assembly of Saskatchewan the annual report of the Advocate for Children and Youth for the year 2014.

Respectfully,

Bob Pringle
Advocate for Children and Youth
Province of Saskatchewan

About us

Our Vision

That the rights, interests and well-being of all children and youth are respected and valued in Saskatchewan communities and in government legislation, policy, programs and practice.

Our Mandate

Who We Are

The Advocate for Children and Youth is an independent officer of the Legislative Assembly of Saskatchewan. He leads a small team of regional advocates, investigators, and administrative, research and communication professionals who work on behalf of the province's young people.

What We Do

Our mandate is defined by *The Advocate for Children and Youth Act*.

We do:

- **ADVOCACY** on behalf of children and youth receiving services from a provincial ministry, agency, or publicly-funded health entity.
- **INVESTIGATIONS** into any matter concerning or services provided to children and youth by any provincial ministry, agency, or publicly-funded health entity.
- **PUBLIC EDUCATION** to raise awareness of the rights, interests and well-being of children and youth.
- **RESEARCH AND ADVISE** any minister responsible on any matter relating to the rights, interests and well-being of children and youth.

The Advocate does not have jurisdiction over decisions made or services provided by local school boards, municipal or federal governments, police or courts, decisions of Cabinet, private companies or individuals.



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While the Saskatchewan Advocate for Children and Youth's office is in Saskatoon, we deliver programs and services throughout Saskatchewan.

Photography: All photographs are stock photographs using ordinary youth as models unless captions are provided. Photographs that are not stock photographs are courtesy of staff at the Advocate for Children and Youth, Boehmer Photography (page 4), and Hope's Home (page 36).

Dear Friends,

In 2014, the Advocate for Children and Youth celebrated its 20th year advocating to respect and advance the rights, interests and well-being of children and youth in communities, and in government legislation, policy and practice.

Message from the Advocate

Under the United Nations *Convention on the Rights of the Child*, children and youth have the right to be at the centre of all child- and youth-serving systems, to have their best interests be the primary consideration in any action taken on their behalf, and to participate and be heard in decisions made about their lives. It is the legal responsibility of governments to uphold these rights at all times.

Far too often we find that children's rights are not at the forefront of decision-making, and that service providers are not working together to provide services to children and youth in a coordinated, holistic way. This was made clear in the recent Coroner's inquest into a child's death.

In order to provide high quality services, the child welfare system requires sufficient resources, implementation processes, training, quality assurance, and accountability frameworks. Adequate resources would better ensure the quality of case management and better compliance with policies.

In the youth justice system, we see that uncertainty around reorganization, and facility and unit closures continue to negatively impact young people in custody, meaning that they may be moved frequently, placed far from their home communities, and treated differently in different facilities. Several open custody facilities, developed to support youth rehabilitation and reintegration back into the community, have been or are slated to close, and these youth are being moved to facilities designed for closed custody,

which is not appropriate without major modifications to the facilities and staffing models. This is counterproductive to rehabilitation of young people, and their reintegration back into the community. We are very concerned about this.

In terms of health services and education, we see that parents and other caregivers often struggle to get timely and equitable access to health services for children and youth, and to negotiate the patchwork of fragmented early learning services before children enter kindergarten. Our office has an open recommendation from 2014 that the Government of Saskatchewan develop and implement a well-resourced early childhood development strategy to help address these shortcomings.

Children and youth of First Nations and Métis heritage are particularly disadvantaged in Saskatchewan, as in Canada, with high rates of poverty, over-representation in the child welfare and youth justice systems, and unequal access to services on reserve, even essential services like fire protection.

It is also important to highlight some positive provincial initiatives in 2014. The Ministry of Social Services is incorporating the culturally-appropriate *Touchstones of Hope* principles, has developed training for their staff in children's rights, and is demonstrating leadership within government in the use of child rights impact assessments in policy and practice. This ministry also introduced new risk assessment tools to improve the ability of workers to keep children safe and protected. Making effective use of these risk assessment tools requires staff competence in their use and consistent case documentation, which is a function of quality supervision and training, and manageable workloads.

When the Ministry of Justice, Corrections and Policing started its review of the level system in which youth in custody earn levels of privileges, they surveyed youth in these facilities to learn how they understood the levels, and how they could be improved. By involving those most affected in this review process, young people were given a voice in this decision, which respects their right to be heard.

The provincial government has acknowledged shortcomings in mental health and addiction services, and in late 2014 released a 10-year action plan informed by extensive community consultation. New funding was earmarked for childcare spaces and prekindergarten programs,



Above: Advocate Bob Pringle gives a talk at the Best Interest of the Child conference in May 2014. (courtesy Boehmer Photography)

and new tools to report and combat bullying were launched. The Counsel for Children program was established, setting up a framework to provide children access to independent legal representation when they are involved in child protection hearings.

Through the *Child Welfare Review* in 2010, and the *Child and Family Agenda* in 2011, the provincial government has increased attention on issues facing children, youth and families in Saskatchewan. While the *Agenda* is positive, at this point we do not believe that it has been fully implemented in the way it was intended when recommended in the *Child Welfare Review*. We strongly urge the Government of Saskatchewan to continue to develop this *Agenda* so that families get the services that they need.

In October 2014, the government announced its intention to develop a poverty reduction strategy, with the establishment of an advisory group who will be consulting with communities in 2015. If developed and implemented in a comprehensive way, I believe this strategy will help advance the goals of the *Agenda*—children get a good start in life; youth are prepared for their future; families are strong; and communities are supportive—all of which are well aligned with respecting children’s rights.

With the legislative review of *The Child and Family Services Act*, we will also continue to urge the provincial government to incorporate the *Saskatchewan Children and Youth First Principles* developed by our office, which were fully adopted by government in 2009, into legislation. We believe putting these principles into law has the potential to keep the focus on the rights of children and youth.

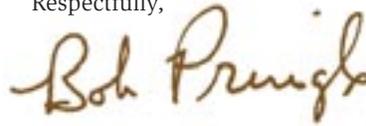
In our role as an independent voice for children and youth, we will continue to work with and challenge the provincial government to improve their policies and practices so they can provide better services for children, youth and their families.

We will also continue to challenge the federal government to make a similar level of commitment to our children and youth, as federal leaders are responsible for services to children, youth and families on reserve. The Canadian Council of Child and Youth Advocates, of which we are a member, is calling on the federal government to address the dire economic and social conditions of Aboriginal children and youth. We believe this is our number one human rights issue in Canada.

I am pleased to submit this Annual Report, which is an overview of the state of provincial government services for children, youth, and their families.

In closing, I urge all adults involved with the care and protection of children and youth to ensure their well-being by keeping them at the centre of all decisions made about their lives. There is no greater way to honour the gift of our children and youth than to ensure they are safe, valued, and respected.

Respectfully,



Below left: Bob with Dr. Deborah Parker-Loewen, who served as Saskatchewan’s first children’s advocate from 1994 to 2005, at our 20th Anniversary Open House in November 2014.

Below middle: Bob with Saskatoon Police Chief Clive Weighill and children from a local childcare centre at our 20th Anniversary Open House.

Below right: Bob with elders Joe Quewezance and Albert Scott at our 20th Anniversary Open House.



Our Roles, Values and Vision

The Advocate for Children and Youth is an independent officer of the Legislative Assembly of Saskatchewan. The Advocate leads a team of regional advocates, investigators, and research, communications and administrative professionals who work on behalf of the province's young people.

Our Advocacy, Public Education and Investigations

Our vision is that the rights, interests and well-being of children and youth are respected and valued in our communities and in government legislation, policy programs and practice.

Our mandate is defined by *The Advocate for Children and Youth Act*. We do:

- **advocacy** on behalf of children and youth receiving services from a provincial ministry, direct or delegated agency or publicly funded health entity;
- **investigations** into any matter concerning or services provided to children and youth by a provincial ministry, direct or delegated agency or publicly-funded health entity;
- **public education** to raise awareness of the rights, interests and well-being of children and youth;

Our objective is to achieve better outcomes **for children and youth in Saskatchewan**

- **research** on issues affecting children and youth; and we can advise any minister responsible on any matter relating to the rights, interests and well-being of children and youth.

Our objective is to inform and influence all levels of government service delivery and decision-making to achieve better outcomes for children and youth in Saskatchewan.

Our work is guided by the Saskatchewan *Children and Youth First Principles*, which we developed in 2007, based on the *United Nations Convention on the Rights of the Child*. The *Convention* is an international human rights treaty of rights and freedoms for children and youth that should be respected by governments. The *Children and Youth First Principles* were fully adopted by the Government of Saskatchewan in 2009, as part of its plan to strengthen the child welfare system.¹

In 2011, our office adopted the principles contained in the *Touchstones of Hope for Indigenous Children, Youth and Families: Reconciliation in Child Welfare*.² These principles were developed using a collaborative process with many leaders in child welfare, facilitated by the First Nations Child and Family Caring Society of Canada. ♦

1. Government of Saskatchewan. Putting children first: province takes action on child welfare [Press release]. February 25, 2009. Available from: <http://www.gov.sk.ca/news?newsId=308e1b59-17ef-47b0-98f1-086003a17fd0>

2. Blackstock, C., Cross, T., George, J., Brown, I., & Formsma, J. *Reconciliation in child welfare: Touchstones of hope for Indigenous children, youth, and families*. Ottawa, ON, Canada: First Nations Child & Family Caring Society of Canada / Portland, OR: National Indian Child Welfare Association, 2006.



Saskatchewan Children and Youth First Principles

We believe that all children and youth in Saskatchewan are entitled to:

- Those rights defined by the United Nations *Convention on the Rights of the Child*.
- Participate and be heard before any decision affecting them is made.
- Have their best interests given paramount consideration in any action or decision involving them.
- An equal standard of care, protection and services.
- The highest standard of health and education possible in order to reach their fullest potential.
- Safety and protection from all forms of physical, emotional and sexual harm, while in the care of parents, governments, legal guardians or any person.
- Be treated as the primary client, and at the centre, of all child-serving systems.
- Have consideration given to the importance of their unique life history and spiritual traditions and practices, in accordance with their stated views and preferences.

Touchstones of Hope for Indigenous Children, Youth and Families

- **Relating:** Working respectfully together to design, implement, and monitor the new child welfare system.
- **Restoring:** Doing what we can to redress the harm and making changes to ensure it does not happen again.
- **Truth Telling:** Telling the story of child welfare as it has affected Indigenous children, youth and families; and
- **Acknowledging:** Learning from the past, seeing one another with new understanding, and recognizing the need to move forward to a new path. ◆

Below: Making rights posters with youth at the 2014 National Child Day events at Street Culture Project in Regina.



It has been more than four years since the Government of Saskatchewan launched the *Child and Family Agenda*, and although our office commends the efforts to coordinate this inter-ministerial agenda, we have observed that this cross-government approach is falling short on its broad goals to support children, youth and their families.

The Child and Family Agenda: what is its status?

Our office continues to await the full implementation of the 12 recommendations arising out of the *Child Welfare Review* and understood that the *Child and Family Agenda* would be part of the impetus behind the fulfilment of these recommendations in government. We were optimistic when the government renamed the *Agenda* in 2013 that this would result in a renewed commitment to the *Agenda* and improving outcomes for children and families in Saskatchewan. However, today families, professionals and community members have minimal awareness and engagement in the *Agenda*, and it is not clear if the *Agenda* includes a sustainable comprehensive framework with sufficient resources to reach its goals.

In 2014 our office has been vocal at all levels of government on the lack of momentum of the *Agenda* and what appears to be a focus on supporting families that are most marginalized. We understand the importance of addressing

the needs of marginalized families as one of many important goals, yet we see too narrow of a focus as hindering the movement of the *Agenda* in meeting its broader goals. *The Child Welfare Review* made it clear that those who are close to being marginalized will fall further behind, becoming marginalized if not supported. Therefore, in order to ensure that the rights, interests and well-being of all children and youth in Saskatchewan are respected and valued, our office advocates for an approach that captures the needs of all children, youth and their families notwithstanding that those families with the greatest need have immediate access to supports and services.

Developing a child and youth agenda was one of the recommendations made by the independent *Child Welfare Review* that was accepted by the government. The recommendation was for an agenda that “guarantees children and youth become a high priority in the province, and that all children get a good start in life” through a broad-based steering committee, high level inter-ministry working groups to ensure high priority and immediate action, and “collaboration with other governments and a range of community stakeholders” to ensure that it becomes relevant in all areas and all organizations. To date, the agenda envisioned by the panel has not been implemented in the way described. Our office continues to advocate for the fulfilment of the panel’s vision of a child and youth agenda through monitoring the extent that the *Child and Family Agenda* complies with the implementation of the panel’s recommendations.

We also see further development is needed in the area of the early years. While there were an additional 500 licensed childcare spaces funded in 2014, Saskatchewan continues to have the lowest number of licensed childcare spaces in Canada. This means that most young children in childcare are in unregulated care, which is not monitored by the government beyond safety concerns reported directly to the Ministry of Education. Our office is advocating for the increase of funding for childcare spaces. Similarly, educational programs for three and four year olds are not widely available; while there is programming for this age group through prekindergarten programs offered through school divisions for three and four year olds, it is not universal, as it is funded and designed to meet the needs of vulnerable children and their families. Additionally, the government has not



resourced fulltime kindergarten, despite ample evidence that it results in better outcomes for children, including evidence from several Saskatchewan school boards that were offering the programs without dedicated funding, and a resolution from the Saskatchewan School Boards Association in 2012 that it be funded.

We have monitored the government's progress regarding the *Agenda* each budget cycle when the Government has reported on their investments in the *Agenda*. In 2014-15, this included work on the *Mental Health and Addictions Action Plan*, intensive supports in Social Services to help keep families together, two more Centres of Responsibility in HUB/COR model to prevent crime, 500 new licensed childcare spaces and 15 new prekindergarten programs, the introduction of a poverty reduction strategy and work on implementing recommendations from the Joint Task Force on Improving Education and Employment Outcomes for First Nations and Métis people.³

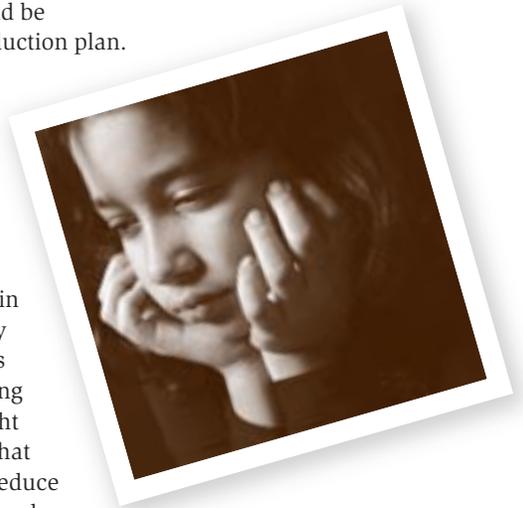
The government also has a good model for human service integration with the ten Regional Intersectoral Committees located throughout the province, which bring together human services providers to work in partnership to improve services to children, youth and families. While each Regional Intersectoral Committee is guided by its community's needs, they have all been active in working to reduce poverty and improving early childhood development in their communities.

While these initiatives are positive, they are not presented as part of a cohesive, comprehensive plan. This is problematic as the complexity of executing an inter-ministerial strategy requires extensive planning and coordinating of services across the Ministries and governmental service providers involved. After mentioning the *Agenda* in the Throne Speech in 2013, in which the Government of Saskatchewan signals its priorities, it was not mentioned in the 2014 speech.

One important government initiative the Advocate's office will be closely watching in 2015 is the province's work in the area of poverty reduction. In December 2014, the government announced the formation of an eleven-member Advisory Group on Poverty Reduction to conduct a review of work that the government has done to address poverty in Saskatchewan, and to identify gaps where more work is needed. This group is expected to report to the government in May 2015.

Our office is supportive of these efforts but our position is this work needs to be tied closely to ongoing work on the *Child and Family Agenda* and the Saskatchewan Plan for Growth. Drawing on recent research by the Organization for Economic Cooperation and Development on income inequality,⁴ we believe that a provincial poverty reduction strategy ought to address the growing wealth and income inequality in our province in order to make our society fairer and economy stronger. Additionally, an early childhood development strategy should be incorporated as part of the poverty reduction plan.

We will continue to advocate that the government develop and implement comprehensive, well-resourced early childhood development and poverty reduction strategies to advance the goals of the *Child and Family Agenda*. As we said when we made this recommendation in 2014,⁵ government spending on family support and early childhood programs benefits society as a whole – supporting the best interests of children is the right approach. Extensive research shows that this is the most cost effective way to reduce poverty, encourage economic growth and build strong and supportive communities. We believe this is the best way to meet the goals of the *Child and Family Agenda* – children get a good start in life, youth are prepared for their future, families are strong, and communities are supportive – for the benefit of all children, youth and their families. ◆



3. Government of Saskatchewan. Backgrounder – Saskatchewan Child and Family Agenda Progress to Date, March 2014. Available at <http://www.finance.gov.sk.ca/budget2014-15/SSbackgrounder-SCYAprogressMarch2014.pdf>

4. Research released by the OECD in 2014 showed that Canada is second only to the United States in the widening gap between top earners and everyone else (May 2014), that income inequality affects economic growth, and that the bottom 40% of the population are at risk of falling further behind, which needs to be addressed with increased access to public services, not just antipoverty programs (December 2014). Organization for Economic Cooperation and Development. Focus on Top Incomes and Taxation in OECD Countries: Was the crisis a game changer? May 2014. Available at <http://www.oecd.org/social/OECD2014-FocusOnTopIncomes.pdf>. OECD, Focus on Inequality and Growth - December 2014. Available at: <http://www.oecd.org/els/soc/Focus-Inequality-and-Growth-2014.pdf>

5. Saskatchewan Advocate for Children and Youth. Two Tragedies: Holding Systems Accountable, May 2014, p. 39. Available at: <http://saskadvocate.ca/media-resources-publications>

At the forefront of our office's mandate is the continued commitment to advocating for First Nations and Métis children and youth in Saskatchewan. We continue to work on improving our support for and engagement with Aboriginal peoples in Saskatchewan.

Focusing on First Nations and Métis Children and Youth

In both our advocacy and investigations, we are particularly mindful of the need to represent the voice of First Nations and Métis young people in government. By most any measure, this group is the most vulnerable in our society, and they are overrepresented in the child welfare and youth justice systems. The socioeconomic and systemic challenges facing too many First Nations and Métis

children, youth and their families have long-lasting impacts on their health, well-being, and educational and employment outcomes if inadequately addressed.

An analysis of Census data showed that two-thirds of status First Nations children in Saskatchewan live in poverty, the highest rate in Canada.⁶ This persistent poverty violates the rights of these children and youth. Article 27 of the United Nations *Convention on the Rights of the Child*, "guarantees that all children and youth have the right to a standard of living adequate for the child's physical, mental, spiritual, moral and social development."

Despite facing a multitude of challenges, First Nations and Métis peoples continue to demonstrate their many strengths and an enduring resilience that is deeply embedded in their cultural traditions and distinct nationhood. All of Saskatchewan's children and youth have the right to be safe, protected, and have the resources to reach their full potential. We will continue to advocate for the provincial and federal governments to meet their commitments under the *Convention* to ensure that these rights are upheld for Aboriginal children and youth, both off and on reserve, and to improve outcomes through the provision of services to support their healthy growth and development.



Advocate urges federal government to create equal child welfare funding on reserve, and to reduce number of Aboriginal children in care

Our office has been vocal about our position that the federal government must address funding disparities for children on reserve. The First Nations Child and Family Caring Society of Canada and the Assembly of First Nations pursued this issue on behalf of First Nations children who have not received an equal standard of care by virtue of living on-reserve through the Canadian Human Rights Commission. A complaint was brought forward to address the disparity between federal funding for child welfare on reserve versus provincial funding off reserve. The Advocate travelled to Ottawa to witness the closing arguments of the Canadian Human Rights Tribunal on First Nations Child Welfare, on the federal government's funding of child welfare services, and to support the complainants. The hearing took place over a week in October 2014 and the Tribunal's final ruling is expected in April 2015. We are hopeful that the Tribunal's decision will have a positive impact in advancing the rights of First Nations children and youth on reserve.

6. Canadian Centres for Policy Alternatives /Save the Children. Poverty or Prosperity: Indigenous Children in Canada. June 2013, p. 10. Available from: <https://www.policyalternatives.ca/publications/reports/poverty-or-prosperity>

7. United Nations General Assembly. Report of the Special Rapporteur on the rights of indigenous peoples, James Anaya, on the situation of indigenous peoples in Canada. July 2014. Available from: <http://unsr.jamesanaya.org/docs/countries/2014-report-canada-a-hrc-27-52-add-2-en.pdf>



United Nations makes recommendations to address daunting challenges for indigenous peoples in Canada

In 2014, the United Nations published a report on the Rights of Indigenous Peoples in Canada,⁷ following research and information gathered from various sources, including a visit to Canada in October 2013 to meet with government officials at the federal level and six provinces, including Saskatchewan.

The final report was a powerful statement on the current state of the reality and challenges for Indigenous peoples in Canada. The United Nations Special Rapporteur deemed that there is a crisis in terms of the infringement of the human rights of Indigenous peoples. He also highlighted the importance of the Canadian government in addressing the barriers for Indigenous peoples, while ensuring the continued protection and upholding of the rights of Indigenous people that are embedded in the treaty relationship and both Canadian and international human rights law.

The United Nations concluded that the concerns for the well-being of Indigenous peoples in Canada begins with fostering mutual understanding and common objectives, highlighting the need to close the “well-being gap” between Aboriginal and non-Aboriginal people, along with addressing the outstanding treaty and Aboriginal claims and the mistreatment of Aboriginal women and girls. There were a number of recommendations arising out of this special report including that the Canadian government conduct a “comprehensive nation-wide inquiry” into missing and murdered Aboriginal women, working towards parity in the standard of living for Aboriginal peoples and the rest of Canadians, and overall improving the relationship between Indigenous peoples and all levels of Canadian government. ◆

Page 8: Youth play hockey at Ranch Ehrlo's winter festival

Below left: Advocate Bob Pringle, with regional advocates Cheryl and Meredith at Stony Rapids in Northern Saskatchewan.

Below: Saskatoon Tribal Council's Tribal Chief Felix Thomas, with regional advocates Cheryl and Jacqueline, and the STC's mascot, Journey the Rezdog



In addition to the work the Advocate's office has carried out on supporting funding improvements on reserve, the Advocate has also continued his work with the Canadian Council of Child and Youth Advocates to reduce the number of Aboriginal children in care in child welfare. On

The Canadian Council of Child and Youth Advocates has urged the federal government to **reduce the number of Aboriginal children in care**

November 20, 2014, the 25th anniversary of the *United Nations Convention on the Rights of the Child*, the Saskatchewan Advocate for Children and Youth, as part of the Canadian Council of Child and Youth Advocates, urged the federal government to take immediate action to reduce the number of Aboriginal

children in care in child welfare systems across Canada. This issue is particularly critical for Saskatchewan, as a disproportionate number of the children in care are Aboriginal.

The Canadian Council of Child and Youth Advocates proposed four recommendations to the federal government to address this issue:

- A national initiative to measure and report on child welfare, education and health outcomes for Aboriginal children and youth. This will require creation and coordination of data, and clear assignment of roles and accountabilities;

- Creation of a national Aboriginal children and youth participation initiative, with training on child and youth rights, leadership, voice, and civic participation, to fully implement the *United Nations Convention on the Rights of the Child* and reduce vulnerability;
- That a special conference of Federal/Provincial/Territorial First Ministers, with Aboriginal leaders, and child and youth delegates, be convened to receive a report on outcomes for Aboriginal children and youth. A national plan to improve outcomes for Aboriginal children and youth would be a desired outcome of this process; and
- Creation of a statutory officer independent from the Parliament of Canada, but accountable to the Parliament, a National Children's Commissioner with particular emphasis on Aboriginal children and youth and the national dimension of the work on programs, evaluation and outcomes.

Bridging the funding disparity for First Nations children by Implementing Jordan's Principle

The previous section addressed the perceived funding inequities for children on reserve receiving child welfare services compared to services provincially funded off reserve. In Saskatchewan there are also cases where First Nations children are negatively impacted by federal funding cuts or jurisdictional disputes over funding.

In January 2014, our office learned that the federal government was cutting provincial Early Childhood Intervention Program (ECIP) services to First Nations in Saskatchewan. Staff in this program work with children aged 0-6 and their families in their own homes, addressing developmental delays these young children have in areas such as walking, talking, eating, and interacting socially. Some of these children also have complex medical needs, requiring further support. ECIP staff may also connect families with other services, and they work with families to get children ready for school. In the North, ECIP organizes medical outreach clinics, bringing medical specialists to the North to see many children, rather than having each family travel to Saskatoon to see specialists.

The Government of Saskatchewan does not fund ECIP services for children living on reserve, as



funding for their services is a federal responsibility. However, the federal government had been paying for children on reserve to receive these services from the Saskatchewan Ministry of Education. Since ECIP services were available both on and off reserve, children who moved on and off reserve were able to continue to receive services wherever they were living. The Ministry of Education reported to the Advocate that they provided ECIP services to 236 children living on reserve in 2013-14, and ECIP directors have identified many more children needing services. Our office understands the importance of improving social and health outcomes for First Nations children and youth and advocated for the restoration of services. After meeting with provincial and federal officials, we were informed that federal funding for ECIP would be provided by Health Canada to June 2015, and that Health Canada was exploring options past that date.

On December 12, 2007, Canadian Parliament unanimously supported the Private Member's Motion 296 in support of Jordan's Principle.⁸ Jordan's Principle honours Jordan River Anderson, a First Nations Band member of Norway House Cree Nation in Manitoba who was born with complex medical needs. Two years prior to Jordan's death, the medical professionals and Jordan's family were in agreement that Jordan should leave the Winnipeg Hospital and go live in a specialized foster home near his home community, but this did not happen as the federal government and provincial government could not agree on who would be responsible to fund his services. Jordan passed away at the age of five while still in hospital.

The purpose of Jordan's Principle is to change how First Nations children receive services and to end the denial or delay of care when those same services and support would be available to non-First Nations children. Most importantly, Jordan's Principle sets a standard where the child's needs are put first and funding disputes between the federal government and provincial government, or between federal government departments, are secondary. Children are often voiceless in decision-making, therefore, according to United Nations *Convention on the Rights of the Child* it is imperative that those making the decisions give the child's best interest paramount consideration. Our office will

continue to advocate for the federal government to maintain the ECIP funding on the basis of Jordan's Principle. We will continue to monitor and speak out on situations where the various levels of government are not addressing the funding disparities on-reserve to ensure that First Nations children have equitable access to services, as is their right and in accordance with Jordan's Principle.

Court recognizes Métis rights as Aboriginal rights

In 2014, the Federal Court of Canada released the landmark decision, *Daniels v. Canada* [2014],⁹ affirming the distinct Aboriginal rights of the Métis by finding that they are "Indians" within the meaning of section 91(24) of *The Constitution Act, 1867*. The impacts of this decision for Métis peoples will begin to be seen and we celebrate this advancement in the recognition of Métis peoples' rights. Our office is hopeful that the federal government will work to reduce the gaps for Métis peoples in health, social and

Jordan's Principle sets a standard where Aboriginal children's needs are put first, **and funding disputes are secondary**



Above left: A young dancer at a Saskatchewan Powwow in the summer of 2014

8. The Jordan's Principle Working Group (2015) Without denial, delay, or disruption: Ensuring First Nations children's access to equitable services through Jordan's Principle. Ottawa, ON: Assembly of First Nations. Available from: http://www.afn.ca/uploads/files/jordans_principle-report.pdf

9. *Daniels v. Canada* [2014], Federal Court of Appeal. Available from: <https://www.canlii.org/en/ca/fca/doc/2014/2014fca101/2014fca101.pdf>

economic, and education, especially for children and youth. The federal government can improve outcomes for Métis children, youth and their families by fulfilling their legal obligations to the Indigenous peoples of Canada.

This legal decision equips our office with an amplified ability to advance the rights of Métis children and youth based on their Aboriginal rights that are now recognized in Canada's *Constitution Act, 1867*, along with their rights protected by the *Convention on the Rights of the Child* and the *Declaration on the Rights of Indigenous People*. We have worked vigorously to advance the rights of First Nations children and youth, and look forward to the positive impact this decision will have.

Aboriginal leaders, government officials and communities need to work together to make sure reserves have adequate fire safety services

Fire safety on reserves

In January 2014, the Advocate spoke publicly about the need to ensure that First Nations communities have access to education on fire safety, and fire services on reserve, after two children died and a third was seriously injured in a fire in Pelican Narrows. This was the second time the Advocate had spoken out publicly on this issue.

Our office was involved in advocating for Aboriginal leaders, government officials and communities to work together to address issues around lack of access and funding for fire equipment, and a shortage of volunteer firefighters, to ensure that children and youth are safe and protected. The Advocate encouraged change

through pursuing dialogue on this topic and promoting and supporting fire safety on reserve. With several more children killed in fires on reserves in 2014 and early 2015, fire safety on reserves reached national prominence. Our office cannot stress enough the importance of ensuring that the lives of children and youth are protected, and that the federal government needs to work with First Nations communities to ensure that preventable deaths do not occur. We will continue to advocate for leaders to address these issues, and monitor this situation.

The Touchstones of Hope offer a way forward for reconciliation in child welfare

The need for a better understanding of the diverse traditions and experiences of the Aboriginal peoples in Saskatchewan is apparent. In order to achieve a greater understanding of the unique history of Aboriginal peoples in Canada, we have adopted the principles laid out in the *Touchstones of Hope for Indigenous Children, Youth and Families: Reconciliation in Child Welfare*.¹⁰ Our staff members are required to take *Touchstones of Hope* training as part of our professional development, to provide education and understanding of the issues facing Aboriginal children, youth and their families and utilize the *Touchstones* principles in our work.

Our office has benefitted greatly from this training and accordingly, we have advocated for government ministries to incorporate this workshop into their provincial training agendas. In 2012, the Advocate formally recommended that the Ministry of Social Services incorporate the *Touchstones of Hope* training as part of their core training in child welfare. The Ministry accepted this recommendation and has developed a training initiative in partnership with the Saskatchewan First Nations Family & Community Institute. Unfortunately, the Ministry of Justice, Corrections and Policing, has not yet followed suit for those working with youth under their supervision, despite our encouraging this ministry to do so. ♦

Below: *Touchstones of Hope* trainers Bonnie and Diane Musqua, with Cindy Blackstock, Executive Director of the First Nations Family and Caring Society of Canada, Advocate Bob Pringle, and investigator Connie Braun at the Prairie Child Welfare Consortium Symposium



¹⁰ Blackstock, C., Cross, T., George, J., Brown, I. & Formsma, J. *Reconciliation in child welfare: Touchstones of hope for Indigenous children, youth, and families*. Ottawa, ON, Canada: First Nations Child & Family Caring Society of Canada / Portland, OR: National Indian Child Welfare Association, 2006.

What's next?

Our office will work to support and engage more fully with First Nations and Métis leadership and with First Nations Child and Family Service agencies. The First Nations Child and Family Services agencies are an essential part of the delivery system for child and youth services in Saskatchewan, and it is critical that they are able to provide services of high quality to all the children, youth, families and communities that they serve. We will support their efforts to address disparities between services available on and off reserve.

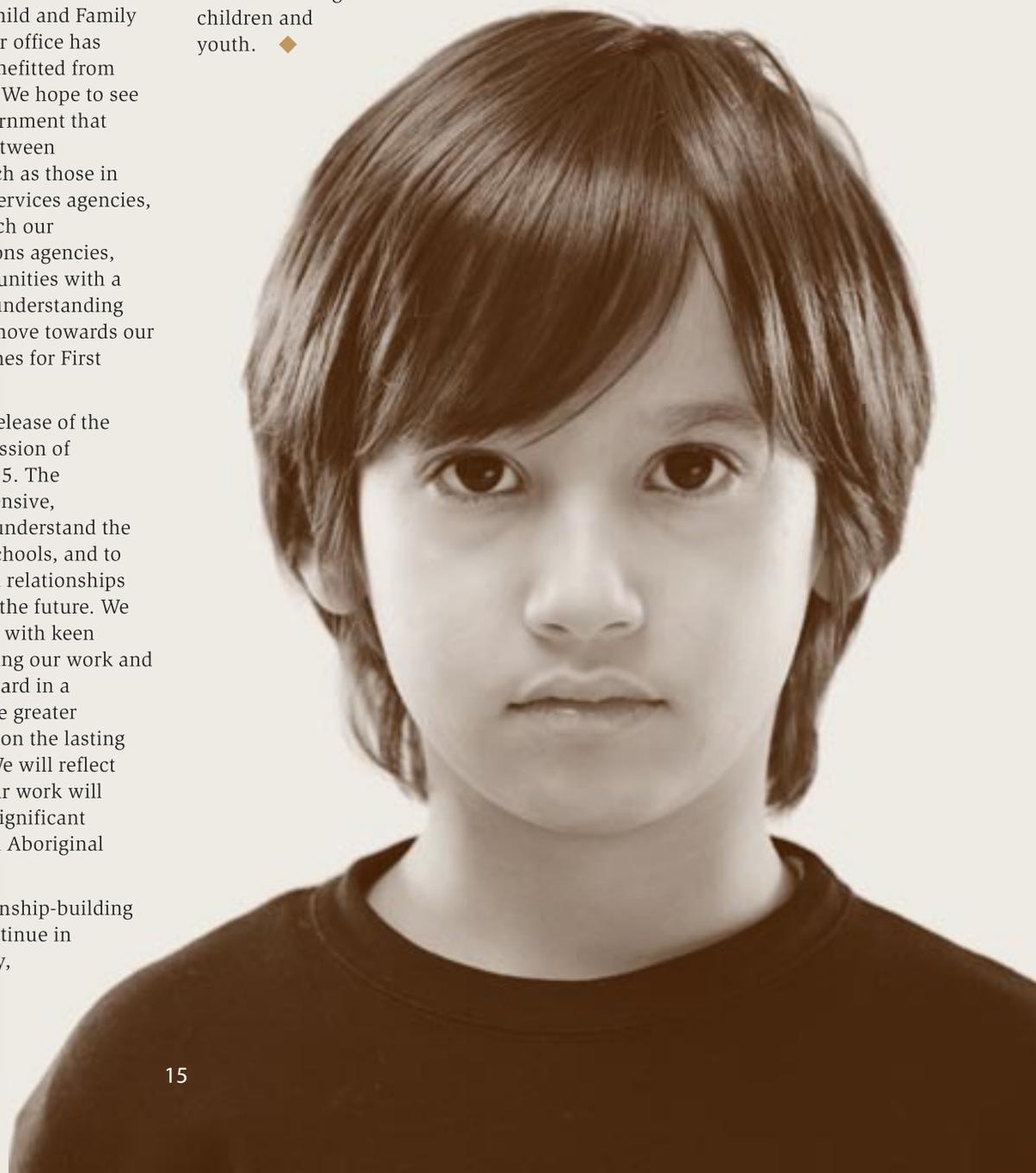
We are encouraged by the Ministry of Social Services' use of First Nations and Métis consultants, who serve as liaisons between the Ministry and the First Nations Child and Family Services agencies on reserve. Our office has witnessed that agencies have benefitted from working with these consultants. We hope to see increased initiatives within government that promote meaningful dialogue between Aboriginal service providers, such as those in First Nations Child and Family Services agencies, and the government. We approach our relationships with the First Nations agencies, leaders, stakeholders and communities with a desire to foster mutual respect, understanding and learning that enables us to move towards our shared goal of improving outcomes for First Nations and Métis children.

Our office looks forward to the release of the Truth and Reconciliation Commission of Canada's final report in June 2015. The Commission has carried out extensive, exceptional work to help better understand the traumatic legacy of residential schools, and to pave the way for more respectful relationships and reconciliation now and into the future. We look forward to their final report with keen anticipation, as we see it informing our work and enabling our office to move forward in a reconciliatory manner and bridge greater understanding for all Canadians on the lasting impacts of residential schools. We will reflect deeply on the final report and our work will continue to be informed by the significant impacts of residential schools on Aboriginal peoples today.

In 2015, our dialogue and relationship-building with Aboriginal peoples will continue in the areas of improving fire safety, advocating that Jordan's

Principle be honoured, and reducing the number of Aboriginal children in child welfare and the youth justice systems.

We await the release of the Truth and Reconciliation Commissions final report as well as the decision of the Canadian Human Rights Tribunal on child welfare funding on reserve. Our office also looks forward to advocating for the implementation of the recommendations by the United Nations Special Rapporteur, including the Advocate's continued support for a nationwide inquiry into murdered and missing Aboriginal women and eliminating the disparities between Aboriginal and non-Aboriginal children and youth. ♦



Any member of the public can contact the Advocate for Children and Youth office if they have a concern about a child or group of children receiving services from a provincial ministry or agency. Our primary goal is always to advocate on behalf of the child or youth.

Advocacy: resolving issues with government services

Our advocates identify the relevant issue, assess steps already taken, and determine an action plan. Advocates try to negotiate a resolution to the issue(s), and may formally review and/or investigate the concern in accordance with *The Advocate for Children and Youth Act*. Our advocates pursue a multi-disciplinary approach in resolving complex cases and promote integrated services across the child- and youth-serving government ministries. In 2015, our team of advocates will continue to advocate for timely, child-focused services and encourage resolution at an early stage that is in accordance with the

Below: Making posters with youth at the Street Culture Project for a rights awareness walk in downtown Regina, part of our 2014 National Child Day events.

best interests of the child or youth involved while promoting the *Convention on the Rights of the Child*.

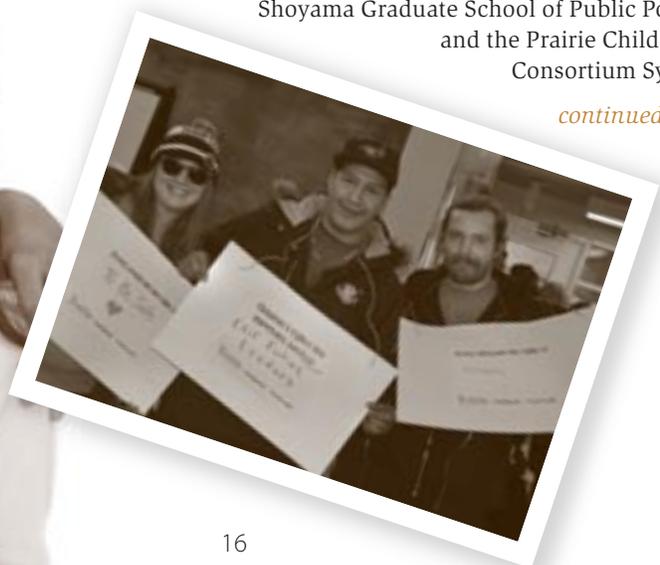
Public Education: promoting and protecting the rights of our children and youth

Public education is one of the many important aspects of our work. It serves as a proactive and preventative measure to ensure that children and youth rights are upheld by informing the government, the public, and most importantly, children and youth, of the rights of children and youth as outlined in the *Convention*, and how we are mandated to protect these rights. In 2014, our office made over 300 public education presentations. We also organized events to celebrate National Child Day, held every year on November 20, which was particularly significant this year as it marked the 25th anniversary of the United Nations *Convention on the Rights of the Child*.

In October 2014, the Ministry of Justice, Corrections and Policing invited our office to present at the provincial meeting of their Community Corrections supervisors and managers. At the end of the year, we were also very pleased that our office was invited to present at the Ministry of Social Services Core Training. We have committed to present on an ongoing basis for each session of the Ministry's training module on children's rights. These opportunities allow us to educate and inform the staff responsible for case management with two of the province's largest child- and youth-serving organizations.

In 2014, the Advocate gave keynote speeches at several events, including at the Best Interest of the Child conference organized by the Johnson-Shoyama Graduate School of Public Policy, and the Prairie Child Welfare Consortium Symposium.

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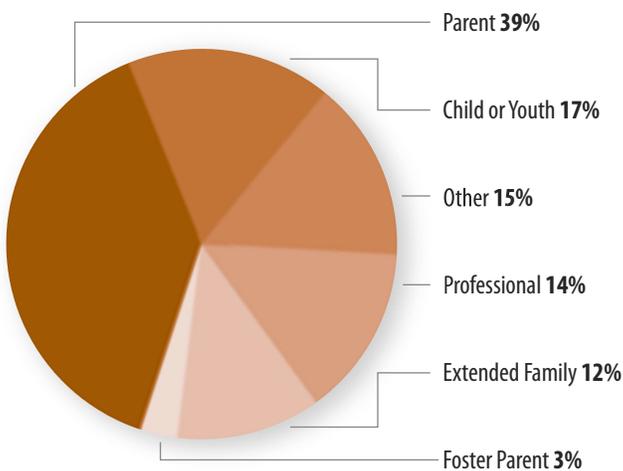
Child Rights Impact Assessment: a tool to measure and monitor the impact of decision-making on children and youth

With the ratification of the United Nations *Convention on the Rights of the Child*, a number of countries have developed tools to systematically assess the potential impact of policy or legislative changes on children and youth, using the *Convention* as a framework. In Canada, UNICEF has been championing the use of Child Rights Impact Assessments (CRIA)¹¹, and helped organize an international symposium in Ottawa in 2013 in which our office participated. UNICEF and the Government of New Brunswick and the New Brunswick Child and Youth Advocate have developed a CRIA tool that, as of 2013, before any law, regulation or policy comes before New Brunswick's legislature, the CRIA tool must be used to assess the decision's impact on children and youth.

In 2014, the Saskatchewan Ministry of Social Services has been championing the use of CRIA and developing its own CRIA tool with the assistance of UNICEF Canada. The proposed tool makes mention of the *Convention* rights along with specific reference to the United Nations *Declaration on the Rights of Indigenous People*. Our office sees this as a positive step towards keeping children and youth rights at the centre of decision-making and planning. We commend the Ministry of Social Services for their leadership in this area, and will continue to advocate for and support the government to implement CRIA in decision-making in Saskatchewan. ♦

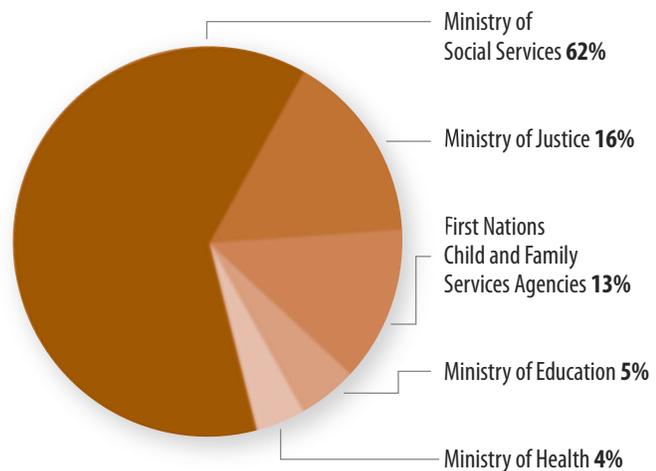
11. For more information about Child Rights Impact Assessments, see the UNICEF Canada website: <http://www.unicef.ca/fr/discover-fr/article/what-is-a-child-rights-impact-assessment>, and UNICEF Canada's report *Child Rights Impact Assessments: The Fundamentals*. Submitted by UNICEF Canada to the Standing Senate Committee on Human Rights, February 3, 2014. Available at: http://www.unicef.ca/sites/default/files/imce_uploads/cria_senate_presentation_unicef_canada_feb_3_2014.pdf

Who contacted the Advocate for Children and Youth in 2014



Parent: includes parents, step-parents, non-custodial parents, legal guardians, caregivers, alternate caregivers and persons of sufficient interest.

Issues received about services provided by a Ministry or Agency in 2014



Other: includes interested third parties such as band officials, babysitters, neighbours. Also includes anonymous or unknown callers.

Our staff participated in these and other conferences, attending sessions, interacting with other participants, and staffing display tables to provide attendees with information on children's rights, our services, and copies of our various reports. Our staff also participated in professional development opportunities to increase our knowledge in child and youth welfare, including training at Mount Royal University in the Child and Youth Human Rights extension certificate that several staff members completed to enhance their understanding of child and youth rights.

Our office has identified the importance of having a public media profile as a means of reaching children and youth in the community, and maintains a profile consistent with practices of organizations such as UNICEF and the United Nations to provide children and youth with access to information on their rights.

We will continue to conduct presentations throughout the province to engage with

children, youth and child- and youth-serving organizations to promote children's rights, interests and well-being and to increase awareness of our advocacy services.

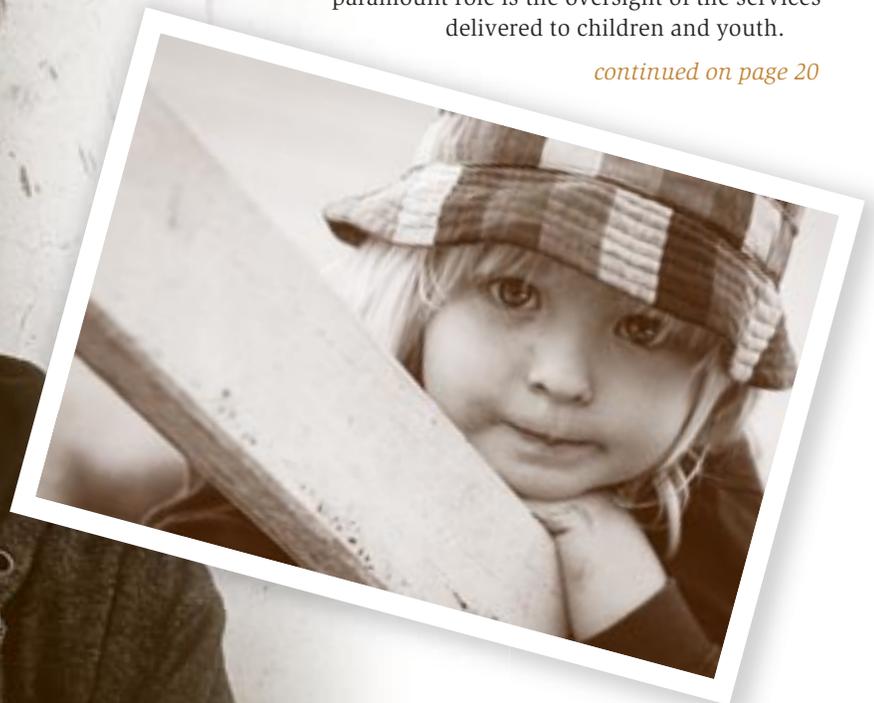
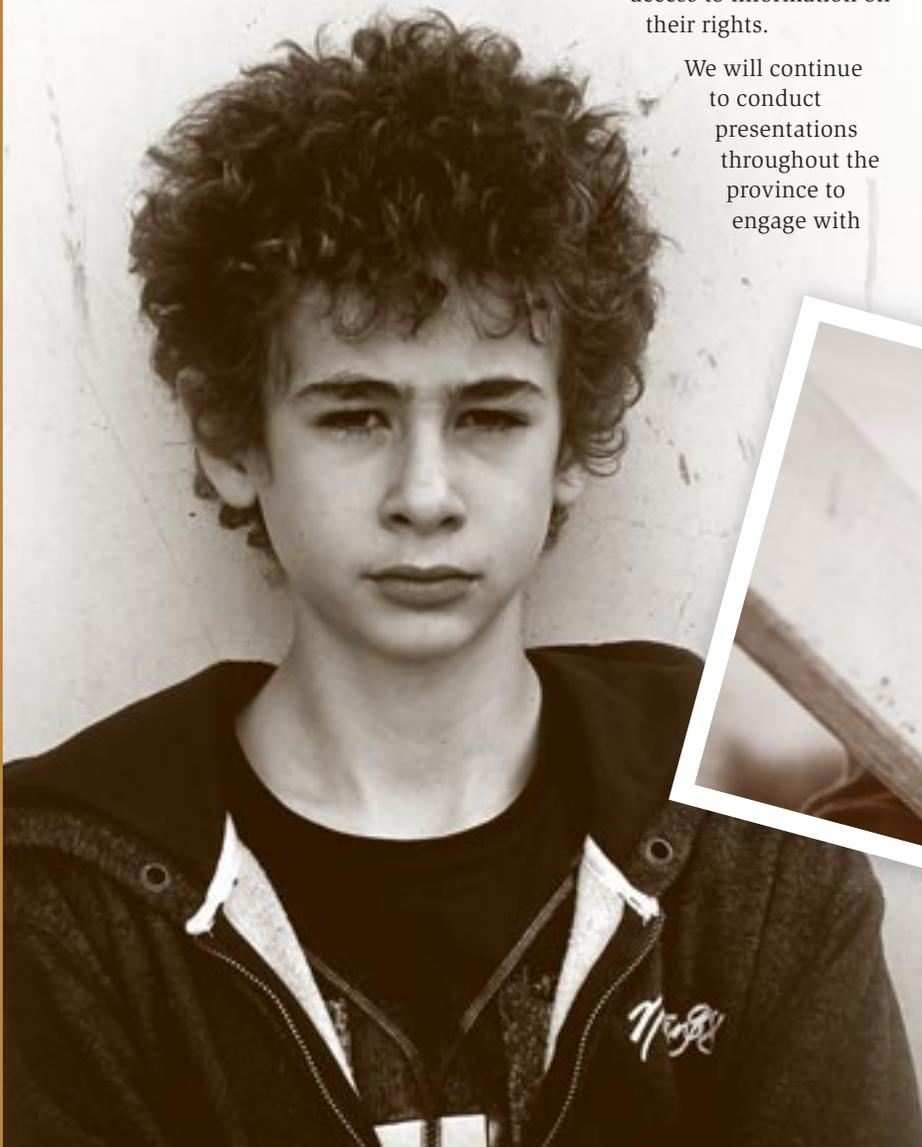
Systemic Advocacy

Research, analysis and engagement with government and community stakeholders helps us understand, elevate and alleviate broader system, social and public policy, and service issues that affect children and youth in Saskatchewan. Most of the concerns that are referred to our office are systemic in nature, requiring ongoing research, analysis and monitoring. Our individual and group advocacy cases, and investigations of critical injuries and child deaths, gives us the opportunity to identify systemic issues, gaps in services, and barriers to accessing services. We track these systemic issues by themes.

Our child- and youth-rights lens is sought by the government on many policy and program issues. Through our advocacy we hold the government to account on systemic issues involving children and youth rights. The value of our office's work on systemic issues is our ability to have discussions with the government on how they will uphold children and youth rights in the development of policy and programming. It is essential that our office participate in meaningful discussions while remaining at an arm's length from the actual decision-making, as our paramount role is the oversight of the services delivered to children and youth.

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While in care or custody, young people have a right to participate in case planning, connect with family and culture, **and be treated with respect**



Supporting young people to engage in self-advocacy

We help young people understand that while in care or custody, they have the right to share their thoughts and feelings, connect with their family, community and culture, be treated respectfully by case workers and caregivers, and have access to recreation, education and health care. As these case studies show, helping youth to speak up and be part of their plans improves their experience in government care, and helps them reach their potential.

Raising youth up to find their voice: Danny's story

"Danny", a youth in open custody, contacted our office as he felt youth in the facility were not being treated respectfully by staff. He asked that our office assist him in addressing the issue with a supervisor. One of our regional advocates met with Danny, and helped organize a meeting with him, the supervisor, and the staff member in question. At the meeting, Danny was encouraged through our support to express the importance of treating youth with respect and being mindful of how staff speak to youth.

Subsequently, when the regional advocate was back at the same facility making a presentation on self-advocacy, Danny spoke up and told everyone that if they needed help, to contact our office and that we would help. Later that year, Danny approached this same advocate at a cultural event where he was volunteering, thanking her again for supporting him to make more positive life choices, including speaking up for himself. Our office is a witness to the tremendous impact that youth voice has on young people's growth and development. Youth participation and respect of the rights of children and youth have an incredible impact on the development of self-confidence and a sense of belonging, which is consistent with the *Preamble of the Convention on the Rights of the Child*.

Showing youth we value their opinions: Russ's story

After a public presentation to youth on their rights, the advocate for that region invited youth in the group home to speak to her confidentially on any concerns they had about their rights. "Russ" approached the Advocate and advised her that he did not understand why he and his siblings had been removed from their home, and that he missed his family. Russ was frustrated as he tried numerous times without success to contact his family services worker to schedule a family visit or ask about his case plan.

The Advocate knew the importance of listening to Russ's concerns, and assisting in resolving them. Our office arranged for a case conference for Russ to share his concerns and we worked at restoring family visits. The regional advocate helped Russ safely express his frustration at his lack of contact with his worker, and not being involved in his case plan. Following our office's advocacy, the worker reviewed Russ's case plan, and worked with him and his family to address issues that led to the children being taken into care. We are happy to report that Russ and his siblings were reunited and returned home. Russ later called his advocate to thank her again for listening to him and giving him the means to express his concerns. Russ let her know how well things were going for him in school and with his family. ♦



In 2014, our systemic work included:

- Leading the advocacy for a government-funded program for the independent legal representation of children and youth in child protection proceedings. Since 2007, we have advocated that children and youth who are involved in child protection hearings receive independent legal representation to ensure their voices are heard and rights respected. We worked with Pro Bono Saskatchewan to establish a short-term program, while continuing to advocate for an independent, publicly-funded program. We commend the government for establishing the **Counsel for Children program** in 2014, which will ensure that children and youth receive the independent legal representation to which they are entitled. Our office is no longer involved in the administration of the program. We do provide assistance in program training for the roster lawyers and we will continue to monitor the operationalization of this new initiative to ensure that it meets the best interests of children and youth.
- Contributing to the legislative review process of *The Child and Family Services Act*. The Advocate was asked to participate in this process by government. We deemed that we could serve an advisory role on the seven teams tasked with reviewing this legislation in 2013 while ensuring that we did not contribute to the task teams' final written submissions to ensure our

independence was in place. In 2014, we also provided our detailed written submission responding to *The Child and Family Services Act* Legislative Review Discussion Guide. We will continue to monitor in 2015 when the new legislation is unveiled, paying close attention to how the revised legislation is implemented and monitoring the individual, group and systemic cases that come to our attention.

- Monitoring and supporting the development and implementation of the recommendations in the government's ten-year **Action Plan on Mental Health and Addictions**. At the Commissioner's request, we met with her and her team as the plan was developed, and provided a comprehensive submission on mental health and addictions issues affecting children, youth and families to ensure child and youth rights were incorporated. As part of our expanded mandate in Health, we will provide further input and oversight over services to children and youth, as well as monitoring the implementation of the Plan's recommendations.

- Advocating for improved services for children and youth who are deaf or hard of hearing. In 2014, we began discussions with the Ministry of Education regarding early screening, diagnostic, auditory, language and support services for children who are deaf or hard of hearing. **Saskatchewan Deaf and Hard of Hearing Services** sought our assistance to address some longstanding gaps in provincially funded services.

Through systemic advocacy, our office is able to influence **larger scale change and improvements to government services**



In 2015, we will continue to advocate for an improved selection of timely and accessible diagnostic, sign and spoken language services that better supports the inclusion of deaf and hard-of-hearing children and their families in Saskatchewan childcare homes and centres, schools and communities.

- Supporting and monitoring the implementation of the **Action Plan to Address Bullying and Cyberbullying** through the Ministry of Education. Our office has accepted the critical role identified for us in the plan in public education and addressing bullying issues that cannot be resolved at a school level.
- Providing guidance to the Ministry of Justice, Corrections and Policing's **Child Victims in the Criminal Justice System working group**. This working group was created to address concerns our office raised in our 2013 Annual Report, on how the justice system deals with child victims in the court system. We continue to advocate for keeping child victims at the centre of safety planning and providing supports in the justice system for them.
- **Providing review of child- and youth-serving agencies**. In 2014, our office was involved in advocacy regarding the services available to children with disabilities residing in a long-term care facility in Saskatoon, and we recommended several improvements, which were subsequently made.

- **Providing consultation on policy reviews** in the Ministry of Social Services, Ministry of Justice, Corrections and Policing, Ministry of Health, and Ministry of Education. When requested, we provide ministries with extensive consultation and feedback on new and existing policies to ensure that children and youth's rights, interests and well-being are incorporated into legislation, policy, programs and practice.

Our office is able to influence larger scale change and improvements to government services through our systemic advocacy. In our ongoing consultative role on policy and programming and our advocacy for the embedding of child and youth rights analysis in decision-making and service delivery, we encourage the government in providing better services for children and youth, and we expect this kind of work to increase as other issues emerge. An important element of our systemic work is the monitoring of government services and decisions surrounding service delivery. We hold the government to a high standard of accountability and through our encouragement, we see improvements to children and youth services as illustrated in the examples above. ◆



The Advocate for Children and Youth conducts investigations into deaths and critical injuries of children and youth who, either individually or with their families, were receiving services from government ministries or agencies.

Investigations: a closer look at child deaths and critical injuries

When we are notified of a death or injury, we immediately provide advocacy services if required. We also assess every case to determine factual findings and identify trends requiring further investigation or advocacy from our office. When undertaking investigations, we issue formal recommendations for change and advise the ministry or agency involved. We engage the relevant ministries and agencies to advocate for improvements needed to services, and closely track the recommendations we make to ensure they are put into practice.



In 2014, we released public reports on two special investigations: *Two Tragedies: Holding Systems Accountable*, and *Lost in the System: Jake's Story*. Summaries of these investigations are included in this section. The full reports are available on our website, www.saskadvocate.ca, under "Publications."

Deaths and Critical Injuries in 2014

The paramount purpose of our investigations of child and youth deaths is to act as a voice for those who can no longer speak for themselves and to work towards preventing similar deaths. The analysis related to these investigations is critical to improving outcomes for children and youth in care and receiving government services. In 2014, our office received 23 child death notifications, compared to 26 notifications in 2013. Of these, more than half were children aged five and under. Young children are highly affected by their early environments, including their families, which is why we are advocating that the Government of Saskatchewan develop and resource a comprehensive early childhood development strategy to address shortcomings in these environments which put young children at risk.

Also in this year, our office received 41 critical injury notifications from the Ministry of Social Services and the Ministry of Justice, Corrections and Policing, compared to 34 notices in 2013. Of these, 44% were categorized as suicide attempts or self-harming injuries and 33% were injuries of assault, including stabbings and sexual assault. Of the 41 critical injuries reported to our office in 2014, 38 were of youth aged 11 and over, and all but two of these youth were receiving services from the Ministry of Justice, Corrections and Policing at the time the injuries occurred.

Notably, suicide and self-harm continues to remain persistent themes that carry over from 2013. Of the total number of critical injuries, four were youth who had incurred more than one critical injury and all four of those youth had attempted suicide at least once.

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12. Information reported as to the cause of death is determined from the Coroner's Reports, which are pending for a number of 2014 deaths. Until the Coroner's Reports are received these deaths are categorized as "cause not available yet." This is to be distinguished from the category of "undetermined", which is used by the Coroner where the cause of death has been reviewed by the Coroner but cannot be determined.

2014 Child Death Data

Gender	Deaths	Total: 23
Male	14	
Female	9	
Ethnicity	Deaths	Total: 23
Aboriginal	12	
Non-Aboriginal	2	
Unknown	9	
Age	Deaths	Total: 23
0 to 5	12	
6 to 10	4	
11 to 15	3	
16 to 18	4	
19+	0	

2014 Critical Injury Data

Sex	Injuries	Total: 41
Male	24	
Female	17	
Ethnicity	Injuries	Total: 41
Aboriginal	18	
Non-Aboriginal	2	
Unknown	21	
Age	Injuries	Total: 41
0 to 5	2	
6 to 10	1	
11 to 15	9	
16 to 18	26	
19+	3	

2014 Child Deaths: Identified Causes

Cause	Male	Female	Total
Cause not available yet ¹²	5	1	6
Undetermined	2	0	2
Suicide	1	2	3
Medically Fragile	1	2	3
Homicide	1	0	1
Sudden Infant Death Syndrome*	0	0	0
Sudden Unexpected Death In Infancy*	0	0	0
Motor Vehicle Accident	0	1	1
Hit By Motor Vehicle	0	0	0
Fire	2	0	2
Illness	2	3	5
Total	14	9	23

2014 Critical Injuries: Identified Causes

Cause	Male	Female	Total
Suicide Attempt	8	8	16
Self Harm - Cutting	0	2	2
Motor Vehicle Accident	1	0	1
Hit by Motor Vehicle	0	1	1
Accidental Drug/Alcohol Overdose	2	2	4
Stabbing	3	0	3
Physical Assault	7	2	9
Sexual Assault	0	1	1
Burn	1	1	2
Fall	1	0	1
Undetermined (Suspected Non-Accidental and/or Child Abuse)	1	0	1
Shooting	0	0	0
Administration of CPR	0	0	0
Total	24	17	41

*The Coroner no longer uses these classifications, so they will not appear in future annual reports.



When notified of an injury or death, we assess every incident to determine if further investigation or advocacy is needed

Updated: Causes for 2013 deaths

When we released our 2013 Annual Report in May of 2014, we did not have data from the Coroner on the cause of 10 of the 26 deaths that took place in 2013: six males and four females. This information is now available. Four of these deaths were undetermined (one male and three females); three were due to illness (all males); one female died from a motor vehicle accident; one male from co-sleeping (asphyxiation); and one male from a fall.

Our office remains deeply concerned about the trends in suicide and self-harm, and will continue to closely assess and evaluate the delivery of services to youth in the youth justice system, to ensure that the Ministry of Justice, Corrections and Policing, is adhering to its policies. These policies include completing risk assessments and community safety plans for

We are concerned about suicide and self-harm trends, and will continue to monitor that services provided in the youth justice system comply with policy

youth, and maintaining contact standards, to ensure that youth who are in custodial facilities and in the community are receiving the standard of services to which they are entitled.

We will also be monitoring the development of the

province's *Mental Health and Addictions Plan* as it pertains to mental health and addictions services available to children and youth, with particular attention to the province's response to self-harming and suicidal behaviour. The Action Plan states that suicide prevention efforts need to focus on youth, as suicide is the second leading cause of death for young people in Canada.

The Action Plan noted that addictions and mental health issues, particularly self-harm and suicide attempts are prevalent for people in correctional facilities, and it is difficult to respond adequately as these facilities are not therapeutic environments.¹³ This is one of the reasons why we are deeply concerned with the planned closures of open custody programs such as Yarrow Youth Farm and Orcadia Youth Residence, which are able to provide more therapeutic environments needed to address suicide-related behaviours than facilities designed for secure custody (also known as "closed custody"), such as Kilburn Hall Youth Centre.

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13. Government of Saskatchewan. Working Together for Change: A 10 Year Mental Health and Addictions Action Plan for Saskatchewan, December 2014, p. 31. Available at: <http://www.saskatchewan.ca/live/health-and-healthy-living/manage-your-health-needs/support-programs-and-services/mental-health-and-addictions-support-services/mental-health-and-addictions-action-plan>

Special Investigations Report Summary—Two Tragedies: Holding Systems Accountable

The Advocate released the special investigation report *Two Tragedies: Holding Systems Accountable* in May 2014. In this special investigation, the Advocate examined services provided by the Ministry of Social Services to six-year old "Sam" and his family. Sam died in a rural community in August 2013, as a result of blunt force trauma. The RCMP determined the primary suspect to be another child, 10-year old "Derek." Under the *Youth Criminal Justice Act*, a child under 12 suspected of a crime is deemed to be in need of protection.

Sam and his family had been receiving support from the Ministry of Social Services and his school to address his identified needs. He was taken into care by the Ministry in June 2013 after his mother experienced a mental health crisis. The Advocate found that more timely and accessible services should have been acquired for Sam's mother as well as all options explored to keep Sam within the family unit. The Advocate also found that policy was not complied with in investigations, risk assessments, and assessment and case plans for both the family and Sam after his foster care placement.

At the time of the incident, Derek and his family were receiving services from Yorkton Tribal Council Child and Family Services Inc. Investigators also reviewed the structures of oversight and accountability for services provided by the First Nation agency.

The Advocate found significant gaps in services provided to Derek and his family by Yorkton Tribal Council Child and Family Services Inc. Derek has complex needs and had been recently diagnosed with Fetal Alcohol Syndrome. A Safety Assessment completed by the agency in April 2013 determined that Derek should not have been unsupervised in his community as he was on the evening that Sam passed away. The RCMP and his school had reported serious concerns to the Agency on several occasions about Derek's needs; however, these were not adequately assessed by the agency. The Advocate concluded that Sam, Derek, and their families faced significant challenges, and

would have benefitted from better access to prevention and early intervention services.

The Advocate made 18 recommendations, all of which were accepted by the Government of Saskatchewan, Ministry of Social Services, Yorkton Tribal Council Child and Family Services Inc., Ministry of Health, Regina Qu'Appelle Health Region, and regional health authorities. The majority of the recommendations were directed to the Ministry of Social Services to amend policies and practices to achieve higher standards in the following: caseload sizes, case conferences, family visits, reviews of First Nations Child and Family Services agencies, and evaluating the quality of case practice.

One recommendation included reporting on the progress of implementing the recommendations every quarter for a year after the release of the report. In the October 2014 Throne Speech, the Government of Saskatchewan took a major step towards implementation of one recommendation by announcing its intention to develop a poverty reduction strategy.

Yorkton Tribal Council Child and Family Services Inc. accepted two recommendations directing the agency to fully develop and implement its information database system, as well as develop policy to facilitate the working relationship between the prevention and protection programs. The Ministry of Social Services and Yorkton Tribal Council Child and Family Services Inc. agreed to implement key procedures to ensure high quality casework in child protection, to develop protocols that are outstanding in their Agreement, and, to provide progress reports to the Advocate every three months for a period of one year.

One recommendation directed to both the Ministry of Social Services and the Ministry of Health requires joint critical incident reviews for children and youth served by both ministries. Another recommendation requests that the Ministry of Social Services, Ministry of Health, and regional health authorities expand outreach and intervention programs for children with FASD. There is a major gap in outreach and support services for children with FASD, especially in remote and rural communities.

It has been nearly a year since our office released *Two Tragedies*. Since the time of investigation, our office has noted a dedication by the government ministries and the Yorkton Tribal

Council Child and Family Services Inc. to fully implement the recommendations in a timely manner. Our office has taken additional steps to monitor the outcome of our public investigation. Continued dialogue has fostered stronger relationships between our office and the service providers. We commend the efforts of both the Ministry of Social Services and Yorkton Tribal Council Child and Family Services Inc. in their commitment to work collaboratively at addressing the areas of improvement and turning a tragedy into a new beginning in terms of servicing for children and youth out of this region. ♦



Making Recommendations to advocate for and monitor change

One way the Advocate's office creates and monitors change is through the recommendations we make from our investigations. In the final step of any investigation, whether or not it is publicly released, we develop recommendations based on our findings that are either government-wide or directed towards a specific ministry, agency or service provider. These

recommendations are intended to improve service delivery to children and youth through specific changes or modifications to public policies and/or services.

Our office monitors these recommendations to hold ministries and agencies accountable by regularly engaging with government

stakeholders to discuss changes being made. Our office assesses whether our recommendations have been fully implemented by examining if adequate action has been taken by the government, agency or publicly-funded health entity in response to the recommendation. The

recommendations have broader themed areas and their scope may be government-wide, or directed at specific ministries. Some of the current recommendation themes include: more fully implementing the *Saskatchewan Children and Youth First Principles*; upholding children and youth's rights to participate in decisions that affect them; recommendations on the *Child and Family Agenda* and the 2010 *Saskatchewan Child Welfare Review*; improvements for training and development; and service integration.

We have also made recommendations that address more specialized support services for issues such as mental illness, suicide prevention and responses, and FASD; as well as more services for First Nations children, youth and their families. The recommendations specific to the Ministry of Social Services, include: recommendations on legislative changes; child protection; standardizing caseloads and case management; foster care (including overcrowding and multiple moves); adoption; services for 16 and 17 year olds; and transitioning from foster care to adulthood. A long standing recommendation that our office has with the Ministry is to license all foster homes, which we reiterated to government in our submission to the legislative review of *The Child and Family Services Act*.

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Our office makes formal recommendations to government to improve service delivery to children and youth, **and monitors their implementation**

Convention Rights upheld by investigations into deaths and injuries

The United Nations *Convention on the Rights of the Child* states that children and youth have the right to survival and development (Article 6); the right to be protected from all forms of violence and free from physical, mental, and sexual harm (Article 19); the right to care and protection if adopted or in foster care (Article 21); the right to medical care and to the best health possible (Article 24); the right to protection from dangerous drugs (Article 33); the right to be

protected from sexual abuse and exploitation (Article 34); and the right to help if injured, neglected, or badly treated (Article 39). Youth in custody are to be treated with humanity and respect, and in a manner which takes their needs into account (Article 37).

By investigating critical injuries and deaths, making recommendations for changes, and speaking out on situations that put children and youth at risk of harm, the Advocate for Children and Youth works to prevent and reduce injuries and deaths among our most vulnerable citizens. ◆

Special Investigation Report Summary — Lost in the System: Jake’s Story

In September 2014, the Advocate released his report *Lost in the System: Jake’s Story*, which chronicled the life of a two year old First Nations child who died in foster care in 2009. Although the cause and manner of Jake’s death could not be determined by the Coroner, the Advocate’s report sheds light on Jake’s circumstances, specifically his time in out-of-home care while in the care of the Ministry of Social Services.

At five months of age, Jake entered foster care. Following his apprehension from his family, he moved 11 times in the next 10 months. On his eleventh move, Jake was placed in a high-capacity emergency foster home with his brother and 10 to 12 other children under five. This home did not meet Ministry policy, as it exceeded the limits of both foster homes (maximum of four foster children) and group homes (maximum of 10 children).

The Advocate found these constant moves were detrimental to Jake, and likely impeded his chances to form nurturing relationships with his caregivers. This situation was compounded by the lack of adequate case planning required to address Jake’s developmental needs. Despite the concerns about his development having been raised numerous times by several health professionals and one of his foster parents, at the time of Jake’s death his developmental needs were not assessed. Jake was slow to hit developmental milestones like crawling and walking, and his language development was delayed, as he never learned to talk.

The Advocate recognizes that significant changes have been undertaken by the Ministry of Social Services in the years since Jake passed away. Prior to the release of *Lost in the System*, changes also were made as a result of the recommendations put forth in the joint child death review completed by Sturgeon Lake Child and Family Services Inc., and Ministry of Social Services on Jake’s death.

The Advocate made seven recommendations to improve the capacity of the child welfare system to provide quality services to Saskatchewan’s children and youth. Some of the areas targeted for improvement include: a comprehensive examination, and better tracking capabilities of the moves children and youth experience in out-

of-home care; higher standards prior to establishing resources falling outside of policy; to review all resources to ensure they are operating according to policy, as well as “Maximum Number of Children in a Foster Home” and “Foster Home Review” policies; higher standards for conducting investigations in foster homes; and that *The Child and Family Services Act* or its regulations be amended to require that foster homes be licensed. (More information on licensing is found on page 35).

The Advocate is monitoring these recommendations to ensure these service delivery impacts achieve greater compliance with the United Nations *Convention on the Rights of the Child*, and the *Saskatchewan Children and Youth First Principles*. Jake’s story holds lessons for us all to renew our efforts and determination to provide high quality services to the province’s most vulnerable citizens. ◆



In 2014, we made 30 new recommendations, 29 of which were part of public reports in the 2013 Annual Report and the two special investigation reports released, and closed 26 recommendations. We currently have 76 active recommendations that we will continue to monitor through regular discussions with

government and assessing actions towards implementation. In 2015, we will be reviewing our recommendations when the new child welfare legislation is unveiled to see if there are any that can be closed in light of changes in the new legislation that align with the corresponding

recommendation. Where recommendations cannot be closed, we will follow up and advocate for further action to implement them.

When she was 14, Tanis was hospitalized due to an alcohol and drug overdose. By 15, she was involved in the youth criminal justice system. While under community supervision, she made cuts on her wrists, and was admitted to the hospital for a brief time. Around the same time, Tanis became pregnant, and later was admitted to the hospital to have her baby.

While she was pregnant, the Ministry of Social Services conducted a child protection investigation after receiving a report alleging Tanis's boyfriend had assaulted her. The Ministry provided support services and closed the file two months prior to her death. The services from the Ministry of Justice, Corrections and Policing had also concluded two months before her death.

After her death, the Ministry of Social Services conducted a thorough review of services, making five of their own recommendations to improve policy and case practice. Their review found that the health region had not made a referral to the Ministry of Social Services at the time Tanis gave birth to her baby. Corresponding with this finding, the fifth recommendation requested that the Ministry of Social Services continue efforts to work in collaboration with the Prince Albert Parkland Health Region to develop and implement a referral system to the Ministry of Social Services for pregnant women who are engaging in high risk behaviours, to ensure assessments can be done to ensure these children will be safe and protected when born.

The Advocate was notified about Tanis's death, and upon assessment it was determined that a more detailed investigation was required. It was imperative to determine what processes were in place to report cases to the Ministry of Social Services, what steps were taken to coordinate services with other child-serving ministries, and what occurred when Tanis gave birth to her daughter.

The Investigation Process

The investigation consisted of a review of file information from the Prince Albert Parkland Health Region, Office of the Chief Coroner, Ministry of Social Services, and Ministry of Justice, Corrections and Policing. We conducted interviews with staff from the Prince Albert Parkland Health Region and the Ministry of Social Services.

During the investigation, our office learned that the health region had been instructed by the Ministry of Social Services to report every mother

When a health region implemented the recommendations the Advocate made in a child death investigation, **it improved their services for other children and youth**

Case Study: Implementing recommendations leads to improved services for children in Prince Albert Parkland Health Region

Not all investigations are publicly released and many times, the hard work in implementing recommendations is carried out in the background. In 2014, the findings and recommendations from one of our investigations resulted in significant program changes improving services to children and youth in Prince Albert. We wish to highlight the excellent work the health region has done in response to our recommendations in the following case study.

Background

Sixteen year old "Tanis" died several years ago as a result of blunt force trauma to the head and neck. The manner of death was listed as homicide. The toxicology results revealed that Tanis's blood alcohol was over two times the legal limit.

Tanis's family had been involved with the Ministry of Social Services prior to Tanis's birth, due to her mother's mental health issues and difficulty coping with Tanis's older siblings. Tanis was placed in foster care on two occasions as a baby, and again when she was seven years old.



who used substances during her pregnancy, but that there was no written protocol in place for referrals. It was also determined that Tanis had come into contact with the health system several times both before and during her pregnancy where she appeared vulnerable, and that these contacts warranted reporting to the Ministry of Social Services. When in the hospital to have her baby Tanis was extremely vulnerable, due to her age, mental health, disclosed substance misuse early in pregnancy, lack of prenatal care, and ongoing domestic violence. Yet the hospital did not make a referral to the Ministry of Social Services. In such cases, we are not necessarily advocating that the child be apprehended; rather that service providers take a more holistic and prudent approach, with targeted supports to assist mothers to reach healthy goals for themselves and their babies.

The Prince Albert Parkland Health Region also recognized the shortcomings of relying too much on apprehending children, and a lack of coordination between several service sectors to provide the interventions necessary to support mothers to safely care for their children. The health region had already initiated planning with the Ministry of Social Services in Prince Albert and other community stakeholders to develop and implement a new model to reduce the risks to substance misusing mothers and their infants when the Advocate notified it of its intent to investigate the services provided prior to Tanis's death.

Our office made five recommendations to Prince Albert Parkland Health Region, all of which the region accepted:

Recommendation 1: That the Prince Albert Parkland Health Region establish policy and procedures for reporting child abuse and neglect concerns under *The Child and Family Services Act* and the Provincial Child Abuse Protocol.

Recommendation 2: That the Prince Albert Parkland Health Region implement ongoing training to all staff regarding their legal obligations and duty to report child protection concerns as directed in the new policy.

Recommendation 3: That the Prince Albert Parkland Health Region establish policy and procedures on client care that include a clear articulation of role definition, authority, application and scope, and oversight responsibilities for all hospital departments to better coordinate patient services.

Recommendation 4: That the Prince Albert Health Region adopt best practice regarding a standardized discharge process for high-risk substance-using mothers. Staff involved in discharge planning should be trained on interviewing and identifying appropriate referrals based on the information gathered. The quality of services for this client group should be reviewed with the completion of exit interviews as a means of outcome measurement.

Recommendation 5: That the Prince Albert Parkland Health Region implement the consensus-based planning and discharge model for substance-abusing mothers as best practice throughout the health region to increase success in maintaining the integrity of the family unit.

In December 2014, Prince Albert Parkland Health Region provided the Advocate with a progress report to describe their actions on each recommendation. Through a rigorous analysis and follow-up conversations with the region, our office was able to close all five recommendations due to a satisfactory improvement in the health region's services to children and youth. Prince Albert Parkland Health Region is providing integrated case management for all patients through a culturally sensitive and holistic approach, which is supported by adequate training and policy.

Recommendations and subsequent actions

This case study is a demonstration of the process our office undertakes when developing our recommendations, and more importantly, tracking the recommendations made by the Advocate. In this case, we followed up with the health region at mutually agreed intervals to determine the progress being made. Through this process, the Advocate was able to work together with the health region to make the needed changes to keep children and youth safe and protected, and promote their rights, interests and well-being, to which they are entitled under the *Convention on the Rights of the Child*. ◆



Advocating for Transformation

Saskatchewan is in the midst of a revision of the child welfare system, following the independent Child Welfare Review conducted in 2010, and the current legislative revision of *The Child and Family Services Act*, which has governed child welfare in the province since 1989.

Family Support Services and Out-of-Home Care

A great deal of the advocacy and investigations work done by the Advocate for Children and Youth involves children, youth and families receiving services from the Ministry of Social Services under *The Child and Family Services Act*. The Advocate monitors the child welfare system, both services provided by the Ministry

of Social Services, and those provided by delegated First Nations Child and Family Service agencies, to ensure that children and youth receive the high quality services to which they are entitled.

Under the current legislation, families receive support services to improve their capacity to nurture their children and keep them safe. The *Act* provides the mandate to investigate reports of child abuse or neglect, and it encourages that services be provided to families in such a way so that children can remain safely in their homes whenever possible. When families are deemed unable to care for their children or there is a surrender of parental rights, they enter the foster care system. The focus of the current legislation is primarily on child protection.

Despite many service delivery changes occurring over the years, much improvement is needed. The *Child Welfare Review* and the current legislation revision can pave the way to really change the face of child welfare in our province. The opportunity for transformation is present.

Greater awareness of the Child Abuse Protocol 2014 needed

In the fall of 2014, the Saskatchewan government released its revised Child Abuse Protocol. The province reviewed the existing protocol to shorten it and make it easier to understand. The purpose of the protocol is to inform the public and child- and youth-service providers of their personal duty to report suspected abuse or neglect as required by *The Child and Family Services Act*. The protocol also creates the framework for reporting and investigating child abuse and the responsibilities of various agencies such as the schools, police, medical professionals, and government ministries.

According to the government's announcement, changes to the Saskatchewan Child Abuse Protocol will "enhance the province's co-ordinated and integrated approach to child abuse investigations, while clarifying



responsibilities for protecting children.” We commend the government for updating this protocol. Our office reviewed the protocol to ensure that the child and youth rights lens was applied.

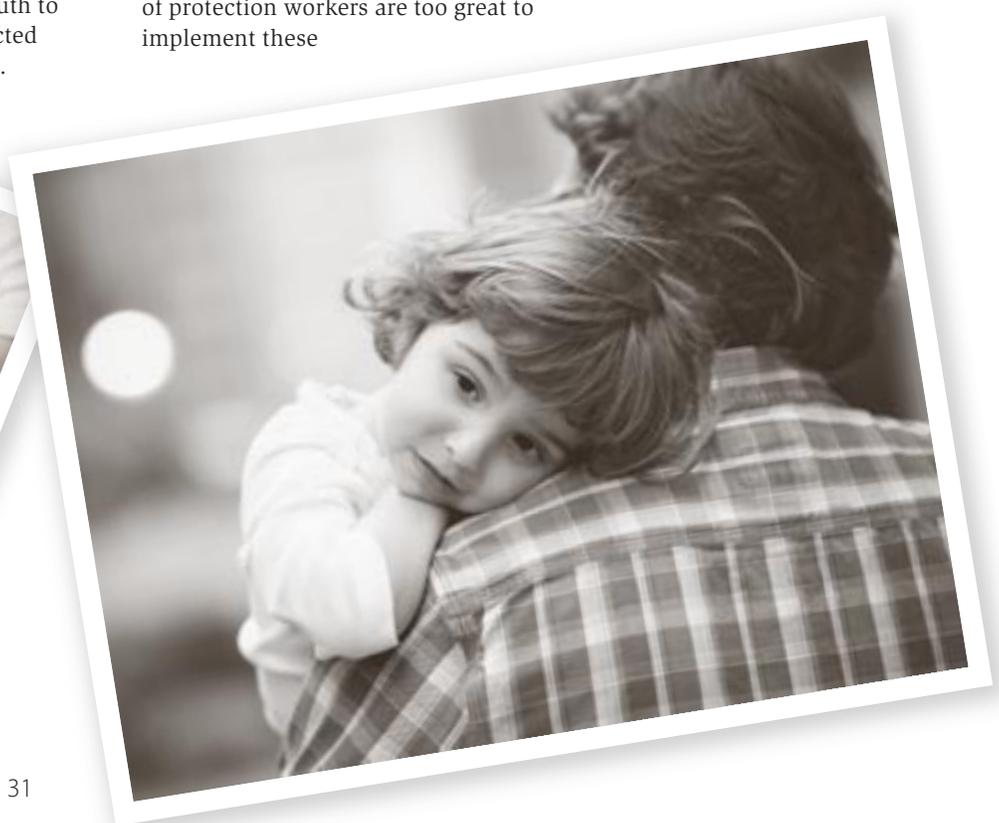
Although it is easier to understand how and when to report suspected child abuse in the Child Abuse Protocol 2014, our experiences demonstrate that there still is limited understanding by the public and professionals in the child- and youth-serving sectors of the duty to report and when someone is required to report. People do not always understand that it is not the responsibility of the individual to substantiate the abuse. The duty is simple—people must report when they have concerns about abuse or neglect, which includes suspicions.

The public has a need to know about this protocol and the duty to report, as do government ministries, police, and other organizations working with children and youth. Further public education and training of staff working with children and youth is needed province-wide. We conveyed the need for greater training when providing feedback during the revision process and it is our expectation that the Child Abuse Protocol 2014 will be publicized more widely, so that individuals understand and act on their responsibility to report suspected abuse or neglect, which protects the rights of children and youth to be safe and protected from harm.

Quality of Child Protection Investigations, Assessment, and Casework

In 2014, we continued to see in our investigations that assessments and case plans for families, and child assessment and development plans were incomplete, completed with substantive oversights, or not completed at all. We noted issues with a lack of proper assessment, lack of documentation, lack of compliance with case plans, lack of timely services, lack of the correct services to address the risk, lack of contact with the client, and lack of investigative questioning that renders an appropriate response to ensure the safety and protection of children. These issues were also highlighted in calls to our office, which demonstrated that case practice continues to be a significant concern.

Our office remains concerned with the quality of child protection investigations and assessments carried out by the Ministry of Social Services. In 2012, the Ministry introduced the Structured Decision-Making (SDM®) system for child protection services, which are evidence-based tools for risk assessment in child protection. While these tools are an improvement, as we noted in last year’s Annual Report, we have concerns that the required training and quality assurance and resources to implement SDM® effectively are not in place, and high workloads of protection workers are too great to implement these



tools effectively. Although the Ministry of Social Services has done a lot of training with their staff and the First Nations Child and Family Services agencies on SDM,[®] our advocacy and investigations work in 2014 shows that training still needs to be increased, with the goal of 100% competency, and ongoing support is required to

assist in the use of the tool in daily case management. The Ministry of Social Services has reported that in 2015 additional training will be conducted on how to effectively use this risk assessment tool. We will continue to monitor this situation.

Our office would like to see the Ministry increase staff efficiency in use of the SDM[®] tool and eventually movement towards mastery by all of its users as we have formally recommended. We see that measuring competency in the SDM[®]'s use is an essential component of introducing a new risk assessment tool.

Our office has an outstanding recommendation from the 2014 special investigation report *Two Tragedies: Holding Systems Accountable*, that the Ministry of Social Services and Yorkton Tribal Council Child and Family Services Inc. ensure high quality child protection work

by implementing processes to formally measure staff competence in the use of SDM,[®] competence in supervision, and a supervision tool to assess whether casework policy standards are being met. While some progress has been made in this regard, we continue to be concerned that without clear and systematic monitoring and mentorship for the use of the tool, shortcomings and errors in the use of SDM[®] will continue to be an issue, which carries the risk of placing children and youth at further risk for harm.

When child protection workers are not able to consistently use the SDM[®] tools to properly assess the level of risk to a child, and identify and coordinate the services families need to address these risks, then children can be left in unsafe situations. In some cases children are being returned from care to homes where little has changed, as families have not received the services required to address the risks.

When properly used, SDM[®] assesses the level of risk and identifies the level of services a family requires. The SDM ultimately informs case planning. If the SDM[®] is not properly utilized, this has the potential of creating service gaps and depriving families of the services required to reduce their level of risk. Lack of case planning and inadequate case management puts children and youth at risk, and violates their rights under the United Nations *Convention on the Rights of the Child*.

The SDM[®] tools alone do not ensure high quality child protection work; this hinges on staff competence in use of these tools and consistent case documentation. In our experience, workers need more training, mentorship, strong supervisor oversight, and enough time to use these tools as they were intended to measure and address risk factors for children. In 2015, our office will continue to assess and evaluate the Ministry's use of SDM[®] and case management, particularly in the area of staff competencies in using the SDM[®] tools through our recommendations and in advocacy.

Overcrowding in Foster Homes

The table on the next page shows the number of children and youth in care in 2014, as well as numbers of children and youth in homes with more than four foster children living in them according to the Ministry of Social Services.

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The SDM[®] tools alone do not ensure high quality child protection work; **this hinges on staff competence in their use**



CASE STUDY: Poor assessment puts children in foster homes at risk

It bears noting that our concerns relate not only to children and youth being returned to their families but also the quality of foster home investigations, including the use of a structured risk assessment tool.

One example of a call we received in 2014 that illustrates the gravity of this issue for vulnerable children was from an individual who was concerned that a foster parent might be inappropriately disciplining the children and not taking care of their health needs. Further, there were concerns that the adult children of this foster parent were misusing substances and having unsafe adults in the home. We learned that while Ministry of Social Services' staff had been clear on the child protection concerns brought to their attention, they did not gather the relevant information needed to complete a proper assessment of the complaint.

The worker advised that these concerns were investigated, but in further exploration we determined a formal review process was used instead of an investigation. A formal review is a less intrusive way to assess foster home

allegations. We were told verbally that interviews with several parties had been conducted, but this was not captured in the formal review report. The report focused on supporting the foster parent, not the children. Even more troubling was the fact that not all of the concerns that triggered assessment of the home were addressed. As a result, we followed up again with the Ministry about the poor quality of this review, to ensure that the proper steps occurred to assess the safety of the children in this foster home, and address any risks identified.

Currently, formal reviews and investigations of foster homes do not use SDM® tools to assess risk. For consistency and quality assurance, we believe structured risk assessment tools should be used when serious concerns are raised regarding a foster parent, as would be done when investigating similar concerns with biological parents.

We have suggested to the Ministry that it use SDM® tools in formal reviews and investigations of foster homes. The Ministry agrees that this is a priority area, and hopes to have appropriate risk assessment tools and processes in place by July 2015. We will continue to monitor this situation to ensure that children are safe. ♦

Child and Family Services System in Saskatchewan

	2010	2011	2012	2013	2014
Children in out-of-home care¹ (Provincial System)	4754	4649	4557	4492	4596
Children in care ²	3263	3039	2896	2846	2852
Non-wards ³	1491	1610	1661	1646	1744
Children and Youth in care⁴ (First Nations System)	1176	1139	1123	1117	1,169
Foster Homes⁵ (Provincial System)	691	626	623	584	551
Overcrowded Homes	79	77	63	48	59
Children living in overcrowded homes ⁶	483	457	370	282	338

Below: One of the awards given out by the Saskatchewan Youth in Care and Custody Network at the Child and Youth in Care Week, held for the first time in July 2014.



Source: Saskatchewan Ministry of Social Services and Aboriginal Affairs and Northern Development Canada

1 – This number includes all children who are placed in out-of-home care and are involved with the Ministry and children who were apprehended by the Ministry off-reserve and placed on-reserve. Placements for these children include: foster homes, group homes, assessment and stabilization centres, or with extended family as of December 31 of each year.

2 – This number includes wards and those children with apprehended status.

3 – This number includes children/youth who are placed by court order in the custody of a designated Person of Sufficient Interest caregiver.

4 – As of March 31 of each year. This number includes children and youth in foster care and non-wards (children living with a Person of Sufficient Interest caregiver).

5 – Approved Providers – include Regular Foster Care, Therapeutic Foster Care, Parent Therapist, or both Regular and Therapeutic Foster Care.

6 – Children refers to children in care.

Apprehended Status – a child who is in need of protection and at risk of incurring serious harm and has been removed from a parent to a place of safety.

According to Ministry policy, the maximum number of foster children placed in a foster home is not to exceed four except in certain circumstances, such as keeping siblings together or keeping children in the same foster home for continuity. Best practices show that these homes require additional support services, such as in-

Overcrowded foster homes put children at greater risk of critical injuries and, in the worst case, deaths

home family support workers or increased respite care, to help care for these children safely. The Ministry is able to arrange these kinds of services.

It is very important to match the needs of foster children to the capacity of foster parents; in some

cases four foster children may be too many children in a home and this assessment must be continually considered on a case by case basis.

Although the Ministry does need to take into consideration the total number of children living in a foster home, there is no cap on the total number of children, only on the number of foster children. Foster homes could also have biological children, adopted children, children in

Alternative Care arrangements, and/or children on Person of Sufficient Interest placements residing in them.

As the table shows, after a decrease in 2013, there has been a significant increase in the number of foster children living in overcrowded homes, which our past death and critical injury investigations has demonstrated creates an increased risk to children and youth residing in these overcrowded

conditions. In past years, our office's investigations have shown the inherent risk associated with overcrowding in foster homes including the increased risk of children incurring critical injuries and in the worst case, child deaths occurring.

Our office's goal is that children and youth are receiving the highest standard of care while they are in the custody of the government. Often children and youth who are coming into care have complex trauma and may also have behavioural, emotional, and physical developmental needs. Children placed in care, particularly those aged 0-3, are our most vulnerable citizens and are owed a duty of care by the Ministry of Social Services to receive the care and services that will assist in their growth and development. A key component in the overcrowding issue is the need for the Ministry to have a comprehensive foster parent recruitment and retention strategy to address the lack of residential resources.

Finding appropriate care for children with high medical needs

We continue to see cases where we question the appropriateness of some foster care placements for children with high medical needs, and lack of support to foster families to care for these children. Family-based care for children with high medical needs is ideal, yet it is difficult to find foster parents who are able to provide the level of care required to meet the child's medical needs. As a result of a lack of suitable foster homes, children are being placed in institutions designed for adults.

Children with complex medical needs have a right to the highest standard of health and access to medical care according to Article 24 of the *Convention on the Rights of the Child*. Our advocacy work has shown that children placed in institutions designed for adults and geriatric care is deficient in meeting their needs. Our office has worked diligently to improve the circumstances for children placed in long-term care in adult institutions. Our ongoing advocacy has contributed to improvements, and we commend the Ministry of Social Services for supporting these, which include better programming and contracting additional staffing resources. Concurrently, we also advocated for the government to increase the number of residential care homes that are capable of providing the level of service required for children with complex medical needs.

Hope's Home is a model of care that is child-centered and was developed with the needs of

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Licensing Foster Homes

Over the last six years and a number of reports, our office has called on the province to update provincial legislation and regulations to create greater accountability in the foster care system through licensing. Licensing foster homes ensures that the highest standard and quality of residential foster care is in place, which ultimately serves the best interests of children and youth.

Licensing requires the establishment of a set of clearly understood, widely respected and vigorously enforced rules and regulations that are embedded in law, not policy, and ensure three basic things: that foster children receive quality care that nurtures their health, safety and well-being; that foster parents are properly trained and supported and not overwhelmed; and that foster homes are properly equipped with the facilities, tools, and training for foster parents to provide the highest standard of out-of-home care.

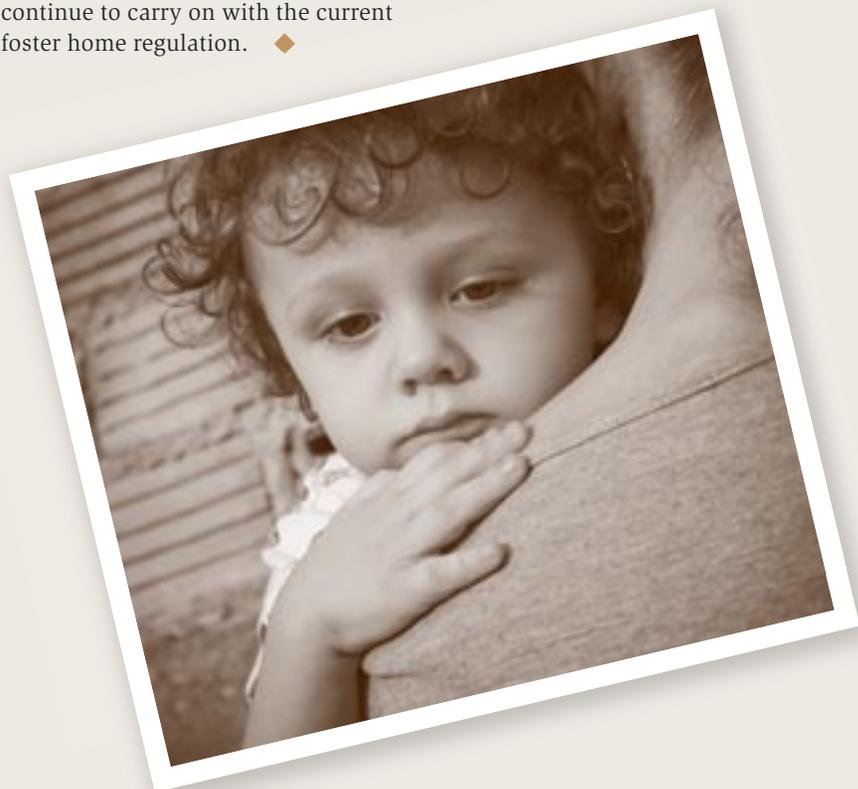
Licensing includes standards regarding appropriate physical accommodations and the maximum number of children to be placed in each type of licensed home. To be successful, such licensing also requires a regular monitoring process and a culture of compliance. The regulatory nature of licensing promotes compliance with Ministry standards and discourages digressions from practice standards without vigorous oversight and planning. Licensing promotes the safety of children and youth in care and fulfills the Ministry's duty of care to foster children. Given that child welfare services are provided both by the Ministry of Social Services and First Nations Child and Family Services agencies, the Ministry is obligated to develop these standards collaboratively with First Nations agencies.

Not unlike licensed childcare homes and centres, restrictions on the number of children based on their age and level of need must be a core component of the licensing of foster homes. As we mentioned earlier, the higher the number of children in one person's care and the larger the group of children increases the number of well-documented health and safety risks. These include greater risks to a child's safety; a reduced ability to evacuate in an emergency; increased rates of infection and injuries; increased stress on the caregiver; and a diminished capacity to

provide for the emotional and other developmental needs of each child.

Under the current system, standards of care for foster homes, foster parent screening and approval, and training are up to the Ministry of Social Services to establish in policy. There is no law to enforce regulatory compliance or meaningful sanctions or consequences when policies are breached. Our experience conducting investigations on critical injuries and deaths shows that the current policies are too often not being met, resulting in direct harm or death of children and youth in foster care. The regulation of foster homes through licensing promotes compliance and is a safeguard for children and youth in care.

As we documented most recently in our special investigation report *Lost in the System: Jake's Story* (2014), the current framework of accountability in Saskatchewan still falls short on all these counts. Although there have been some noteworthy improvements in recent years, far too many Saskatchewan children continue to live in vulnerable circumstances in overcrowded foster homes. Licensing can provide greater accountability for both for the Ministry and for foster families and it is recommended as a best practice by the Child Welfare League of Canada. We anticipate that with the Ministry of Social Service's unveiling of the revised child welfare legislation, there will be an indication of whether the province will move towards licensing or continue to carry on with the current foster home regulation. ♦



Below: Playing together at *Hope's Homes*. Photo by Lindsey Longstaff; courtesy *Hope's Home*



children with complex medical needs and their families in mind. It provides residential care and respite for children with complex medical needs. It also has integrated licensed childcare for these children and their siblings, alongside typically developing children.

There are *Hope's Home* centres in Prince Albert and Regina, with plans to open a home in Saskatoon in April 2015. Funders include the Ministries of Health, Education and Social Services and the Regina Qu'Appelle Health Region.

We encourage the creation of similar models that are truly child-centered and aim to provide comprehensive services to not only children with complex medical needs, but their siblings and caregivers as well. Our experience with children living in *Hope's Home* has demonstrated the value and improvements to quality of life for children living with complex

medical needs. Additionally, foster families can utilize the programming at *Hope's Home* to support their efforts caring for these children.

Another initiative that took place in October 2014 in the Ministry of Social Services's Centre region was the establishment of a Medical Unit to provide a greater level of support for children in care who have high medical needs. Reports from other stakeholders have been positive and indicate that this initiative has been able to make a significant difference in providing and coordinating care for these children. This is a promising model, and if it continues to demonstrate a positive result, we would encourage the Ministry to establish similar units in other regions in the province.

We know that some of these children with complex medical needs have entered foster care because they will have access to more resources than they do living with their families. There will always be a need for foster care placements for children with high medical needs. Accordingly, the Ministry of Social Services must ensure that foster families have the supports they need to provide this care and aim to keep children with high medical needs in residential placements. We see that the Ministry of Social Services together with the Ministry of Health must develop more appropriate residential resources to meet these children's needs, rather than placing them in institutions meant for adults, as these placements are not child-centered and do not adequately meet children's needs. We will continue to advocate both systemically and on a case-by-case basis that children with complex medical needs receive the standard of care to which they are entitled under the *Convention on the Rights of the Child*, and ensure that they are not discriminated against due to their medical needs.

The Power of Participation

As in previous years, the majority of concerns our office received in 2014 were about the quality of case planning and case management for young people in foster care. When we receive concerns, our advocacy team determines if the children and youth are receiving the services to which they are entitled under the *Children and Youth First Principles*, and works to ensure that they are safe and protected. While we are able to resolve many of these issues, it is disheartening that they continue to recur with such frequency, both in

Common case management issues reported include **youth who disagree with case plans, lack of case planning, lack of appropriate services, disagreement with placements, and lack of voice**

our advocacy and investigations work. Notwithstanding the fact that our office continues to be contacted by children and youth who are dissatisfied with their services, the continued frequency of contact demonstrates the importance of our office as an outlet for children and youth as we act as a champion for the inclusion of children and youth voice.

Common case management issues reported to our office include youth who disagree with their case plans, lack of case planning, lack of appropriate services, disagreement with placements, and lack of voice or participation in case plans. Our office is acutely aware of the lack of child and youth engagement in child welfare as these concerns continue to be reported to our office. We encourage the Ministry to strive to engage children and youth in the decision-making process and encourage their participation. Our advocacy is focused on ensuring that children and youth receive the level of services that they are entitled to. We achieve this by making sure that case plans are developed with young people that meet their specific needs and wants, with the intention of decreasing risk for these children and youth.

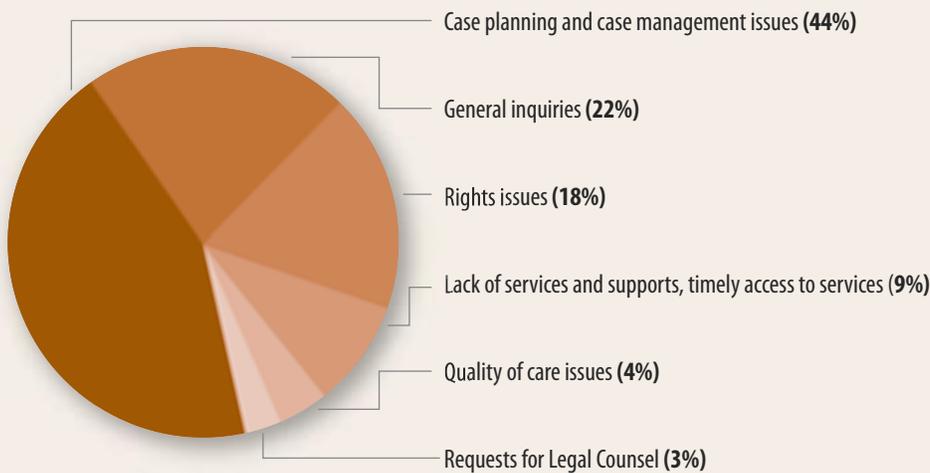
Every year, our team of advocates work steadfastly at continuing to educate service providers on the rights of children and youth and

encourage caseworkers to understand the importance of participation of children and youth in decision-making and taking into account their voice. *The Child and Family Services Act* states that the best interest of the child shall be taken into account when social workers make decisions about young people, which is a rights-based approach and comes from Article 3 of the United Nations *Convention on the Rights of the Child*. Best practices in child welfare ensure that children and youth are able to have ongoing relationships with people that matter to them, have a voice in planning about their lives where possible, and have their cultural, physical, psychological and spiritual needs met.

Many of the children and youth that our office engages with have been marginalized and face many barriers including social, economic, systemic challenges. The experiences of children and youth in care are often compounded by exposure to violence, neglect, abuse, and racism. Empowering young people to advocate for themselves, and educating people that work with children and youth on young people's rights and the need to include children and youth in planning is an important part of our work. Often people need an opportunity to be heard, and to understand why decisions made were made,



Most common issues reported to the Advocate for Children and Youth in 2014



even if they disagree with them. We see time and time again the power of participation and how providing the platform for children and youth to be heard is an impactful experience that encourages self-confidence, healing and healthy development.

There are shortcomings in services to 16 and 17 year olds as they transition out of care

We continue to monitor and track the types of issues that are raised with our office to identify the systemic trends in service delivery and the gaps for children and youth. Lack of participation by the child or youth in their case planning and disagreement with decisions are ongoing concerns raised with our

office and will likely continue to trend as the leading concerns. It is noteworthy that the complaints raised with our office are symptomatic of the larger systemic concerns that our office has with child- and youth-serving governmental service providers.

The recurrence of deficiencies in case management and planning within the Ministries will likely continue so long as our office's recommendations are not implemented. We make recommendations for improvement of

services, policies and practices to improve service delivery through our investigations of critical injuries and deaths. We see that if the Ministries are not implementing those recommendations, children and youth will continue to seek out our advocacy services to address their challenges or barriers and improve their outcomes. When implemented, our recommendations lead to improvements in the quality of service delivery and ultimately to the greater satisfaction of children and youth in care.

Transitioning to adulthood

Past investigations into the programming for 16 and 17 year olds has revealed shortcomings and barriers that youth were experiencing in accessing services to which they were entitled. One such situation in 2014 that came to our attention was a 17-year old youth, "Lewis", whose mother had died. Lewis was taken in by an extended family member, but eventually she found that she needed financial resources to care for him. She approached the First Nations agency in the community and they assisted her with applying for the Child Tax Benefit. When Lewis's family member was no longer able to care for him, he became homeless, couch surfing between homes of friends and relatives. As a result of accumulating difficulties, he also became depressed, and attempted suicide.

Despite these challenges, Lewis kept going to school, and a school staff member took him into their home upon learning that he was homeless. No services or assistance were provided to this caregiver. After Lewis made another suicide attempt, this staff member helped him approach the agency, and were told that that if he found his own place to stay, they would provide him with financial support. Conditions attached to the service were that Lewis attend school and personal counselling. With the assistance of the school staff member, Lewis was able to locate a residence and engage in counselling. The agency provided financial support weeks later.

Several years ago our office investigated the death of another young person receiving services from the Ministry of Social Services who had complex mental health needs and a history of addictions. This youth was living in a room and board arrangement without sufficient supports, and died of an overdose.

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Case Study: Ensuring children take part in planning about their lives and have access to independent legal representation

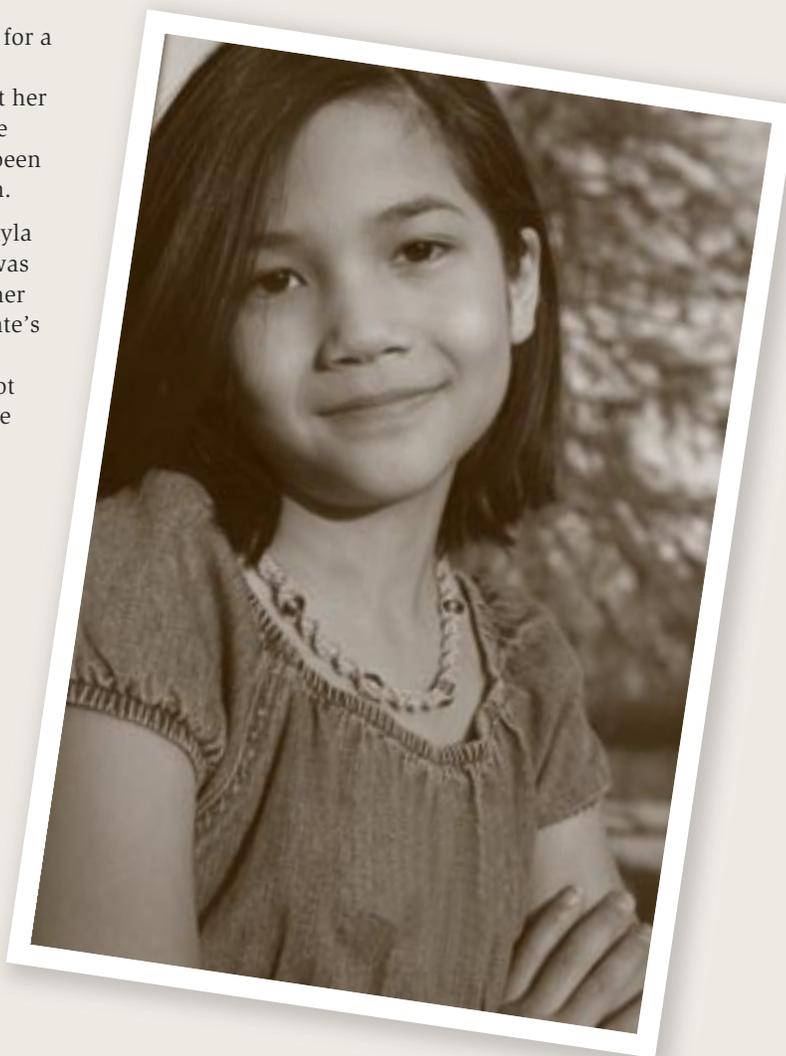
A mother called our office, stating that the Ministry of Social Services wanted to apply for a long term order to keep her nine-year old daughter “Shayla” in care, but reported that her daughter wanted to return home. Due to the length of cumulative time that Shayla had been in care, she was entitled to a long-term plan.

One of the regional advocates met with Shayla and her foster mother. During this visit, it was apparent that Shayla was very attached to her foster mother, and with the regional advocate’s encouragement, Shayla was able to express that, while she loved her mother, she did not want to live with her because it was not safe for her. Instead, Shayla wanted to live with her foster mother. Shayla also asked if someone could take care of her mother, so that she would still be able to visit her.

The regional advocate attended a case conference and presented all of Shayla’s wishes to the Ministry of Social Services worker and supervisor, her parents, and a representative from the First Nations Child and Family Services agency. The foster mother also attended and expressed her commitment to taking care of Shayla long term, also committing to keeping Shayla connected to her First Nations culture.

The Ministry felt that Shayla should be cared for by her foster mother under a Person of Sufficient Interest order, which grants someone legal guardianship of a child. Shayla’s mother disagreed with this plan, which meant that the order would have to be granted by the courts. After receiving a referral from the Ministry of Social Services, the Advocate arranged for Shayla to have an independent legal representative, a lawyer who could ensure that her voice would be heard in the court proceedings.

After many court adjournments, the order was granted to Shayla’s foster mother, allowing for Shayla to remain in her care for the long term.



Shayla’s wishes were met in regards to enrolling in the school she wanted to attend and registering in traditional Powwow dancing. Shayla was very happy when the Ministry staff told her that she was staying with her foster mother. The advocacy work we did with Shayla ensured that her wishes were heard and taken into consideration when planning for her care, both in the case conference and in the courts. ◆

These situations substantiated our deep concerns that 16 and 17 year olds are not receiving the level of services that they are entitled to and they are falling through the gaps in the child welfare system based solely on their age. As a result of this investigation, we began tracking the services available to 16 and 17 year old youth. A common theme that we observe is that the expectations of

Young people leaving care need support with basic life skills, such as obtaining housing and employment, budgeting, and maintaining a household

youth by the Ministry and First Nations agencies exceed their level of maturity and their readiness for independence. This manifests in a 16 and 17 year old program that operates on the basis that youth must “earn” their entitlements by making

adult-decisions and finding their own resources in order to access financial assistance.

We have recommendations that benefit rates be increased to reflect the current cost of living, and that the government lead integrated planning for youth receiving services through the Ministry.

We suggest the use of reliable, evidence-based tools to assess risk, such as Structured Decision Making®, and improving information sharing with other service providers to better meet young people’s needs.

In light of the concerns relating

to the 16 and 17 year old program and the importance of ensuring that all children and youth receive the supports and services to promote their growth and development into adulthood, the Advocate made a formal recommendation that the age of the child as defined in *The Child and Family Service Act* needs to be raised to 18, to align with the age of majority in the province. *The Child Welfare Review* panel’s Recommendation 10 states the need to improve the existing system in areas where there is an urgent need for change. By increasing the age of the child, we view this change as a supporting action under this recommendation. It has been a long standing concern that services are insufficient for meeting the needs of youth transitioning from care to adulthood, and that many youth need more support than is currently available. Other young people have the support of their parents from aged 18 and beyond, yet we are not providing a commensurate level of support to youth who have been in care and are often much more vulnerable. The Ministry of Social Services needs a comprehensive approach to supporting youth transitioning out of the child welfare system and into independence.

Qualitative research that the Ministry commissioned from Prairie Research Associates that was published in 2012 identifies that young people need support with basic life skills, such as obtaining housing and employment, budgeting and maintaining a household. Youth interviewed also had very little information about education and training opportunities. We also would



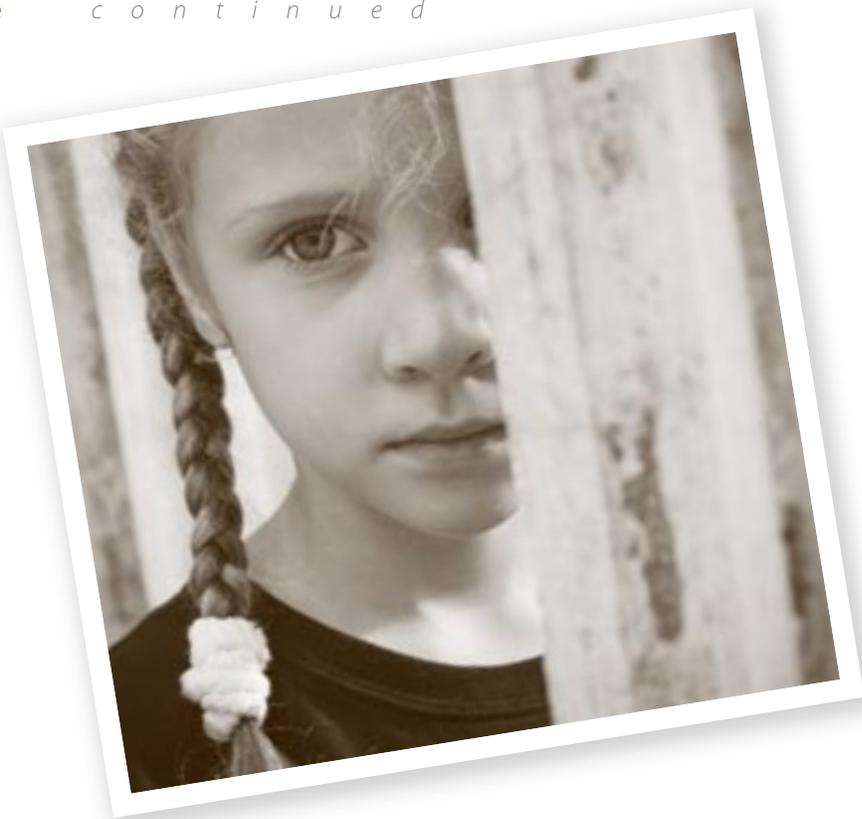
encourage the Ministry of Social Services to support young people who have been involved in the child welfare system with funding for tuition and books, as well as living expenses for those who want to pursue post-secondary education or continue with their educational or vocational learning. A comprehensive transition plan would help ensure that the government is fulfilling its role as parent to young people in the same way as other parents in the province.

In addition to seeking the raising of the age of the child, our office also advocated for all youth receiving services from the Ministry of Social Services to be entitled to services to at least age 21, and preferably to age 24, as we had recommended in 2010. The Saskatchewan Youth in Care and Custody Network (SYICCN) has an integral role to play in supporting young people, and it has advocated for extension of services to age 24. In early 2014, we organized a meeting with SYICCN and the Minister of Social Services at the time, June Draude, so she could hear directly from young people who have been in the child welfare system, and better understand their difficulties in transitioning to adulthood.

It will not be known what changes, if any, for youth aged 16 and older will be implemented by the government until *The Child and Family Services Act* revisions are unveiled. In the interim, in our individual advocacy cases our office continues to press the Ministry to improve supports to young people who are transitioning into adulthood until such time that we can ascertain if continued advocacy is required to ensure that these youth receive an equitable standard of care.

Moving beyond child protection: Greater focus on prevention needed

The *Child Welfare Review* emphasized that providing supports to children and families before issues reach crisis level is beneficial to children, families and society as a whole. Prevention models build in supports and services to families who are low to moderate risk before their risks increase. This approach does not consider apprehension as a method of reducing risk. Rather its strength is in the focus on building, and more often than not re-building families who are facing social and economic



difficulties, issues of mental health and substance misuse as well as trauma recovery.

Prevention models are culturally inclusive and often included a holistic approach to services. The benefits and rewards are high to our community as preventative services result in fewer children coming into care, and families becoming less reliant on government services through the process of addressing their risk areas and a meaningful response to their needs. As we have mentioned throughout this report, we have repeatedly conveyed to the government that we are strongly advocating they shift their focus of the child welfare system to a more preventative one. We recommended that their starting point could be in the process of the legislative renewal to include prevention services in the new legislation.

The provincial government has the opportunity to make a fundamental shift in supporting children, youth and families through a model that focuses on prevention and early intervention, supporting and promoting healthy child development. This transformation of the child welfare system would see movement away from the traditional focus on child protection; a model that does not take child health and well-being into account to the extent needed for a

healthy society. The Ministry's current legislative mandate creates a child welfare system that is primarily reactive and allows for the provision of services once a child is deemed to be in need of protection, and their families have reached crisis, rather than a child welfare system that promotes the healthy development of children in their families.

Increasing the government's focus on prevention and early intervention services for children and youth **will require commitments across government**

Making prevention and early intervention services widely available would be consistent with the first goal of the *Child and Family Agenda*: all children get a good start in life. Moreover, Saskatchewan families would also benefit from the government implementing the first recommendation of the

Child Welfare Review: "to create an easily accessible preventive family support stream for all families who need it, and a much smaller formal child welfare stream for families where the authority of the courts is required."¹⁴

Increasing the government's focus on prevention and early intervention through legislation and practices will require the commitment and

involvement of ministries across government. In response to the *Child Welfare Review* panel's final report, the government created a cabinet committee to advance the panel's recommendations. The ministries of Social Services, Health, Education, Justice and Corrections are all represented on this committee, and will all have a role to play to support this shift to prevention and early intervention.

The provision of services to children, youth, and their families is a joint responsibility of the government and its ministries. The Government of Saskatchewan adopted the *Child and Youth First Principles* and have committed to implementing the 12 recommendations of the *Child Welfare Review*. Therefore, the intersecting of ministries to provide integrated services in this area is essential to the promotion of healthy child development and supporting families. In the past, our office has observed that government ministries act in isolation, despite the intersecting of services that are being provided to a single family from the Ministries of Health, Social Services, Education, and Justice, Corrections and Policing. Each ministry will need to continue to work at integrated case management that requires joint planning between the service providers and developing policy and programs that are in alignment with a shift towards models of prevention in child welfare.

Trauma-Informed Practice

We are encouraging the Ministry of Social Services to be more aware of the potential long-term impacts of removing children from their families, and moving them between foster placements. Children in foster care are already coping with the trauma of the neglect or abuse that precipitated their entry into care. When a child or youth is placed in care, it should not unduly cause additional trauma.

Our office is examining how trauma-informed practices can better improve our approach to advocacy on behalf of children and youth in care

14. For the Good of our Children and Youth: Saskatchewan Child Welfare Review Panel Report, 2010, p. 30. Available at: <http://saskchildwelfarereview.ca/>

15. Saskatchewan Advocate for Children and Youth. Lost in the System: Jake's Story. September 2014. Available at: <http://saskadvocate.ca/media%20resources%20publications/Special%20Reports>



through training to increase our understanding of how trauma impacts children and youth. Young people who have spent a long time in the child welfare system have often lived in many homes, which can have a profound effect on their development. One story to illustrate the significance of the impact of multiple moves is that of a 14 year old youth who contacted our office after having lived in 17 placements. Her father, who lived out of province, wanted to be reunited with her, but the court process was lengthy. This youth was unhappy in her current placement, and as a means of coping, she began to self-harm and run away. As this youth became increasingly more frustrated, she also increased these harmful behaviours. This resulted in the breakdown of the reunification plan with her father, as he no longer felt he could provide the level of care she required. The better service

providers understand the complexities of trauma and how they manifest in a child or youth's behaviour, the more appropriate the response is to the needs of that child or youth.

The special investigation report *Lost in the System: Jake's Story* illustrates how trauma can be compounded in the child welfare system.¹⁵ It is clear that Jake was subject to additional trauma during his time in care through his moves between 11 different foster homes. There was also lack of follow-up on his developmental delays, which had an impact on his health and development and were never properly assessed before he died.

Most of the recommendations made in this investigation address how foster homes are operating, including specific recommendations that the Ministry of Social Services review the number of moves foster children experience, track moves better, strictly adhere to maximum numbers of children in foster homes, review all open foster and group homes to ensure they are operating within policy, and license foster homes. As we noted in *Lost in the System*, the Ministry of Social Services has made some positive changes in the years since Jake's death in 2009. Implementing these recommendations will uphold



children's rights to special protection and assistance from the government when they are living in out-of-home care, in accordance with Article 20 of the *Convention*.

The abundance of research in the last decade on how children's brains develop, and the impact of early adversity on child development strengthens

our beliefs that apprehending children from their families, and moving them between foster homes, has a much greater impact than previously thought, and can exacerbate the trauma they have already experienced.

As the introduction to

the Center for Advanced Studies in Child Welfare's journal issue on trauma-informed child welfare practice notes, "[i]t is no longer a question of whether to incorporate trauma-informed organizational and practice strategies into child welfare practice, but how."¹⁶ In 2015, our office will continue to develop our understanding of how we can use trauma-informed practices to improve our work.

Highlighting and building on promising models for supporting families

In recent years, Saskatchewan has developed some strong models of prevention programs that are mandated to support children and families. These models take a preventative approach to supporting children and families by working to keep parents and their children together. Under the *Convention on the Rights of the Child*, Article 9 provides that children have a right to live with their families, and Article 18 indicates that the state must provide parents with supports to help them with their parenting responsibilities. Our office views these programs as fulfilling the obligation towards children and youth and their rights under the *Convention*. We will continue to advocate through our individual and systemic work and public education activities for this preventative approach in service delivery, which upholds children's rights, strengthens their families, and leads to better outcomes for children and youth. As the government moves towards the increase of prevention models in

Apprehending children from their families, and moving them between foster homes, can exacerbate the trauma they may already have experienced



child care, we will then monitor the programs and services to keep the rights of children and youth at the forefront of development.

Coming Home

Since 2009, the Central Urban Métis Federation Inc. (CUMFI) has run *Coming Home*, a supported housing program in Saskatoon. The program's main goal is to reunite children with their parents and keep them out of foster care. *Coming Home* provides emergency and long-term housing for families in a safe, caring environment. Parents are supported and mentored to deal with their health and social issues. Additionally, Elders share their culture and knowledge in traditional parenting methods. Parents who have children in foster care are able to have their children visit, and can work with Social Services and staff at CUMFI toward having their children return to their care.

Raising Hope

In late 2013, *Raising Hope*, a new facility in Regina opened which provides a new way of working with pregnant women who were likely to have their babies apprehended by Social Services due to concerns that include addictions, homelessness, and previous involvement with child protection. *Raising Hope* is a residential model of care which provides apartments for pregnant women and their children. This model includes onsite programming to address

parenting, health and social issues, and provides access to elders. For mothers working toward reunification with their children, *Raising Hope* offers a safe and positive environment for family visits, with a play area and the support of program staff, who are Ministry approved to provide supervision as required based on the level of risk. It is funded by the Ministry of Social Services, Regina Qu'Appelle Health Region, and others.

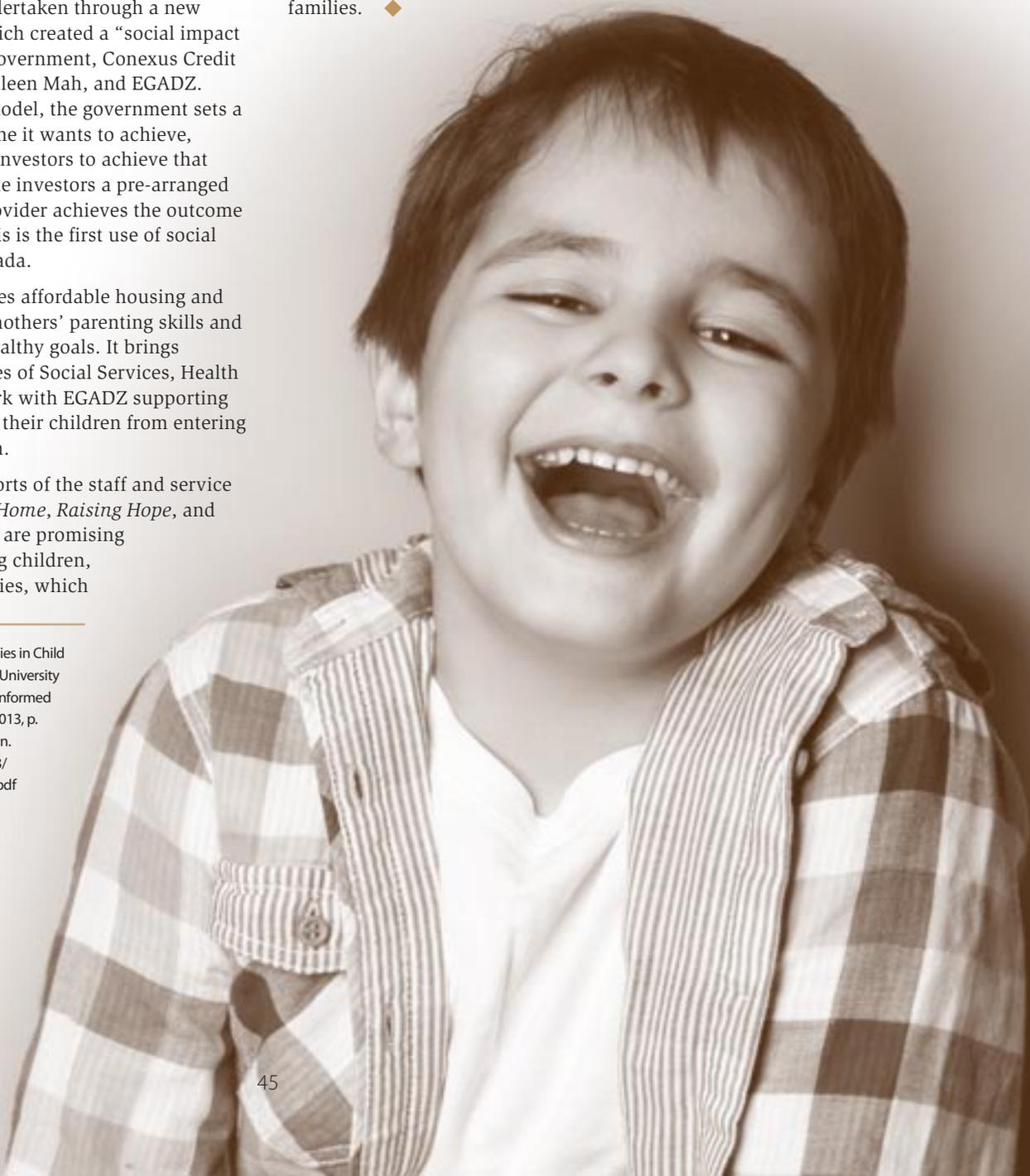
Sweet Dreams

In May 2014, EGADZ opened the *Sweet Dreams* supportive living home in Saskatoon for vulnerable single mothers who are at risk of becoming involved with the child welfare system. This was undertaken through a new funding initiative which created a “social impact bond” between the government, Conexus Credit Union, Wally and Colleen Mah, and EGADZ. Under this funding model, the government sets a specific social outcome it wants to achieve, acquires funds from investors to achieve that outcome, and pays the investors a pre-arranged sum if the service provider achieves the outcome in a specific time. This is the first use of social impact bonds in Canada.

Sweet Dreams provides affordable housing and support to increase mothers’ parenting skills and help them achieve healthy goals. It brings together the Ministries of Social Services, Health and Education to work with EGADZ supporting mothers and keeping their children from entering the foster care system.

We commend the efforts of the staff and service providers at *Coming Home*, *Raising Hope*, and *Sweet Dreams*. These are promising models for supporting children, youth and their families, which

demonstrate the incredible value in providing prevention services to families as a way to mitigate risk and keep families together. The prevention model of care illustrates the value of programming that provides holistic supports and services before a family is in crisis. We see a tremendous value in an integrated approach to service delivery that provides for residential care, onsite programming, mentoring, and support services that work towards reunification of families who are currently involved in child protection and prevents children from coming into care while promoting the healthy development of children and families. ◆



16. Center for Advanced Studies in Child Welfare. School of Social Work, University of Minnesota. CW360 Trauma-Informed Child Welfare Practice, Winter 2013, p. 2. Available at: http://cascw.umn.edu/wp-content/uploads/2013/12/CW360Ambit_Winter2013.pdf

The Advocate's office carries out individual and systemic advocacy arising out of the services provided to young people in the youth justice system. Youth who become involved in criminal activity are often highly vulnerable and frequently in high risk situations due to their family circumstances and personal history.

Youth in Custody and Supervision: a climate of change and uncertainty

We see this segment of youth even further marginalized due to the stigma of their criminal behaviour, and this group of youth are isolated in society and in government services. Our office advocates that young people are receiving the high quality of services to which they are entitled, that they are involved in decision-making and planning about services that affect them, and that their rights, interests and well-being are respected. Our role includes careful monitoring of any changes to programming and services delivered by the Ministry of Justice,

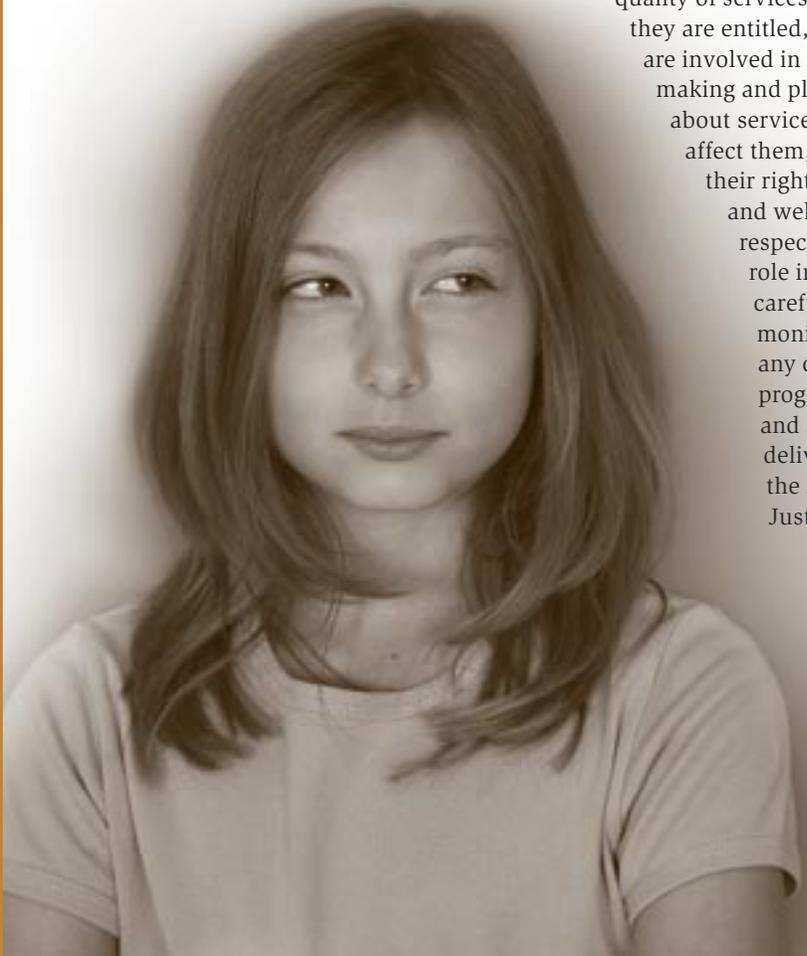
Corrections and Policing, along with carrying out individual advocacy on behalf of youth who are dissatisfied with their services and decisions affecting them.

The gaps for 16 and 17 years old in the child welfare system become even more evident when it involves youth who are being supervised by the Ministry of Justice, Corrections and Policing. Although the *Youth Criminal Justice Act* prohibits the use of custody as a substitution for social measures, particularly housing, the reality is that youth who are homeless and criminally charged are at greater risk of being remanded in custody due to not having a suitable residence in the community. Our role is a critical one as we must advocate on behalf of youth and across ministries to address their marginalization, and address the individual and systemic barriers to achieving their full potential.

With the many changes occurring in the correctional system, communication is essential between our office and the Ministry. Our office has repeatedly conveyed to Corrections and Policing the importance of being involved in consultation on decision-making that impacts the service delivery for youth both in custody and in the community. Whether the Ministry chooses to engage with our office and seek our child and youth rights lens remains at their discretion; however, as we noted in last year's annual report, we see a critical role for our office in providing this perspective any time significant decisions impacting youth in custody and supervision are made.

Unfortunately the nature of the relationship between our office and the Ministry has changed significantly in recent years. In 2011 and 2012, our office was involved in a consultative manner with Corrections and Policing, and our input was sought on decisions that affected youth prior to those decisions being made. In 2013 and 2014, the openness of the Ministry has shifted, whereby there has been limited information sharing and a lack of transparency with our office such that often we are advised of decisions after they have been finalized. On many occasions our office has not had the opportunity to provide constructive input required to determine how critical changes would negatively impact the rights of children and youth in the Ministry's care.

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Youth Criminal Justice System

Youth between the ages of 12 and 17 who come into conflict with the law are governed by Canada's *Youth Criminal Justice Act* and the *Criminal Code*. Young people under the age of 12 who engage in activities that contravene the *Criminal Code* cannot be charged with a crime; however, they may be considered to be in need of protection under the *Youth Criminal Justice Act* and *The Child and Family Services Act*. The *Youth Criminal Justice Act* is focused on rehabilitation of youth and their reintegration into society, and it makes specific reference to Canada as a party to the United Nations *Convention on the Rights of the Child* in its Preamble, and that young people have "special guarantees of their rights and freedoms."

Under this legislation, many youth serve sentences supervised in the community; custody sentences are reserved primarily for youth who commit violent offences or are serious repeat offenders. The *Youth Criminal Justice Act* provides for three levels of sentences: community-based, open custody and secure custody. Youth who are eligible to receive a custodial sentence may be considered for a disposition to be served in either open or closed custody and often youth receive graduated sentences, beginning in closed custody then transitioning into an open custody facility until they are released to community supervision. The intent of an open custody sentence is that youth are able to attend school, work, receive treatment and take part in community and cultural activities while living in a supervised residential facility, which promotes rehabilitation and reintegration. The levels of custody are determined by the youth criminal justice court judge, who may reserve closed custody sentences for those youth who present a higher risk to community safety and need secure supervision, where most programming takes place in the facility itself. The final stage of a custodial sentence is intended to facilitate a successful reintegration. Every custodial sentence includes a portion of time that is served in the community under supervision.

Saskatchewan youth crime and incarceration trends

Statistics Canada reports on the average counts of young people in youth correctional services by province and territory. The most recent national

data available is from 2012-2013, which shows that 20.42 young people per 10,000 are incarcerated in Saskatchewan, second only to Manitoba's rate of 30.31. Canada's rate is 7.28 per 10,000.¹⁷

With the implementation of the *Youth Criminal Justice Act* in 2003, there have been reported declines in criminal charges as the legislation encourages the use of alternative approaches and the legislative intent is to focus on rehabilitation and reintegration. Saskatchewan's youth crime rate declined 16% between 2012 and 2013, and at that time was 33% lower than a decade earlier.¹⁸ Youth violent crime dropped 18% between 2012 and 2013, 37% lower than in 2003. Youth property crime was down 19% in 2013, and 44% lower than in 2003. The youth other *Criminal Code* crime rate was stable compared to a decade ago.¹⁷

In spite of these decreasing trends, Saskatchewan continues to have the highest provincial youth crime rate (12,830 youth charged and youth cleared per 100,000 population aged 12 to 17), 2.9 times the national rate (4,346), followed by Manitoba (8,091) and Nova Scotia (6,476). Saskatchewan has had the highest provincial youth crime rate since 1992 and continues to have a disproportionate representation of Aboriginal youth in the criminal justice system.

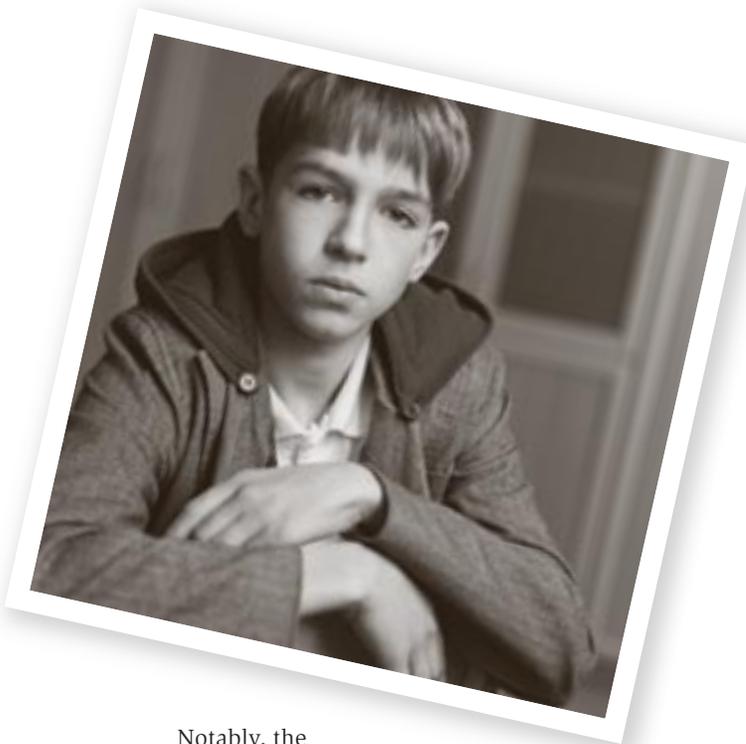
Saskatchewan also has the highest provincial incidence of a variety of forms of police-reported interpersonal violence including dating, intimate partner and family violence, violence against women and girls, and violence against children and youth.¹⁷

The Saskatchewan Ministry of Justice, Corrections and Policing Division, reports 1316 youth in young offender community programs in 2014-15 (average daily count), with 988 on probation, 119 on deferred custody and community supervision, and 209 on other community sentences. ◆



17. Statistics Canada. Youth correctional services, average counts of young persons, by province and territory, (CANSIM table 251-0008, 2012-13 data).

18. Saskatchewan Ministry of Justice. Police-Reported Crime Statistics in Canada [fact sheet], July 2014. Data from Canadian Centre for Justice Statistics, Uniform Crime Reporting Survey. Available online at <http://justice.gov.sk.ca/2013-crime-stats>



Notably, the decisions affecting youth services and programming are frequently not youth-centered—there is a lack of a youth rights lens, as well as lack of an assessment of whether decisions made are consistent with the principles of the *Convention on the Rights of the Child*.

Our advocacy regarding the unit and facility closures is one example of the work our office is conducting where we observe a negative impact on young people. We have noted a trend in that the open custody facilities which support youth rehabilitation and reintegration are being closed, and youth serving open custody sentences are being housed in facilities that are designed for closed custody. Our office views this as incongruent with

the spirit of rehabilitation and reintegration that is clearly stated as the overarching principle of the *Youth Criminal Justice Act*. Dual facilities with both open and closed custody units lack the essential characteristics of a community-based facility intended to promote the development of life skills including education, employment, and access to culture and recreation in a space that is conducive to healthy adolescent development.

This is counter to the intent of rehabilitation and reintegration, and to an extensive body of research in youth corrections which shows that incarceration of young offenders in prison-like settings, with correctional hardware such as locked cellblocks and isolation cells, is a counterproductive public policy. It has been shown to be of little benefit to public safety and often harms the well-being of young people and their future prospects.¹⁹

The state of Missouri has developed a therapeutic approach to its youth justice system which has proven very effective. It uses small, community-based facilities where highly trained staff use relationship-based methods to support youth and maintain safety. The Missouri model has shown that this approach helps young people make the positive changes in their lives needed, resulting in fewer coming back into the correctional system.²⁰

Conversely, as the number of youth sentenced to custody has continued to drop, the Ministry of Corrections has closed one open custody facility in 2012 (Echo Valley Youth Centre in Fort Qu'Appelle), and two other open custody facilities are slated to close in early 2015: Yarrow Youth Farm in Saskatoon and Orcadia Youth Residence in the Yorkton area. Further, Corrections and Policing has closed several units within their secure custody facilities. These closures are on the heels of the Ministry's announcement in 2014 that the North Battleford Youth Centre would be closed sometime prior to 2018. The Ministry will maintain the operations of dual custody youth facilities in Regina, Saskatoon, and Prince Albert and an open custody facility in North Battleford. With declining custody rates, it appears that the Ministry is making decisions about the youth system based on fiscal need and the needs of the over-crowded adult system, instead of putting youth at the forefront of future planning.

Our office is working individually and systemically with youth who are impacted by the facility closures, and from the outset we can report that the impact of the decision bears heavily on them, as they are concerned about their future and programming. We observe this uncertainty through our contact with the young people affected and who express their anxiety about going back to a secure setting at Kilburn Hall Youth Centre.

An extensive body of research in youth corrections shows that incarcerating youth **in prison-like settings is counterproductive**

Youth have told our office that they are concerned about their well-being and ability to practice being accountable and engaged in the re-integrative process. The youth voice has not been heard in decision-making nor has a rights impact on youth been considered by the Ministry. Although the Ministry's decision to cease operations of youth facilities does not require the permission of the youth, the Ministry has an opportunity to demonstrate a commitment to decision-making that is youth-centred and will benefit young people in the province through their participation in a decision that directly affects them. The closures of open custody facilities may mean that fewer facilities are operating in order to promote cost saving however, the Ministry is still having to make structural changes to the facilities that are to remain operational to accommodate the influx of youth serving sentences in the facilities slotted for closure.

For example, in order to accommodate the closures, Kilburn Hall Youth Centre in Saskatoon requires retrofitting to mimic the structure of an open custody facility. This is not a long-term solution to addressing the lack of a therapeutic environment or ensuring that re-integrative programming is effective, and our office views this as regressive. Closing open custody facilities that have been effective in connecting youth with resources and supporting them in making healthy decisions is short-sighted, as cost savings realized in the short term will likely be offset by longer term costs when young people have more difficulty reintegrating into society. Although it is promising that fewer young people are being sentenced to custody, the facility closures in response to the lower numbers of serving youth pose significant challenges in providing youth in custody the services to which they are entitled if there is an increase in the number of youth receiving custodial sentences.

It is our position that these decisions have been hastily executed without the best interests of the youth being

thoroughly considered, as is their right protected by the *Convention*. Our office has not been engaged in consultation with the Ministry prior to decisions becoming finalized and we have been deprived of the opportunity to advocate for decision-making that is youth-centered and promotes the conformity of services and planning with the *Convention*. We believe that there are other ways to get economies of scale which would better reflect the spirit of rehabilitation and reintegration in the *Youth Criminal Justice Act*, and better serve youth in the long run by providing life-skills development and opportunities for building success right in the community.

19. Mendel, R.A. Juvenile Confinement in Context. *American Educator*, Vol. 36, No. 2, Summer 2012, pgs. 6-7. Available at: <http://files.eric.ed.gov/fulltext/EJ973193.pdf>

20. The Annie E. Casey Foundation. *The Missouri Model: Reinventing the Practice of Rehabilitating Youthful Offenders*. 2010. Available at: <http://missouriapproach.org/publications/2010/12/8/annie-e-casey-foundation-report.html>





We caution that the closure of community-based facilities will not lead to optimal outcomes for these young people. The Advocate will be closely monitoring the issue of facility closures in 2015 and assess the impact on the youth and their rights as Corrections and Policing continues to move forward with facility closures. Our office is

working closely with the youth in these facilities to ensure there is a minimal disruption to their programming and also monitoring of the quality of programs as the changes are rolled out.

Our office spoke out last year in regard to the

opening of White Birch in January 2014. This unit holds adult women on remand (secure custody while awaiting court appearances) in a refurbished space in Paul Dojack Youth Centre in Regina. Although we had been advised in 2013 that this transition would occur, our office did

not learn about the actual

opening of White

Birch until after

it was

operational, through a media release. We opposed the decision to combine youth and adult offenders on the same site, and have paid careful attention to the Ministry's execution of a facility that houses both youth and adults. Our disagreement with this decision is founded in the *Youth Criminal Justice Act* and the intent of the United Nations *Convention on the Rights of the Child* to put into place protective measures for children and youth. Section 3(b) of the *Youth Criminal Justice Act* requires that the youth justice system must be kept separate from the adults and accordingly, we fundamentally disagree with youth sharing facilities with adult offenders as this is not consistent with upholding the rights of youth. Additionally, housing youth and adults jointly in correctional facilities is contrary to best practices.

In 2014, our office has observed a significant state of change within Corrections and Policing, particularly since they have unveiled a complete reorganization of their operations. These changes appear to be creating a climate of uncertainty, which both youth and staff have shared with our office, and that this is impacting their ability to provide youth with quality services focused on rehabilitation and reintegration into the community.

Further, many youth have reported that staff working in the facilities are uncertain about their future employment, which is having an impact on how the staff engage with youth. We have heard from many youth that staff morale is low and that there have been many reported incidents of negative interactions with facility staff, disrespect, applying rules inconsistently, and showing favoritism. Clearly, this type of environment along with the magnitude of the changes in a short amount of time has negatively impacted youth and the environment of the facilities.

Staff from our office have been present in all of the facilities in the province regularly throughout the year to ensure that youth are aware that our office is available to address their individual issues, and to give youth an opportunity to communicate with us in person about their rights and best interests.

The experience of youth in the facilities presently is in stark contrast to facilities where staff and youth are stable and there are clear practices in place that encourage positive interactions,

Regional advocates have visited the facilities throughout the year so youth know about and can access our advocacy services

greater satisfaction with youth in terms of their current circumstances, and greater workplace satisfaction experienced by staff, which inevitably leads to better outcomes for youth. We observed this positive dynamic in the facility model in place at Yarrow Youth Farm and Orcadia Youth Residence prior to the closure announcement.

With the changes in the correctional system for both youth and adults, the Ministry of Justice, Corrections and Policing, undertook a facility study of all the youth and adult correctional facilities in the province to guide decision making, which was to be completed in the spring of 2014. The Advocate looks forward to the opportunity to review the facility study, which was provided to our office in March 2015, and conducting an analysis of the impact of this study on the closure decisions.

Going forward, we are hopeful that our office will take on a greater presence with the Ministry as it impacts and improves outcomes for youth when our office is able to advocate for the alignment of their decisions and practices with the *Convention*.

Fewer facilities means more moves for youth

With fewer units and facilities operating, our office has received numerous reports from young people regarding multiple moves. Youth have told us that they are often moved farther away from their home communities where they have families and support services. We know that youth who are distanced from their communities are more likely to feel further isolated, especially the female youth as there is only one dedicated facility housing them in the province. This isolation impacts on mental health, which has the potential to discourage youth engagement and ultimately the youth's chances at successful rehabilitation and reintegration back into the community.

In addition, access to services can be impacted. Moving between facilities means youth have to establish new relationships with different service providers, which is particularly challenging for mental health and addictions treatments and services that require a high level of trust to be effective. Affecting the youth's ability to address the factors that brought them into the justice system in the first place is a direct barrier to



rehabilitation and a negative outcome of the Ministry's decision to operate fewer units and facilities.

Some male youth report being shuffled between facilities as often as twice a week. The Ministry advises that these transfers are related to accommodating court appearances in youth's home regions, lack of staffing due to facility closures, and difficulties balancing the numbers of youth in facilities. Moves between different youth facilities means that youth repeatedly have to adjust to rule variations between facilities and varying facility staff due to the non-standardized approach. Some of the variations may include admissions policies, where youth who are re-admitted after court attendance are required to be cell-confined for up to 24 hours or having to adjust to a new level system in each facility (the system of privileges youth can move through, based largely on their behaviour).

The fact that currently each young offender facility has its own unique facility practices and rules poses challenges when youth are transferred between facilities. The Ministry has acknowledged that the rules and standards are not consistent across the facilities, which youth

have told us they find confusing and hard to follow. For example, in one facility a youth on remand would be allowed to call his older brother, whereas in another facility the youth would be denied the same privilege. Some facilities would allow youth to speak a language other than English, while other facilities would

impose rules about where and when a youth could speak another language.

This has a negative impact on youth and does not respect their right to a high quality of service from the correctional system or the youth's right to culture and language as set out in

Article 30 of the *Convention*, which directly states that Indigenous youth in particular are entitled to the right to culture and language. It is of grave

concern to our office that youth are being denied the right to speak their language and cannot overlook the historical context for Aboriginal youth, which illustrates the importance of upholding the rights of youth.

When policies vary between facilities, this creates undue stress and confusion for young people

Our office identifies that these discrepancies result from a lack of province-wide standardized practices and, in the upcoming year, will focus on addressing this issue.

Standardizing procedures across facilities

To alleviate the concerns of inconsistencies between facilities, the Ministry of Justice formed a Facility Level Review Committee to review and provide options to the Ministry in the development of a common level system across all custody facilities. The Advocate is encouraged by this process.

The committee has representatives from each youth facility in the province. The goal of the committee is to standardize practices province-wide for the level system, across all facilities, so that youth know and understand the expectations for achieving their levels, no matter which facility they are in, and youth would be able to maintain the level they had already earned from one facility when moving to another. Our primary consideration for any level system is that the Ministry is providing youth with their rights and entitlements according to the *Children and Youth First Principles* and the *Convention on the Rights of the Child*. We have received calls from young people informing us that this was not happening consistently, and that facility moves could cause a youth to lose all the privileges that they had earned to that point, and have to start over.

As a whole, inconsistent policy among all the facilities in the province creates confusion and undue stress for the youth. As one could imagine, when a youth is stressed in a custodial setting it can impact the functioning of the entire unit. Alternatively, the use of the level system is a method for how the facilities manage consequences. If youth are stressed and acting out of frustration, this requires the staff to respond to the situation and has the potential to result in the youth receiving a formal incident report for negative behaviour.

As part of creating a common level system, the Ministry has surveyed youth who were currently in the youth facilities and asked what they would like to see changed. This approach is commendable, as it upholds young people's rights to be heard and participate in planning and

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Case Study: Shortfall in services at Prince Albert Youth Residence

Some young people are held on remand while they are awaiting court appearances or for the court to determine their sentencing. In 2014, the Advocate raised concerns with the Ministry about the lack of programming while youth are on remand at Prince Albert Youth Residence. The services that young people are receiving in Prince Albert Youth Residence are deficient and lag those at other facilities. In this facility youth are in a holding pattern, spending much of their time sleeping and watching television, and it has been reported to our office that the remand program does not encourage or facilitate more stimulating, pro-social behaviour. Youth have also been discouraged from speaking languages other than English in this facility, which contravenes Article 30 of the *Convention on the Rights of the Child*. Youth are spending significant time in their cells, with limited access to education and cultural programming, which we observe is a regional discrepancy, as youth in other facilities do have access to programming and accredited education, while on remand.

We have learned through advocacy that at other facilities, remand youth attend educational programming for a large portion of the day, whereas at Prince Albert Youth Residence, the facility has struggled to fill a teacher position for several years. Further, the facility does not lend itself to self-directed learning as there is only a single observation cell for the entire remand unit where youth are permitted pens or pencils, and access to this room is not always available.

The most concerning programming shortcoming at the Prince Albert Youth Residence is that, until recently, the facility did not have a nurse available or any service agreements in place that would provide for a nurse or medical professional to attend on-site to assess a youth's medical needs, as other youth facilities do. Staff members who are not medically trained are expected to assess if a youth requires medical attention and transport them to the hospital if required. The process for accessing medical care has been entirely at the discretion of the facility managers, not medical professionals, and requires consideration of staff resources available to transport a youth off site to seek medical attention. This arrangement created delays in seeking treatment for youth.

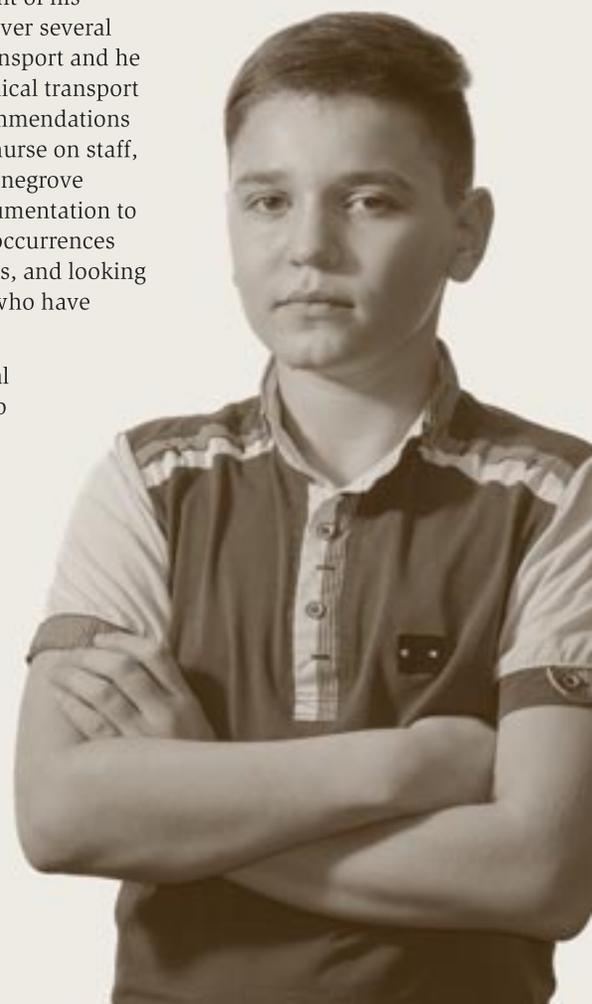
The *Convention on the Rights of the Child* requires that children and youth have a right to the best

health possible and access to the highest standard of health services under Article 24. This right is also captured by the *Children and Youth First Principles*. The lack of nursing or medical professionals on-site and the necessity to bring in additional staff for a medical transport off-site means that young people in this facility may not get the high quality of health care to which they are entitled to. As in most cases, staff members do not have the training or education to deal with medical emergencies, nor do they have the capacity to adequately assess medical conditions.

This problem became apparent when a 16-year old youth who was deaf and mute died unexpectedly while being held on remand. In October 2014, the Coroner held an inquest into the death of Dylan Lachance. Our office attended the inquest and learned that he died from acute bronchopneumonia with associated sepsis on September 19, 2013. Dylan had seen a doctor earlier in the week and was diagnosed with lower back pain due to an injury he suffered prior to being admitted to Prince Albert Youth Residence.

At the inquest, staff testified that they had difficulty communicating with Dylan, and were unable to fully comprehend the extent of his illness. Dylan's health deteriorated over several days following his initial medical transport and he was not provided with a second medical transport until it became an emergency. Recommendations from the inquest included having a nurse on staff, or using nursing staff from nearby Pinegrove Correctional Centre, better case documentation to inform staff of any special needs or occurrences that impact the youth and their needs, and looking at the way staff interact with youth who have special needs.

The youth who are entering custodial facilities are entrusting themselves to the care of the Ministry of Justice, Corrections and Policing and are entitled to adequate and appropriate medical treatment. This is not discretionary or dependent on issues with the facility service providers nor can it interfere with the youth's rights protected by the *Convention*. Our office is in the process of assessing our next steps with the Ministry of Justice, Corrections and Policing, in this regard. ♦



decision making about services that affect them. When young people are involved in this planning, we have found that they are more likely to abide by the systems they have helped develop, thus making for better outcomes.

While a common level system across facilities may address some of these issues, others appear to be more deep-seated, and it appears that they will not be resolved until reorganization in the Ministry of Justice, Corrections and Policing is completed, lessening youth and staff anxiety. The last facility closure is loosely scheduled for 2018 and in

the interim, we will continue to advocate for the Ministry to address the uncertainty for both youth and staff as they operationalize

all of the changes and closures. We will maintain pressure on the Ministry to phase in all the changes as quickly as possible as the impact on youth at this critical stage of development has the potential to have a profound lasting impact on the youth caught in the transitional stage of facility changes, which increases the risk of their

rehabilitation being jeopardized.

Additionally, we will continue to monitor the inconsistencies between facilities and unit closures carefully and advocate to ensure that youth have a seamless continuous case plan, and receive the high quality services to which they are entitled.

Implementing cultural training and Child Rights Impact Assessments

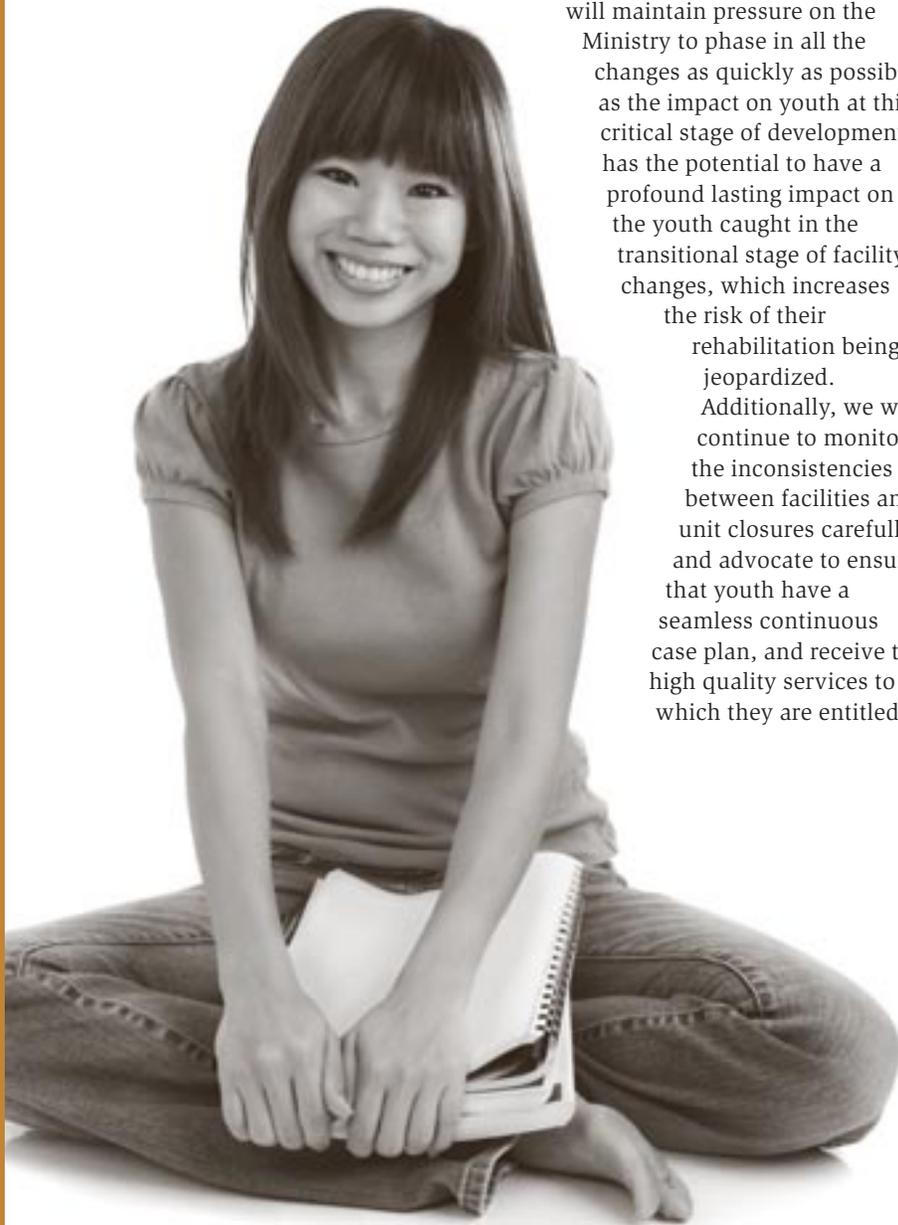
First Nations and Métis youth are vastly overrepresented in the youth justice system, as 79% of all youth involved are Aboriginal, despite the fact that they represent a much smaller proportion of this age group in Saskatchewan. Young people have a right to their culture under Article 30 of the United Nations *Convention on the Rights of the Child*, and in our work with individuals and groups we see the direct benefits of connecting young people in conflict with the law with their culture and traditions. Providing youth with opportunities to participate in their cultural traditions can make a considerable difference in rehabilitating them and reintegrating them back into the community.

Youth have reported to our office the significant impact that learning about their culture, and exposure to healthy Aboriginal role models, has had on their rehabilitation. Yarrow Youth Farm's cultural program is a great model to follow as they routinely welcomed community members to participate in cultural activities with the youth. In addition to learning traditional cultural ways, the youth made connections that they could maintain when released from custody.

We have advocated for the Ministry to adopt the principles contained in the *Touchstones of Hope for Indigenous Children, Youth and Families*, and provide their staff with this cultural training. Our office sees that this training as a means of providing respectful, culturally-appropriate services for Aboriginal youth that is centred on the traditional teachings of reconciliation and reparation in serving Aboriginal children and youth and in recognition of the unique history of Aboriginal people.

Additionally, we have been encouraging the Ministry to conduct *Child Rights Impact Assessments* on policies, programs and practices in the youth justice system. Our office recommends that youth rights are continually assessed and factored into decisions, specifically as programming and services impact the outcomes for youth. At a minimum, this process would ensure that youth have a voice in decisions that affect them, and that their needs and best interests are at the centre of planning, which can be achieved through youth

Learning about their culture and interacting with healthy Aboriginal role models **has helped young people in their rehabilitation**



engagement or through a *Child Rights Impact Assessment* that can easily be completed by the Ministry.

The Ministry reports that the implementation of *Touchstones of Hope* and *Child Rights Impact Assessments* are still under consideration. Our office has been advocating for all ministries to adopt these principles. The Ministry of Social Services has been a champion in the development and movement toward implementation of the *Child Rights Impact Assessment*, and has fully implemented *Touchstones of Hope* in their core training. We will continue to urge the Ministry of Justice, Corrections and Policing, to do the same as we have observed the value that these practices have added to the Ministry of Social Services and to the children and youth receiving their services.

In the fall of 2014, as previously noted, our office was invited to present to the Ministry of Justice, Corrections and Policing managers and supervisors provincial meeting, where our office emphasized the need for a rights-based lens in case-planning for youth as well as the importance of building understanding of the unique needs of Aboriginal youth as captured by the *Touchstones of Hope* principles. We encouraged Ministry staff to familiarize themselves with the principles through the reading of learning materials that our office has available and provides to the public and service providers.

Concerns with the mental health of youth involved in the correctional system

Previously we highlighted the number of critical injuries our office received in 2014. Of the 41 injuries received in 2014, 36 of these were from the Ministry of Justice, Corrections and Policing. Of these 36, 17 were related to self harm/suicide, and eight notifications involved four youth with more than one critical injury, with at least one of these critical injuries being self-harm or attempted suicide. We are deeply troubled by this trend. As youth were identified in the province's *Mental Health and Addictions Action Plan* as at greatest risk of suicide, accounting for one-third of deaths of young people from ages 10-19 in Canada, this trend is palpable. The *Action Plan* also noted that mental health and addictions issues, in particular suicide, self-harm and acting



out behaviours, are difficult to address in correctional facilities “because the environment is not therapeutic.”²¹ Providing a therapeutic environment for youth in custody, as Yarrow and Orcadia were better suited to do, is critical to addressing these high levels of suicide and self-harm attempts.

We will continue to advocate that the Ministry of Justice, Corrections and Policing, consult with our office and involve us in decision-making, in order to ensure that the rights, interests and well-being of the youth in their care are upheld, and that these youth are receiving the high quality of services to which they are entitled. ◆

21. Government of Saskatchewan. *Working Together for Change: a 10 Year Mental Health and Addictions Action Plan for Saskatchewan*. December 2014, p. 31. Available from: <https://www.saskatchewan.ca/live/health-and-healthy-living/manage-your-health-needs/support-programs-and-services/mental-health-and-addictions-support-services/mental-health-and-addictions-action-plan>

In September of 2012, the Advocate's jurisdiction was broadened to include publicly-funded health entities with the enactment of *The Advocate for Children and Youth Act*.

Improving Access to Health Services

This broadening of our mandate is very encouraging and a victory for child and youth rights as under the *Saskatchewan Children and Youth First Principles*, children and youth have a right to the highest standard of health services as adopted from Article 24 of the *Convention on the Rights of the Child*.



We are aware of many issues that children, youth and their families face when trying to access needed health services. The formal recognition of the importance of the Advocate to have jurisdiction over health services is an acknowledgment by the Government of Saskatchewan of the significance that access to health services has on the well-being of children and youth and their healthy development. Our office continues to be excited to embark into this area of child and youth service delivery equipped with formal remedies available to our office to advocate and investigate in order to make future contributions to improvement of services in the area of health for the betterment of children and youth.

In the past, we often saw issues with accessing health services in the office's investigations of critical injuries and deaths of children and youth receiving services from the Ministry of Social Services and Ministry of Justice, Corrections and Policing. It is evident that access to health services is a very important area of service delivery that requires inter-ministerial cross-over and integrated case management to ensure that children and youth are able to access and receive services. It is also clear from the calls to our office that children, youth, and their families identify many barriers to accessing health services, particularly in the areas of mental health and addictions. Ministries regularly refer clients to community-based organizations, but our experience is that these organizations are finding it challenging to provide the level of services needed and require additional support and resourcing from government to ensure that all children and youth are receiving the level of service required to meet their needs and to which they are entitled.

Accessing needed health services for children and youth an ongoing challenge

While we recognize that much good work is being done on a case-by-case basis, timely and equitable access to services, especially for children and youth residing outside our major

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Case Study: Parents struggle to get mental health services for their son

The parents of two teenagers contacted our office about the difficulty of accessing health services on behalf of their children – services to which they were entitled to under the *Convention*. They adopted their son “Brendon” when he was a baby, and within a few years, they suspected that he had developmental challenges. Brendon had outbursts that could be violent and had difficulties self-managing his behaviours. As they sought out services for their son, his parents found the mental health system difficult to navigate, despite the fact that they were well educated and able to advocate for their son.

When the school division would not assess Brendon for learning disabilities or mental health problems because his behaviour at school was manageable, the parents paid for a developmental assessment outside of the province, at their own cost. This proved to be valuable as Brendon was diagnosed with two learning disabilities, and he was able to access some supports in the school system, although they were not sufficient. When Brendon entered high school, his behaviour became increasingly violent, and he was admitted to an adolescent psychiatric unit, where he was diagnosed with Asperger’s syndrome (part of Autism Spectrum Disorder). He was later released then readmitted a second time, at which time he attempted suicide.

The strain on Brendon’s family was considerable, and eventually Brendon’s 14-year old sister “Ashley” was admitted to the same psychiatric unit as Brendon for a six-week treatment of her eating disorder. Brendon’s parents were advised by medical staff that they had to reduce the stress in their home, and that both children returning to live in the family home together would not fit in with either of their treatment needs as the stress was contributing to both Brendon’s and Ashley’s states of health and well-being. The night before their daughter’s release back to the family residence, Brendon attempted suicide a second time. His second attempt was attributed to feeling hopeless as he felt that due to his diagnoses of Asperger’s, he had little ability to live on his own.

To address the family home environment and the needs of both Brendon and his sister, the psychiatric unit staff suggested their parents

consider putting Ashley in foster care, as they felt strongly that she would not do well if both she and Brendon both lived in the family home. These parents were left feeling that they had to choose one child over the other, and that they had spent much of Brendon’s life trying to get him adequate and appropriate health services he was entitled to and also required for his development, many of which were not available.

Our office provided Brendon’s family with advocacy services to ensure that both Brendon’s and Ashley’s rights were upheld, as protected by the *Convention* and the *Children and Youth First Principles*. Ultimately our office was not able to resolve the issues as the government services they needed were not available. Understandably, the parents found this situation very frustrating: there were gaps in services, meaning that Brendon and Ashley were not having their needs met. Our office will not accept that access to adequate health services is justified by lack of sufficient resources and view this as in contravention of the *Convention on the Rights of the Child*. We will continue working at advocating for the government to increase health services to ensure that children, youth and their families have access to appropriate services to which they are entitled. With the implementation of the *Mental Health and Addictions Action Plan*, and the review of *The Saskatchewan Child and Family Services Act*, there are opportunities to address these shortcomings in services that put our children and youth at risk. ◆



urban centres and for many First Nations children and youth, residing in isolated northern communities, continues to be a significant issue. The following case studies illustrate some of the ongoing issues that families face in trying to access health services. This barrier to accessing services was formally acknowledged by the government, which led to the development of the *Mental Health and Addictions Action Plan*.

Timely and equitable access to services is challenging, **especially for families living in rural and remote settings**

Mental health of parents affects their children

Many of the children and youth that we work with that are at high risk for mental illness and substance abuse issues due

to risk factors present in their families. Children’s mental health is strongly related to that of their parents, in particular their mothers. Parents who are facing challenges with their own mental health and addictions issues may not be able to meet their children’s physical, social and emotional needs.²² The healthy development of a child begins in prenatal care and early childhood development, which requires the ability of the family to provide a safe and loving home environment. When families face stressors related to mental health or addictions, we see that the response to parents’ needs bears on the health of the entire family.

In Two Tragedies: Holding Systems Accountable (2014), our special investigation report into the death of six-year old “Sam” while in foster care, Sam entered care when his mother told her family support worker from the Ministry of Social Services that she felt overwhelmed and was considering suicide. Her mental health was not assessed, which would have clarified whether the threat was imminent and if it was necessary for Sam to be out of her care while awaiting the results of a Parental Capacity Assessment. This led to our recommendation that families with child protection involvement have immediate access to mental health and addictions services. Parents need access to these services so that they are able to keep their children safe and protected, and help them reach their full potential.

22. Kendall-Taylor N, Mikulak A. Child mental health: a review of the scientific discourse. Alberta family wellness initiative 2009 [cited 12 A.D. Oct 23]; Available from: URL: <http://www.albertafamilywellness.org/resources/publication/child-mental-healthreview-of%C2%A0-scientific-discourse>

Case Study: Vulnerable, cognitively-challenged boy offered services too late

In our advocacy work, we came into contact with “Logan”, a young man with a cognitive delay who was almost 18. Logan did not come to the attention of any government agency until he became involved in the youth criminal justice system.

Logan’s mother had her own cognitive delay and mental health issues, making it difficult for her to advocate for him. We learned that as a young child, he spent many hours unsupervised, and he was bullied both in school and in the community. It was unclear whether Logan had been assessed for any special needs or additional support services at school, and by grade nine, he left school. Logan spent his time on the streets, getting involved with drugs and petty theft. When our regional advocate met Logan, he was in a secure youth facility and had been kept in isolation for his own protection.

When our office became involved, Logan had a support team assigned through the Cognitive Disability Strategy, and the Ministry of Justice’s Complex Needs Committee. However, due to his age, the services were all voluntary and Logan could choose whether or not to access programming. Logan was offered a space in a supported living program, and services to address his addiction issues, improve his life skills, prepare him for the work force and live in a supported living arrangement but he chose not to accept any of the services.

Without interventions, the fear is that a youth like Logan would continue on a path of becoming entrenched in the criminal justice system. If Logan had early intervention services when he was younger, it may have been easier to engage him in services and supports. The *Convention* envisions that through the implementation of child and youth rights to be safe, protected, and to have services to meet their developmental needs, children and youth will be able to reach their full potential. Logan’s lack of early intervention services illustrates the challenges in engaging a youth later on in life as adulthood approaches. ◆

Case Study: Mother finds services for her autistic preschooler inadequate

A single mother with two young children sought our assistance in accessing services for her son with autism. She had been referred to the Autism Spectrum Disorder Program through her health region, and had a support team assembled through the Cognitive Disabilities Strategy to address services for her son. However, even with a support team in place, she encountered many challenges and found that the demand for services exceeded the available resources for children with autism. The mother found both the autism and the early childhood intervention programs were under-resourced and failing to provide services for all the children in the area that needed them. Her son was assessed by an occupational therapist, who gave her a list of medical equipment needed, only some of which would be paid for, and it took more than a month to determine who would pay for the equipment. As this mother was on social assistance, she considered having a fundraiser to cover the cost of the rest, but was advised that any amount raised or donated would be deducted from the funding available through the program.

The support team assisting this mother felt it would be very beneficial for her son to attend a specialized childcare program, but in order to qualify, the mother had to be working or in school. Most single parents would need to have childcare in place prior to taking on employment or returning to school. Ultimately, this mother was able to rely on a relative for a short time while she fulfilled the pre-conditions in order to get her son into the program, but wanted to share with us her frustration at the systemic barriers in accessing services, even when she had a strong support team in place. ◆

Government releases 10-year *Mental Health and Addictions Action Plan*

After 18 months of work, including extensive consultation with the community, stakeholders, service providers and our office, the government released a 10-year *Action Plan* for Mental Health and Addictions in December 2014. The *Action Plan* has 16 recommendations, but does not specify timelines, targets or funding. These recommendations are meant to guide planning over the next 10 years. We

met with the Commission several times during the report's development, participated in planning forums, and submitted a detailed report on issues we see for children, youth and their families. As outlined in our 2013 Annual Report, our submission focused on providing more readily accessible prevention and early intervention services, increased screening and support to reduce youth suicides, and immediate access to mental health and addictions services for families involved in the child welfare system, all of which were included in the *Action Plan*.

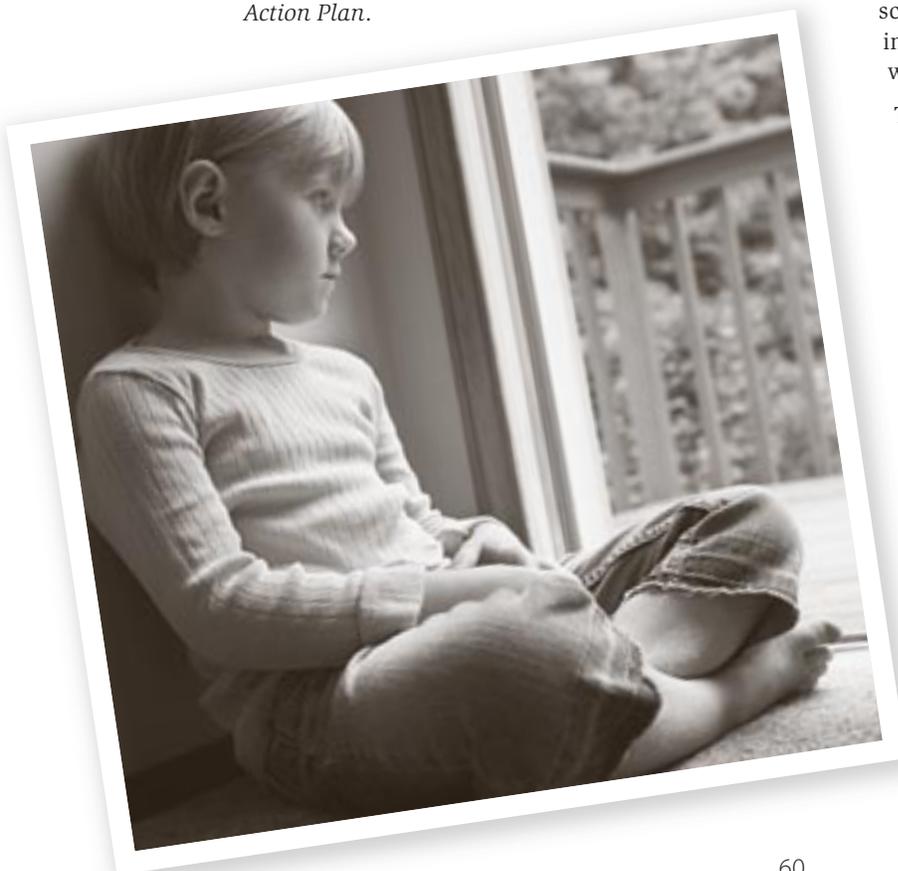
We were pleased to see that the *Action Plan* takes a patient-centred approach, which aligns with the Children and Youth First Principles, and it places children and youth at the centre of planning and services. The plan also includes a system goal to focus on prevention and early intervention for children, youth and their families, recommending that we: build on existing programs that are working; strengthen access to maternal mental health services; improve broad-based supports for families, parenting skills and respite; increase parenting education on supporting children's healthy development; and increase access to early years services for children at risk.

The *Action Plan* also recommends that we deliver programs and services that promote better emotional health for children and youth in schools and other places where they spend time. The recommendation is for an increase in the availability of mental health and addictions clinicians for school-aged children for screening, assessment and early interventions, especially in communities with greatest risk.

This report provides a promising start on transforming mental health and addictions services in Saskatchewan, and we commend the government for this work. At present, the strategy consists of the series of recommendations that will need to be crafted into a concrete plan of action. The Advocate will be monitoring the implementation of this *Action Plan* closely, to ensure that the recommendations are put into practice.

Broadly speaking, this report supports the *Child and Family Agenda*, in concert with other government initiatives, such as the anti-bullying strategy, family resource centre pilot projects, and

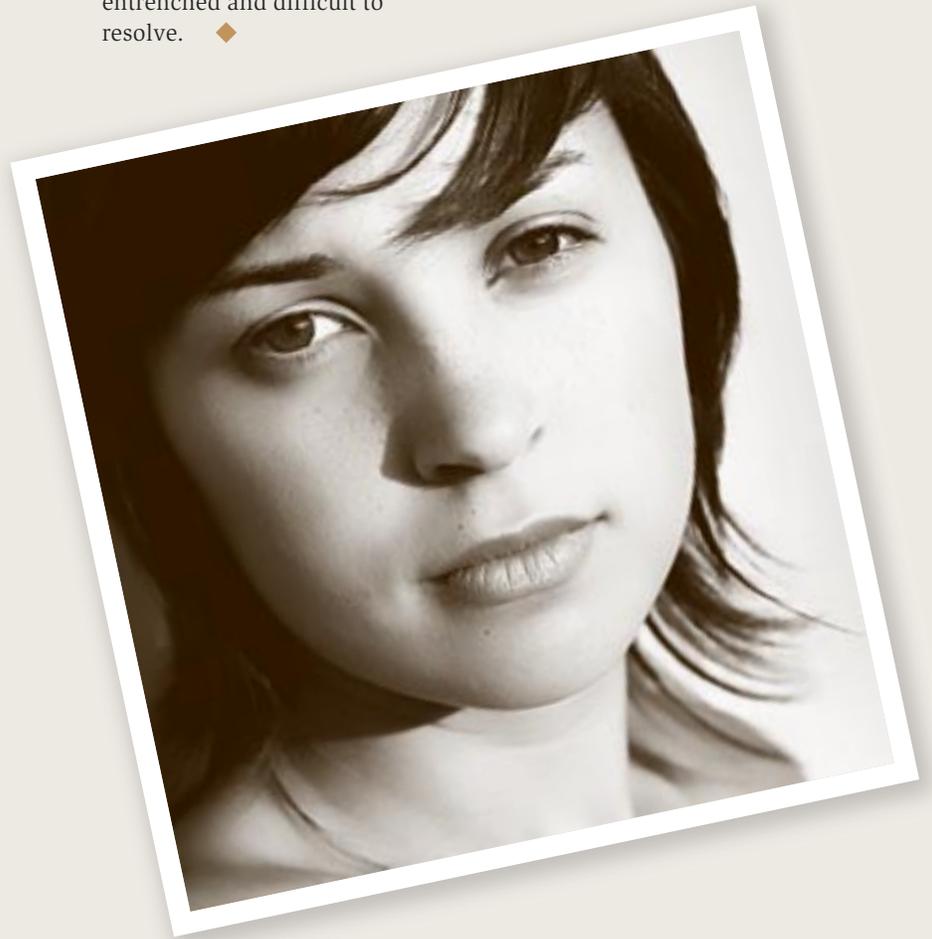
The *Mental Health and Addictions
Action Plan's* recommendations
need to be crafted into a
concrete plan of action





What's Next

The government has developed several initiatives such as the *Child and Family Agenda* and the *Mental Health and Addictions Action Plan*, however, it is not clear at this time what specific actions will be taken to address access to health services for children and youth and we remain uncertain as to what the government's strategy is going forward. Early childhood development has a tremendous impact on long term health, providing families with access to mental health, addictions, and health services is a preventative action that leads to better long term outcomes. Not to overshadow the needs of youth who also require services to address their healthy physical and emotional development and who seem to be subject to the largest service gaps. We will continue to focus our advocacy on providing services to children, youth and their families earlier, so that health and developmental issues can be addressed before they get more entrenched and difficult to resolve. ◆



other learning initiatives. It also has as a system goal to partner with First Nations and Métis peoples in planning and delivering mental health and addictions services that meet community needs, which is very positive.

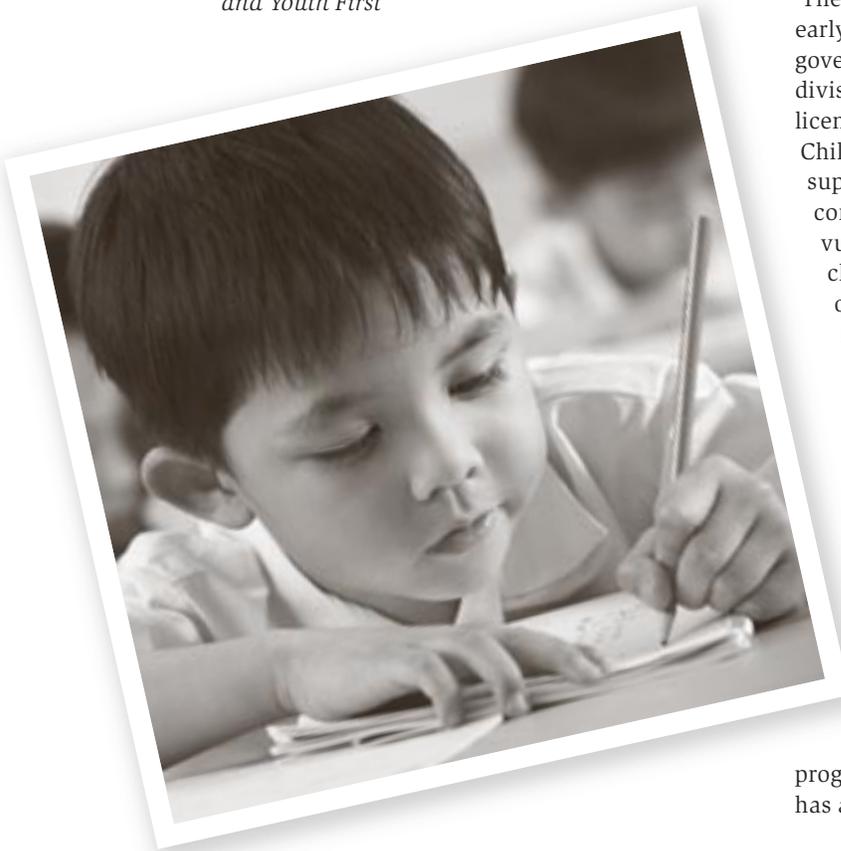
The shortcomings that we identify at this stage of the *Action Plan* is the lack of detail on services for children and youth generally, along with services related to children and youth at risk due to trauma including intergenerational trauma tied to residential schools, family violence, and children and families involved in child welfare system. We need to continue to focus on the systemic factors that place children and youth at risk. Addressing underlying risk factors such as poverty-related conditions, trauma and violence in various forms, mental health and addictions, access to housing, and disabilities is critical to providing appropriate supports and services to children and youth. As the *Action Plan* evolves and takes a more definitive shape, our office will continue to address the needs for child and youth services with the ministries and advise on mental health and addictions issues as they relate to children and youth. ◆

The Education sector is also one of great importance to the work that our office does as it is the system in which many of our children and youth spend the most time. Issues concerning the Ministry of Education make up a small number of concerns reported to the Advocate in 2014.

Education: investing in our future

Although our jurisdiction does not include decisions made by local school boards or matters arising within their jurisdiction, the Advocate does have the authority to advocate, investigate and advise the Ministry of Education on issues that come to our attention.

Under the *Saskatchewan Children and Youth First*



Principles, all children have a right to the highest standard of education possible, in order to reach their full potential. Many young children in Saskatchewan do not have access to the educational services to which they are entitled, due to the limited government investment in this area, and lack of a provincial strategy for the early years designed to reach all children.

We will continue to advocate that the government develop and implement well-resourced early childhood development and poverty reduction strategies to advance the goals of the *Child and Family Agenda*. As we said when we made this recommendation in 2014, government spending on family support and early childhood programs benefits society as a whole – supporting the best interests of children is the right approach. Extensive research shows that this is the most cost effective way to reduce poverty, encourage economic growth and build strong and supportive communities.²³

Increasing early learning services

The Ministry of Education is responsible for the early learning services provided by the provincial government: prekindergarten programs in school divisions for vulnerable three and four year-olds, licensed childcare centres and homes, Early Childhood Intervention Services (home-based support services), and *KidsFirst*, a comprehensive intervention program for vulnerable Saskatchewan families with young children. The Ministry of Education also oversees the three demonstration pilot resource centres in the province (Sandy Bay, Yorkton and Regina), and is evaluating the implementation of these centres, which are intended to support families to improve child outcomes.

In 2014, the Advocate met several times with Ministry of Education staff to provide input on their consultation on early learning services. We advised the Ministry of Education that they already have a strong foundational piece in the Play and Exploration Early Learning Program Guide and associated supplementary resources for programs for three to five year olds. This guide has a children's rights focus: it cites the United

Nations *Convention on the Rights of the Child*, especially in terms of Article 31, which includes the right to play. It also takes a strength-based approach, seeing children as competent learners with many abilities, who are capable of directing their own learning.²⁴

The Advocate commends the Ministry of Education for this child-centred focus, which is in line with the Saskatchewan Children and Youth First Principles. Some of the Ministry's initiatives, such as family engagement in prekindergarten programs and family resource centres, place strong emphasis on supporting families, which is positive and respects their rights.

That said, the Ministry of Education is not resourced sufficiently to provide the highest standard of education for all children. This is particularly apparent in services for young children.

Saskatchewan has the lowest level of licensed childcare in Canada, with spaces for fewer than one in five children, meaning that there are marked shortages of childcare spaces, especially in rural and remote settings. As a result, most children in childcare settings are in unregulated care in private residences, meaning that we have little data about quality and availability, and that it is not operating within a system that can be monitored, supported or regulated to ensure that it is safe and developmentally appropriate.

Prekindergarten programs for three and four-year olds offered through school divisions are not widely available, and are under-funded as the available programs are currently targeted to reach the most vulnerable children rather than implementing blanket funding for all children to participate. The provincial government has not resourced fulltime kindergarten, despite evidence that it results in better outcomes for children, including that from several Saskatchewan school boards that were offering the programs without dedicated funding, and a resolution from the Saskatchewan School Boards Association that they do so. Preschool programs that operate less than three hours a day, or three days a week, are not licensed or funded by the government, meaning that they are not operating within a system that can be monitored or supported either.

While the early learning programming that is available appears to be developmentally appropriate, the fact that it is not widely



accessible does not respect children's rights. Despite increases in the number of prekindergarten programs funded and childcare spaces in 2014, the Saskatchewan government's investments in the early years remains low, and many young children are vulnerable without access to adequate early years programming and services. This is borne out by the Ministry of Education's own data, which shows that 30% of children arriving at kindergarten are "not fully ready for school", as measured by the Early Development Instrument. They are not meeting developmentally-appropriate measures of health and well-being, and not ready to take advantage of the learning opportunities provided by schools. The lack of prevention and early intervention supports for young children, when they are undergoing rapid development and are highly sensitive to their environments, is having a negative impact on their health and development, which will affect them throughout their lives.

23. Kendall-Taylor N, Mikulak A. Child mental health: a review of the scientific discourse. Alberta family wellness initiative 2009 [cited 12 A.D. Oct 23]; Available from: URL:

24. Saskatchewan Ministry of Education. Play and Exploration: Early Learning Programming Guide. April 2008. Available at: <http://www.education.gov.sk.ca/ELCC/play-and-exploration-program-guide>

In 2014, we recommended that the government develop and implement **well-resourced early childhood development and poverty reduction strategies**

Addressing the needs of children who are deaf and hard of hearing

In 2014, our office began discussions with the Ministry of Education regarding early screening, diagnostic, auditory, language and support services for children who are deaf and hard of hearing. Saskatchewan Deaf and Hard of Hearing Services sought our assistance to address some

longstanding gaps in provincially-funded services. In 2015, we will continue to advocate for an improved selection of timely and accessible diagnostic, sign and spoken language services that better supports the inclusion of deaf and hard-of-hearing children and

their families in Saskatchewan childcares, schools and communities.

Bullying

The Government of Saskatchewan made bullying a priority area in 2013 with a public consultation process to develop and release an anti-bullying strategy late that year. Our office was involved in the consultation process, and have committed our role in it to serve as an avenue for unresolved bullying issues for children and families, and participate in public education around children and youth's right to be safe.

In 2014, the Ministry of Education launched an anonymous online bullying

reporting tool, partnered with SaskTel's I am Stronger campaign to provide resources, including a community grant program to support youth to take action to promote kindness and address bullying in their schools and communities. The Ministry funded community-based organizations such as the Canadian Red Cross, Kids Help Phone, Media Smarts, and the Saskatoon Restorative Action Program to provide training, professional learning, and resources to support students to prevent and address bullying. Training included support for students to behave responsibly online, learn more about mental health, and how to seek help if needed, and how to assess and respond to violence or threats of violence in their schools and communities.

In November 2014, 150 students from across the province took part in the second Student First Youth anti-bullying forum. Early in 2015, the Ministry of Education partnered with Crimes Stoppers Saskatchewan to allow students to anonymously text or phone in reports of bullying behaviour, and provided funding to fYrefly Saskatchewan to provide year-round gender and sexual diversity education and support for urban, rural and northern communities in Saskatchewan.

While we commend the Ministry of Education for their work in this area, we note that, to date, it does not include any meaningful actions to increase access to and quality of specialized mental health services for children and youth involved in bullying, nor provisions for data-gathering and analysis to understand the prevalence and nature of bullying in Saskatchewan, or evaluate the success of this strategy to reduce it. There also is no legislative framework, such as amendments to *The Education Act* or regulations, to make government's responsibilities with respect to bullying prevention and intervention explicit.

We will continue to monitor the government's commitment to implementing its *Plan to Address Bullying and Cyberbullying*, to ensure that young people have access to the resources that they need to be safe from bullying in schools and in their communities, and look forward to continuing to advise and support the Ministry of Education in implementing this Plan. ◆

Through the anti-bullying strategy, the government and its partners **have made resources available online and in schools**



What's Next

In the coming year, our office will continue to advocate that an early childhood development strategy form part of the poverty reduction strategy that is in development, and advocate for the needs of children and youth who are deaf and hard of hearing. We will continue monitoring the implementation of the *Plan to Address Bullying and Cyberbullying*, and other initiatives in the schools, such as the citizenship education

curriculum being developed with the Saskatchewan Human Rights Commission on rights, responsibilities and respect, for students in kindergarten to grade 12. With the amount of time that our children and youth spend in the school system, it is imperative that we have a good understanding of the education sector, and continue to strengthen our relationships with the Ministry of Education. ◆

Investing in early childhood development upholds children's rights and improves their lifelong outcomes

In late 2012, an expert panel of Canadian early childhood researchers brought together by the Royal Society of Canada and the Canadian Academy of Health Sciences published a scientific review of the evidence on early childhood development: adverse experiences and developmental health. The call to action which concludes this report sums up the evidence of the benefits of early intervention clearly:

“This report makes a strong case, based upon evidence from epidemiology, biology and intervention research, for focusing on the early years as a time to break the cycle linking early childhood experiences to mental health problems and unhealthy behaviours in adolescence and young adulthood. This evidence is fortuitous, because it reinforces other powerful reasons for investing in the early years. According to the United Nations *Convention on the Rights of the Child*, Canada has a duty to both protect young children from adverse experiences and, also, to

create the opportunity for young children's capacities to develop their potential (United Nations, 1991, 2005). In other words, Canada has committed itself both to prevent the negative and to create the positive in the early years. Next, the World Health Organization's Commission on the Social Determinants of Health (World Health Organization, 2008) made it clear that investing in the early years may be the best way to reduce health inequalities across the life course. Finally, a consensus among economists has emerged that economic returns on investment in the early years, through enhanced school success, reduced criminality, and improved well-being are, potentially, greater than any other investment in health, education, or human development that a wealthy society can make (Heckman, 2006). For all these reasons, Canadian children and their families deserve a robust strategy for tackling unhealthy behaviours and mental health through investment in the early years”²⁵ (pp 125-6). ◆

25. Boivin, Michel, & Hertzman, Clyde. (Eds.). (2012). *Early Childhood Development: adverse experiences and developmental health*. Royal Society of Canada - Canadian Academy of Health Sciences Expert Panel (with Ronald Barr, Thomas Boyce, Alison Fleming, Harriet MacMillan, Candice Odgers, Marla Sokolowski, & Nico Trocmé). Ottawa, ON: Royal Society of Canada. Available from: https://rsc-src.ca/sites/default/files/pdf/ECD%20Report_0.pdf

The Advocate for Children and Youth helps to deliver good public service

Through our advocacy, investigation, public education, research and advisory functions, the Advocate for Children and Youth assists the Government of Saskatchewan to deliver good public service.

About the Advocate's Office

Our office operates under *The Advocate for Children and Youth Act*. This legislation continues to place Saskatchewan at the forefront of child and youth advocacy in Canada. We have one of the broadest mandates for an Advocate office in the country, in terms of scope and actions we can take to advance the rights, interests and well-being of children and youth. We can examine any provincial government service provided to children and youth, and have a range of tools to

resolve those matters that come to our attention. Our office is small comparative to our broad mandate, and our counterparts across Western Canada.

The Advocate for Children and Youth is required to submit to the Legislative Assembly an annual report describing the progress and activities of our office in the previous year. The 2013 Annual Report was tabled on May 6, 2014.

The Advocate may also, from time to time in the public interest or in the interest of any person, ministry or agency of government, publish special reports on any matter or particular case that has been investigated. In 2014, the Advocate released two special investigation reports into individual children's deaths: *Two Tragedies: Holding Systems Accountable*, released on May 14, 2014, and *Lost in the System: Jake's Story*, released on September 16, 2014.

Additionally, the Advocate made almost 300 public education presentations, issued 10 press releases, gave numerous interviews, had three Op Ed pieces published in the Saskatoon Star Phoenix, two of which were also published in the Regina Leader Post, and was active on social media. ♦



	2013-14 Budget	2014-15 Budget
Budgetary Expenditures		
Personal Services	\$ 1,403,000	\$ 1,804,000
Contractual Services	\$ 366,000	\$ 330,000
Advertising, Printing & Publishing	\$ 31,000	\$ 32,000
Travel & Business	\$ 90,000	\$ 101,000
Supplies & Services	\$ 7,000	\$ 7,000
Capital Assets	\$ 16,000	\$ 17,000
One-time Funding	\$ 621,000	-
Budgetary Total	\$ 2,534,000	\$ 2,291,000
Statutory Expenditures		
Personal Services	\$ 210,000	\$ 232,000
Statutory Total	\$ 210,000	\$ 232,000
TOTAL	\$ 2,744,000	\$ 2,523,000

These columns are based on our audited financial statements, which follow our fiscal year (April to March). Our Annual Report follows the calendar year. Audited financial statements are available on our website, www.saskadvocate.ca, under Media, Resources & Publications.

Advocate and Staff (as of December 31, 2014)

Advocate for Children and Youth: Bob Pringle

**Program Manager,
Advocacy and Public Education:** Leeann Palmer

**Program Manager, Systemics,
Investigations and Research:** Lisa Broda

Regional Advocates:

Jocelan Ireland	Chandra LePoudre
Meredith Newman	Jacqueline Peters
Cheryl Starr	Treena Wynes

Investigators:

Connie Braun	Lua Gibb
Marci Macomber (on leave)	

Systemic and Policy Advocate: David Gullickson

Director of Administration: Bernie Rodier

Executive Administrative Assistant:
Caroline Sookocheff

Administrative Assistants:

Colette Duffee	Sandi Elliot
Jennifer Kovar	

Senior Advisor, Communications:

Fleur Macqueen Smith



As part of its public education mandate, representatives from the Advocate for Children and Youth make many presentations and speeches and attend events each year. In 2014, these included the following:

Presentations, Speaking Engagements and Event Attendance

Presentations to Children and Youth in Custody

Kilburn Hall, Saskatoon
Drumming Hill Youth Centre, North Battleford
North Battleford Youth Centre, North Battleford
Prince Albert Youth Residence, Prince Albert
Orcadia Youth Residence, Yorkton
Yarrow Youth Farm, Saskatoon

Presentations to Children and Youth in Care

4 Directions Child & Family Services Stabilization and Assessment Inc., Lestock
Athabasca Denesuline Therapeutic Youth Care Home, Black Lake
Bethany Group Home, Salvation Army, Saskatoon
Calder Centre Youth, Saskatoon
Carmel House, Saskatoon
Core Neighbourhood Youth Co-op, Saskatoon
Dube Centre Youth Meeting, Saskatoon
Eagles Nest Youth Ranch Homes, North Battleford
Eagles Nest Youth Ranch Homes, Prince Albert
Eagles Nest Youth Ranch Emergency Receiving Home, Prince Albert
Eagles Nest Youth Ranch Homes, Saskatoon
Egadz My Homes, Saskatoon
Egadz Baby Steps, Saskatoon
Egadz Youth Centre, Saskatoon
Gamin Abet Child Home, Moose Jaw

Glinn House, Street Culture Kidz Project Inc., Regina
Grace Haven, Salvation Army, Regina
Hope's Home, Prince Albert
Leading Thunderbird Lodge, Regina
Onion Lake Child and Youth Group Home, Onion Lake
Pamiyisohk – Steps to Independent Living Inc., North Battleford
Prince Albert Native Coordinating Council, Sundance Home, Prince Albert
Prince Albert Native Coordinating Council Peer Home, Prince Albert
Prince Albert Grand Council Group Home, Prince Albert
Rainbow Youth Centre, Regina
Ranch Ehrlo Society, Saskatoon
Ranch Ehrlo Society, Klassen House, Buckland
Ranch Ehrlo Society Student Council, Pilot Butte
Ranch Ehrlo Society, Matheson House, Buckland
Ranch Ehrlo Society, May House, Saskatoon
Ranch Ehrlo Society, Welke House, Saskatoon
Saskatoon Tribal Council Safe House, Saskatoon
Saskatoon Tribal Council Children's Home, Saskatoon
Saskatoon Tribal Council Pewasayaw Home, Saskatoon
Saskatoon Tribal Council Oskayak wikiwaw, Saskatoon
EGADZ Baby Steps, Saskatoon
U-Turn, Regina
Valley Hill Youth Treatment Centre, Prince Albert
Yorkton Transition Homes, Yorkton

Presentations to Government or Delegated Agencies' Staff and/or Board Members

Ministry of Social Services

Child and Family Services, Estevan
Child and Family Services, Lloydminster
Child and Family Services, Rosetown
Child and Family Services, Saskatoon
Child and Family Services, Weyburn

Ministry of Justice, Corrections and Policing Division

Community Corrections Adult and Youth Supervisors and Out of Scope Management team
Prince Albert Youth Residence staff
Young Offender Programs, Prince Albert

First Nations Child and Family Service Agencies

Athabasca Denesuline Child and Family Services

Battleford Tribal Council Child and Family Services

Montreal Lake Child and Family Services, Montreal Lake

Nechapanuk Centre Child and Family Services

Onion Lake Group Home Staff, Onion Lake Family Services, Onion Lake

Peter Ballantyne Child and Family Services

Saskatoon Tribal Council, Urban Justice Program, Saskatoon

Yorkton Tribal Council, Child & Family Services, Lestock

Yorkton Tribal Council, Yorkton

Other Government

Calder Centre, Ministry of Health, Saskatoon

Child and Youth Mental Health Services, Prairie North Health Region

Dube Centre, Ministry of Health, Saskatoon

HUB Committee, Ministry of Justice, Estevan

King George School, Saskatoon Public School Division

Mental Health and Addictions, Child and Youth, Ministry of Health

Community-Based Organizations

Canadian Club of Regina, Regina

Crisis Nursery, Saskatoon

Egadz Drop-in Centre Staff, Saskatoon

Family Futures, Prince Albert

Kapachee Training Centre, Fort Qu'Appelle

Kids in Transition Shelter, YWCA, Regina

Moose Jaw Family Services, Moose Jaw

Open Door Society, Saskatoon

Prince Albert Friendship Centre, Prince Albert

Prince Albert Native Coordinating Council, Sunshine Haven

Ranch Ehrlo Society, May House Staff, Saskatoon

Ranch Ehrlo Society, Welke House Staff, Saskatoon

Saskatchewan Aboriginal Professionals Network, Saskatoon

Saskatchewan First Nations Family and Community Institute, First Nations Group Home Staff Training

Saskatchewan Youth in Care and Custody Network, Moose Jaw

Saskatchewan Youth in Care and Custody Network, Regina

Saskatchewan Youth in Care and Custody Network, Saskatoon

SCEP Centre (Socialization, Communication and Education Program for young children and their families), Regina

Conferences, Speaking and Public Engagements

Athabasca Denesuline Therapeutic Group Home Grand Opening, Black Lake

Bedford Road School Powwow, Saskatoon

Best Interest of the Child: Working Together to Improve the Lives of all Children, Johnson Shoyama Graduate School of Public Policy, Saskatoon (keynote speaker)

Bikers Against Child Abuse Public Presentation, Saskatoon

Building Good Relations... There's so much More Conference, All My Relations Network, Saskatchewan Conference of the United Church of Canada, Blackstrap (keynote speaker)

Canadian Knowledge Mobilization Forum, Saskatoon (presenter)

Children as Citizens: The Child Welfare System and Indigenous Peoples public workshop, Johnson-Shoyama Graduate School of Public Policy/Indigenous People's Health Research Centre, Saskatoon

College of Law, University of Saskatchewan, Public Lecture by Cindy Blackstock, Saskatoon

Community Schools Partnership Breakfast, Saskatoon

Eagles Nest 4th Annual Talent Night, Warman

Eagles Nest Youth Ranch Annual River Run, North Battleford

Egadz Sweet Dreams Grand Opening, Saskatoon

Egadz Youth Centre Christmas Party, Saskatoon

FASD Awareness Day, Métis Addictions Council of Saskatchewan, Saskatoon

FASD Live, FASD Support Network of Saskatchewan, Saskatoon

Foster Families Appreciation Suppers in Moose Jaw, North Battleford, Prince Albert, Regina, Saskatoon, Weyburn and Yorkton

FSIN Legislative Assembly, Whitecap First Nation

Health Promoting Schools event, Saskatoon Health Region

International Summer Course on the Rights of the Child, University of Moncton, New Brunswick

Kanaweyimik Child and Family Services Cultural Camp, Cochin

Kanaweyimik Youth Conference, North Battleford

Kilburn Hall Christmas Party, Saskatoon

Kilburn National Aboriginal Day Round Dance, Saskatoon

Law Society of Saskatchewan, Saskatoon

League of Educational Administrators, Directors and Superintendents Summer Short Course, Waskesiu (keynote speaker)

Presentations, Speaking Engagements

Legislative Renewal Committee, Touchstones of Hope for Indigenous Children, Youth and Families Sessions, Regina

Mental Health Symposium, Alberta Child and Youth Advocate, University of Alberta

Ministry of Social Services Picnic in the Park, Saskatoon

Ministry of Social Services Satellite Location Community Lunch, Saskatoon

Montreal Lake Child and Family Services, Foster Family Appreciate Banquet, Prince Albert

Montreal Lake Children in Care Christmas Party, Montreal Lake

Montreal Lake First Nation Camp Hope Grand Opening, Montreal Lake

Moving Beyond Residential Schools: Power to Change Conference, Prince Albert

National Aboriginal Day Celebration, Kilburn Hall, Saskatoon

National Aboriginal Day Celebration, North Battleford Youth Centre

North American Indigenous Games (NAIG), Lance Run, Prince Albert to Saskatoon

Onion Lake Annual Culture Camp, Onion Lake

Orcadia Youth Residence Christmas Dinner

Oskayak School Powwow, Saskatoon

Our Dreams Matter Too walk and awareness event, Saskatoon

PAGC Childcare Education Centre Christmas Party, Prince Albert

Peter Ballantyne Child and Family Services Accreditation Celebration Event, Prince Albert

Prairie Child Welfare Consortium Symposium, Saskatoon (keynote speaker)

Prince Albert Early Childhood Council meetings

Public Consultation on Missing and Murdered Aboriginal Women, Saskatoon

Ranch Ehrlo Awards Night, Prince Albert

Ranch Ehrlo Awards Night, Regina

Ranch Ehrlo Society Annual Northern 3-Mile Race, Martensville

Ranch Ehrlo Winter Festival, Buckland Rural Municipality

REDress Project Round Table and Community Discussion, Saskatoon

Regina Police Service Strategic Plan Presentation, Regina

Sakicawasihk Gold Eagle Casino Powwow, North Battleford

Saskatchewan Aboriginal Professionals Networking Events, Saskatoon

Saskatchewan First Nations Winter Games, Prince Albert

Saskatchewan Foster Families Association Christmas Party, Saskatoon

Saskatchewan Foster Families Association 40th Anniversary Banquet, Saskatoon

Saskatchewan Foster Families Association Christmas Party, North Battleford

Saskatchewan Teachers' Institute on Parliamentary Democracy, Legislative Assembly, Regina

Saskatchewan Youth in Care and Custody Network events, Saskatoon

Saskatchewan Youth in Care Week Banquet, Regina

Saskatoon Early Years Partnership meetings

Saskatoon Federation of Early Learning, Early Learning and Childcare Month Kick-off Month, Saskatoon (keynote speaker)

Saskatoon Police Service, Youth Advisory Committee

Saskatoon Police Services Station Grand Opening, Saskatoon

Saskatoon Police Services Youth Advisory Committee, Saskatoon

Saskatoon Tribal Council Mascot Naming Ceremony, Westmount Community School, Saskatoon

SIAS, Youth Care Worker Program, Saskatoon

Sisters in Spirit Walk, Saskatoon

Str8 Up Conference, Saskatoon

Sturgeon Lake Child and Family Services Feast and Round Dance, Saskatoon

Sturgeon Lake Child and Family Services Feast, Sturgeon Lake

Sturgeon Lake Child and Family Services Traditional Camp, Sturgeon Lake

Teen Summer Camp, Agency Chief Child and Family Services

University of Regina, Masters of Social Work Class, Regina

University of Regina, Nursing Students, Saskatoon

University of Regina, Social Work Class, Regina

University of Regina, Social Work Class, Saskatoon

University of Regina, Sociology Class, Saskatoon

Walking with Our Sisters Grand Opening Ceremony, Closing Ceremony, Wanuskewin

West Central Regional Intersectoral Committee, Kindersley

Working Together Moving Forward - Provincial Health Promotion Forum on healthy children, youth and families, Saskatoon (presenter)

Yarrow Youth Farm Christmas Party, Saskatoon







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