

Staying At Home
Examining the implications of Least Disruptive Measures in First Nations
Child and Family Service Agencies



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Honouring

The First Nations Child and Family Caring Society dedicates this paper to Aboriginal families and communities who work each day to keep their children safely at home.

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INTRODUCTION: The Special Place That Children Hold In Aboriginal Cultures

The Royal Commission on Aboriginal Peoples (RCAP) Report (1996) describes the special place that children hold in Aboriginal cultures: "According to tradition, children are gifts from the spirit world and have to be treated very gently lest they become disillusioned with this world and return to a more congenial place. They must be protected from harm because there are spirits that would wish to entice them back to that other realm. They bring a purity of vision to the world that can teach their elders. They carry within them the gifts that manifest themselves as they become teachers, mothers, hunters, councillors, artisans and visionaries. They renew the strength of the family, clan and village and make the elders young again with their joyful presence."

Today there are over 100 First Nations and child and family services agencies (FNCFSA) across Canada that are charged with the responsibility of protecting children, strengthening and preserving families, and helping to build healthy communities. In essence they are charged with the responsibility of helping families and children through the provision of child and family services. They have been entrusted with a responsibility – to help protect the special place that children and youth hold in First Nations families, kinship systems, communities and cultures. These agencies have been mandated by their communities and by their respective provincial/territorial authorities to deliver a range of child and family services, including child protection services, services to children in care, adoption services, services to families and services to community. The agencies are dependent upon the Department of Indian Affairs and Northern Development (DIAND) as their primary source of funding for services that they provide to children and families resident on-reserve.

This paper examines the implications of least disruptive measures by reviewing the literature regarding family-centered services and family preservation services as a "least disruptive measures" model and presents the results of a survey of First Nations Child and Family Service agencies on least disruptive measures. It also examines the range of services that would be classified as "least disruptive measures"

that are found in provincial/territorial legislation. Lastly, it makes some recommendations based on “best practices” for review and discussion by policy makers.

THE DIAND FIRST NATIONS CHILD AND FAMILY SERVICES PROGRAM

The main objective of the First Nations Child & Family Services (FNCFS) Program funded by the Department of Indian Affairs and Northern Development (DIAND) is to assist First Nations in providing culturally sensitive child and family services in their communities, and to ensure that the services provided by FNCFS to First Nations children and their families on-reserve are comparable to those available to other provincial residents in similar circumstances. However, since child and family services is an area of provincial jurisdiction, FNCFS are required to receive their mandate and authorities from provincial or territorial governments. Further, FNCFS are expected to function in a manner consistent with existing provincial or territorial child and family services legislation. According to DIAND “FNCFS are mandated by the province in accordance with provincial legislation, to deliver: (1) prevention services to families, in order to keep children in the home; (2) protection services to children at risk; (3) adoption services where required by provincial legislation” (fncfs-sef_e.dpf).

DIAND’s commitment to assist in the development and establishment of FNCFS to serve First Nations people residing on-reserve can be seen in the growth of the number of FNCFS from 34 in 1989 to 105 by 2000 and in the increase of overall FNCFS program expenditures which increased more than 61% from 1992 to 1999 (www.ainc-inac.gc.ca). Today, there are more than 120 FNCFS across Canada.

THE JOINT NATIONAL POLICY REVIEW ON FIRST NATIONS CHILD AND FAMILY SERVICES

In June 2000, the Department of Indian Affairs and Northern Development (DIAND), in partnership with the Assembly of First Nations (AFN) completed a joint national policy review (JNPR) on First Nations child and family services. More specifically, the review focused on the federal funding structure for FNCFS,

commonly referred to as "Directive 20-1" which has a formula driven process to determine Operations funding for FNCFSA and a reimbursement process for Child Maintenance funding (actual costs of children in care) based on allowable actual expenditures. The principles underlying the funding structure in Directive 20-1 are threefold:

1. Equity – all FNCFSA will be funded on the same basis, according to the same formula, across Canada.
2. Comparability - to ensure that the services provided to First Nations children and their families on-reserve are comparable to those available to other provincial residents in similar circumstances.
3. Flexibility – so that FNCFSA would be able to plan their services and set their own priorities according to community need.

The review was undertaken consistent with Canada's commitment to work with First Nations in a spirit of partnership (www.ainc-inac.gc.ca). The purpose of the review was to identify how the current policy could be improved. The review resulted in a Joint National Policy Review Final Report (JNPR) (McDonald, Ladd, et al, 2000) that contained seventeen recommendations for improvements to existing DIAND policy. The JNPR found that First Nations communities, the provinces and DIAND expect mandated FNCFSA to provide a comparable range of services on reserve with the funding received through Directive 20-1. These expectations do not take into account the individual circumstances of a FNCFSA or how broad, intense or costly it might be for an agency to provide that comparable range of services (p.13). Overall the JNPR found that according to 1999 funding levels, FNCFSA received 22% less funding per child than the average province despite the fact that Aboriginal children are at increased risk for child maltreatment. Further, the JNPR Joint Steering committee found that the funding formula for Operations does not provide "adequate resources to allow FNCFSA to do legislated/targeted prevention, alternative programs and least disruptive measures for children at risk" (p.17) (i.e., services that must be provided to children at risk and the families to mitigate the risk of child maltreatment before considering removal of the child and placement in out of home care). Consequently, one of the seventeen recommendations

in the final report specifically called for “augmenting the funding level for least disruptive measures services”.

CONCERNS ABOUT THE NUMBER OF ABORIGINAL CHILDREN IN OUT OF HOME CARE

Despite the increases in the overall number of FNCFSA and FNCFS program expenditures, the number of First Nations children in out-of-home placements continues to grow. DIAND figures show a 71.5% increase in the number of on-reserve First Nations children in care from 1995 to 2001 (McKenzie 2002). Although this increase does not correlate with the 1% decrease in the population of North American Indian children during this same time period (Statistics Canada, 2000), some of this growth might be contributed to the fact that prior to the establishment of FNCFSA, the provincial CFS agencies (or Children’s Aid Societies) were only providing minimal services on reserve (www.ainc-inac.gc.ca) leaving a large segment of families whose needs were not served. However, First Nations child and family service agencies report that this increase is also related to the way in which DIAND funds FNCFSA. The JNPR found that the “Directive, while facilitating the development of over 100 FNCFSA serving on-reserve communities, has been broadly criticized for its emphasis on supporting child removal and placement versus allocating resources to community development and prevention resources” (MacDonald & Ladd, 2000).

This continuing increase in the numbers of on-reserve First Nations children in care gives pause to First Nations child welfare professionals and government officials and makes it imperative that new ways of providing services be developed and that alternatives to the removal of children from their families be found. As one step, it is vitally important that the funding level for “least disruptive” measures/services be increased so that FNCFSA can provide the appropriate family support and family preservation services to families “at risk” to allow their children to remain at home. FNCFSA need adequate funding and the appropriate resources to take a Family Centered services approach as a “least disruptive measures

model” that will provide alternatives to removing children from the care of their parents. First Nations communities need access to a continuum of family and children’s services that are “family centered” and include resources to support and strengthen families, to provide rehabilitative family services, intensive family services and family reunification services (Red Horse, Martinez, et al, 2000; McCroskey and Meezan, 1998).

THE SPECIAL PLACE THAT CHILDREN HOLD IS THREATENED BY FAMILY BREAKDOWN

The Royal Commission on Aboriginal Peoples (RCAP, 1996 Volume 3) found that the impacts of colonization have eroded Aboriginal family systems of care. Consequently, many Aboriginal families “at risk” breakdown and Aboriginal children continue to be placed in out-of-home care at a disproportionate and alarming rate. The phenomena of Aboriginal family breakdown has not gone unnoticed by community leaders, government officials, educators, human services professionals and grassroots people, all of whom share the view that something must be done to help these families. Many believe that intervention in families “at risk” should come earlier, before problems escalate and lead to family breakdown. The Social Agenda Working Group for the Northwest Territories states: “We know that spending money on programs for very young children and supporting women to not drink before or when they become pregnant leads to a healthier society and long-term savings. Helping children as soon as we know they have problems has a life-long benefit. As problems get worse, they are harder and more expensive to deal with. This makes a good case for prevention and early intervention” (A Social Agenda for the NWT, 2003).

Aboriginal family breakdown and the disproportionate risks faced by Aboriginal children has garnered international attention as well. The United Nations Committee on the Rights of the Child has called for Canada to take action to address inequalities (United Nations Committee on the Rights of the Child, 2003.)

EXAMINING THE CAUSES OF ABORIGINAL FAMILY BREAKDOWN

Before discussing the “family centered” services model as an alternative to removing children from the care of their parents; it’s important to pause and examine some of the many issues that have a negative impact on Aboriginal families and lead to family breakdown. The negative impacts of colonization, the federal residential school policy, misguided mainstream child welfare practices, the debilitating effects of poverty, and apathy by the voluntary sector of society are issues that face Aboriginal families today. It is important that caseworkers for Aboriginal families understand the issues of historical grief, colonization, the painful legacy of the residential school experience, and the debilitating effects of poverty and substance abuse. These are the primary issues that lead to family breakdown and result in children and youth being removed from their parents and placed in out-of-home care.

The Impact of Colonization on Aboriginal Family Systems

The current challenges that Aboriginal families face are rooted in a history of struggle that began with colonial governments and continues today with modern society and its insistence on absorbing “Indians” into Euro-Canadian culture and society. “First Nation families have been in the centre of a historical struggle between colonial government on one hand, who set out to eradicate their culture, language and world view, and that of the traditional family, who believed in maintaining a balance in the world for the children and those yet unborn. This struggle has caused dysfunction, high suicide rates, and violence, which have had vast inter-generational impacts.” (McDonald, Ladd, et. al., 2000) Consistent with the findings of RCAP, the JNPR Final Report describes a list of historical and socio-economic issues that influence the health and well being of First Nations families today. First Nations peoples are still striving to overcome the historical trauma of colonization that resulted in the disenfranchisement of First Nations peoples from their lands and the concordant destruction of traditional economies and ways of life. The colonization of First Nations peoples in Canada took the form of compulsory education, economic adjustment programs, social and political control by federal agents, and much more. These policies,

combined with missionary efforts to civilize and “Christianize” First Nations people resulted in widespread fractures to traditional cultures, autonomy and feelings of self-worth.

The Legacy of the Residential School Experience

Federal policies designed to assimilate “the Indian” like the residential school policy have had a profoundly negative impact on family functioning that “reverberates through successive generations... resulting in “layers of pain” that touch whole communities as well as individuals” (RCAP, 1996; Castellano, 2002).

For children, the residential school deprived them (and future generations) of healthy parental role models, replacing the nurturing loving parent with a cold and often cruel “dean or matron” who served as a surrogate parent. In turn, when these children became parents many suffered from “a diminished capacity as adults to care for their children” (Bennett and Blackstock, 2002).

Misguided Mainstream Child Welfare Policies

First Nations families have also suffered because of past child welfare policies that were predicated on a view that First Nations traditional family systems with all their extended kinship connections, support mechanisms and responsibilities were inferior to the nuclear family concept so predominant in Euro-Canadian society. In a phenomena known as “the Sixties Scoop” (Aboriginal Justice Inquiry, 2001; Union of BC Indian Chiefs, 2002) provincial child welfare social workers, in a misguided notion that they were helping, removed thousands of Aboriginal children from the care of their families and placed these children in non-Aboriginal adoptive homes throughout Canada and the United States.

The “Sixties Scoop” points to two major problems that have been associated with the practice of mainstream child welfare in Canada, problems that continue today and now plague First Nations child welfare practice. First, “child removal was relied upon as the primary intervention in child maltreatment cases versus the intervention of last resort” (Blackstock, Trocmé & Bennett, in press). Secondly, as the removals took place there was little effort by governments to address the etiological drivers of child maltreatment such as poverty, unemployment and sub-standard housing conditions or the lack of

culturally based prevention services (Union of B.C. Chiefs, 2002, Blackstock, 2003). FNCFS report that the need to follow provincial child welfare legislation coupled with inadequate funding for least disruptive measures and community development, results in a disproportionate number of First Nations children being placed in out of home care.

Stanley, Cadd and Pocock (2003) point out that Euro-western social work pedagogy and the programs that arise from it focus on the parent-child relationship and fail to adequately consider parental history, community interaction and context and the impacts of broader societal issues. The disproportionate focus on the parent-child relationship in mainstream social work practice inadequately accounts for the pervasive multi-dimensional and multi-generational impacts of colonization on First Nations families.

The Debilitating Effects of Poverty

Statistics about the gap between Aboriginal and non-Aboriginal social conditions indicate that the life chances of Aboriginal people as a whole lag far behind those of the general Canadian population. "The Human Development Index (HDI) published by the United Nations Development Programme is a widely quoted measure of well-being. It quantifies the standards of education, income and life expectancy (as a proxy for health status) prevailing in nation states and ranks them on a composite HDI. Canada has regularly ranked number one in recent years. An analysis done by the Research and Analysis Directorate of Indian and Northern Affairs Canada (INAC) using 1996 census and INAC departmental data indicated that registered Indians on-Reserve would rank 62nd and registered Indians on- and off-reserve would rank 47th on the HDI" (Castellano, 2002). The social and economic conditions experienced by many on-reserve First Nations people are similar to those experienced by families in third-world countries. Pervasive poverty, substandard housing conditions, widespread alcohol and solvent abuse involving adults and children, and high suicide rates among youth are stark realities.

The negative impact of poverty on early childhood development is well documented in thousands of studies throughout the world (World Bank,1999; World Health Organization,1999; UNICEF, 2003;

Campaign 2000, 2004). The condition of poverty threatens the health and well-being of children and risks excluding children from the chances and opportunities to succeed. Poverty continues to be one of the most important determinants of life chances (The Early Childhood Development Initiative, Ontario 2001). In Canada, the impact of poverty on Aboriginal children and youth is also well documented. "The government's demonstrated commitment to the cause of children's rights suggest that some populations have been less well-served than others. First Nations, Métis and Inuit children and youth are a case in point. Not only do they suffer from significantly higher rates of morbidity and mortality than other Canadian children, but poverty is endemic in many First Nations and Inuit communities, resulting in a sub-standard quality of life and widespread alienation" (Stout, M.D. & Kipling, G.D., 1999).

A United Nations report on a decade of child poverty in Canada found that: "Among Aboriginal children, whether living on or off reserve, almost one in two lives in poverty. Aboriginal people are 4 times more likely to report ever experiencing hunger than the non-Aboriginal population. Many children in First Nations' communities do not have access to the essential public services that most people in Canada take for granted. Among all Aboriginal households (owners and renters), an estimated one-third have 'core needs'; that is, their housing does not meet today's standards for adequacy, suitability and affordability...Most of the nations that have been more successful than Canada at keeping low levels of child poverty are willing to counterbalance the effects of unemployment and low paid work with substantial investments in family policies" (The UN Special Session on Children, Campaign 2000, May 2002).

While the impact of poverty on early childhood development is well understood, the impact of poverty and its attending problems on First Nations families whose children are placed in out-of-home care due to child maltreatment is only starting to be fully understood here in Canada. According to the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS 98) (Trocme, MacLaurin, Fallon, et. Al, 1998), Aboriginal families experience an extremely high rate of hardship. "Aboriginal families were characterized by significantly less stable housing, greater dependence on social assistance, younger

parents, more parents having been maltreated as children, higher rates of alcohol and drug abuse, and being investigated more often for neglect or emotional maltreatment. Higher rates of suspected and substantiated cases and child welfare placement were explained by the disproportionate presence of risk factors among Aboriginal families” (Blackstock, Trocmé & Bennett, in press).

The CIS-98 study suggests that a complex set of factors underlie the over-representation of Aboriginal children in the child welfare system. “The high rates of poverty, inadequate housing and substance abuse that seem to be leading to this over-representation are problems that extend beyond the child welfare system. While shifting control of child welfare services to Aboriginal communities should help in the development of services that are more appropriately geared to the needs of Aboriginal children and families, we should not expect to see a significant decrease in admission rates until resources are allocated to address social problems that undermine parents’ abilities to care adequately for their children” (Trocmé, Knoke, & Blackstock, 2004).

Lack of Engagement by the Voluntary Sector

As reported by Nadjiwan and Blackstock (2003), the voluntary sector receives 90 Billion dollars in annual revenues to provide Canadians with a myriad of support and quality of life services ranging from food banks, arts and recreation programs, education and health support and advocacy services. This national study found very little evidence that voluntary sector organizations provide services on reserve to children and families nor did First Nations organizations on reserve benefit from the vast amount of voluntary sector funding. The absence of this vital sector of supports places additional stress on the already inequitable resources provided by DIAND to First Nations child and family service agencies. It is important to stress that voluntary sector supports are NOT intended to replace child protection services, rather, they complement the range of social supports provided by child protection services agencies and other government programs for children.

STAYING A HOME – LEAST DISRUPTIVE MEASURES: BEST PRACTICE CONSIDERATIONS

There is little argument about the concept that children should be allowed to grow up and develop in their own homes with their parents or caregivers, among their siblings and within their cultural community. This is consistent with the United Nations Convention on the Rights of the Child; families are the best environment to provide a safe and loving atmosphere for children that respects and affirms their cultural and spiritual identity. Children are entitled to grow up in their families without interruption and without unwarranted interference from government agencies. The United Nations Convention on the Rights of the Child (CRC) handbook on protection recognizes the family as the natural environment for the growth and well being of children and the right of a child not to be separated from his or her parents against their will unless it is necessary to protect the child from abuse or neglect. The CRC also states that “it is important to work toward reducing the numbers of children who have to be removed from their families. Providing more supports for families would be helpful” (Canadian Coalition for the Rights of Children, 2002).

The use of Family Preservation Services and Family Centered Services models in child welfare practice as an alternative to the removal of children from their parents are increasing throughout the United States and Canada. In the United States, Family Preservation Services came into popular use, in large part because of three different pieces of federal legislation: 1) The Indian Child Welfare Act of 1978 (ICWA), 2) The Adoption Assistance and Child Welfare Act of 1980 (AACW) and 3) The Adoption and Safe Families Act of 1997 (ASFA).

The ICWA provided the legal framework that recognized the jurisdictional authority of tribal governments over Indian children. ICWA mandated that American Indian definitions of family be used as a guide for child welfare and it reaffirms extended family as defined by tribal law or custom. ICWA recognizes that American Indian family systems differ from mainstream versions and makes explicit that this difference is

not, in itself, a cause for determining that Indian childrearing practices are deficient. It is also significant that ICWA calls into question the expertise of mainstream professionals in child protection to make decisions about American Indian children and families.

“ICWA introduced three major shifts in policy. First, it established the authority and sovereignty of tribal governments over member children. Second, it provided procedures and priorities for notification of child custody and termination of parental rights. Last, it launched a heroic effort to prevent the breakup of Indian families by influencing child welfare and family preservation services. In this sense, ICWA was a precursor to the Adoption Assistance and Child Welfare Act of 1980 and to conceptual shifts in policy from deficit models to models of strength in health and human services” (Red Horse, Martinez, et al, 2000). As ICWA set the stage for a model of family preservation for Indian children, it also paved the way for family preservation legislation for non-Indian children. There continue to be significant concerns regarding the lack of funding to fully implement the vision embodied in the ICWA legislation (Casey Family Programs and NICWA, 2002).

Passage of the Adoption Assistance and Child Welfare Act of 1980 (AACW) was a major legislative effort to redirect the public child welfare system toward a family preservation focus. Its main components set guidelines for permanency planning, reversed federal incentives that had made foster care placement an advantageous option, and emphasized a need for preventative support services for families. The AACW linked state supplementary federal funding for child welfare services to three main requirements. First, states were required to submit plans outlining “reasonable efforts” to prevent separation of children from their families. Second, it required a judicial ruling that such “reasonable efforts” had been made before any federal foster care reimbursement could be granted. Third, states were required to establish preventive services as a condition for the transfer of unused foster care funds into services budgets or voluntary placement reimbursements (Edna McConnell Clark Foundation, 1985; Red Horse, Martinez, et al, 2000).

The Adoption and Safe Families Act of 1997 (ASFA) retains aspects of family preservation, but it also redirects efforts to seek permanence through adoption by streamlining the adoptions process and implementing a quota system for federal funding. ASFA declares the priority of child safety. While it increases the funds for family support and family preservation programs, this law also shortens the time parents have to regain custody of their children before the state initiates proceedings to terminate their parental rights. Adoption is now promoted as a solution for children who are not safe at home (Larner, Stevenson & Behrman, 1998).

ASFA has serious implications for American Indian tribes, families, and children because of its streamlining of the adoptions process as a way to achieve permanence for children in care. This emphasis on adoption “as the optimal form of permanence when the biological parents are unable to provide a safe, stable, and nurturing home” (Duquette, Hardin, & Dean, 1999) has blurred the status of family preservation services for American Indians. It fails to recognize American Indian definitions of family, extended family and community and it does not respect customary tribal aspects of guardianship. In essence, ASFA mirrors earlier efforts of assimilation, which was a precipitating cause for the passage of ICWA (Red Horse, Martinez, et al, 2000).

Family Preservation Models (US) – Responding to US federal legislation

Response to the AACW requirement that states submit plans outlining “reasonable efforts” to prevent separation of children from their families has been varied. One study (McGowan, and Botsko, 2000 cited by Red Horse, Martinez, et. al, 2000) identified two models of family-based services that have developed in response to the federal requirement. One model is geared toward “the provision of intensive brief services” to children in imminent danger of out-of-home placement, and the other is a family support model emphasizing programs that provide a “range of continuously available primary prevention services (FPS) to all families” in perceived need of support.

Another study (Mannes, 1990) sets family programs into three categories:

1. Family resource, support, and education services that are provided to families perceived in need of assistance. These services may be delivered at community drop-in centers or in the home with a goal to improve parenting skills.
2. Family-centered services that provide a range of clinical services including case management, counseling, therapy, education, advocacy, and health care as well as concrete services such as food, clothing, and shelter. Family-centered services are intended to protect children and stabilize families.
3. Intensive family-centered crisis services are provided for families in crisis when removal of the child is imminent and is guided by a goal, if possible, of family unification.

Another mainstream family preservation model is the Homebuilders Model. This program was specifically designed to address the needs of families with children in “imminent danger” of placement. The core strategies were to provide families with flexible, short term, intensive preventative home based services. The caseloads of social workers in the Homebuilders Model were much lower than traditional caseloads; this ensured ongoing accessibility. In addition, the Homebuilders Model was organized around the notion of providing a range of services tailored to the needs and preferences of families and for an intensive period (Red Horse, Martinez, et. al, 2000).

The Wrap Around model was also developed as a means to achieve family preservation and facilitate services integration on a multidisciplinary level. Based on ecological theory, Wrap Around is a planning process that involves the child and the family. It is similar to multidisciplinary child protection teams where professionals come together to discuss options for services with a family or placement options for the child. The model is based on the idea that a team of formal and informal supports are assembled to develop and implement a plan of family services. The child and family are active partners, rather than clients, in the determination of appropriate care. The principle elements of the Wrap Around Model are: community-based services; individualized services; cultural respect; families are partners; flexibility in funding; team-approach to problem solving; a balance of formal and informal services; interagency collaboration; and family implementation (Burns & Goldman, 1999).

McCroskey and Meezan in their study "Family-Centered Services: Approaches and Effectiveness" (The Future of Children, Spring 1998) divided family-centered services into two categories: Family Support and Family Preservation. These services were viewed as part of the following continuum of family and children's services used by families in differing situations.

1. ALL FAMILIES/HEALTHY FAMILIES
Potential Services: Advocacy, Income supports, Housing, Health care, Child care, Family-centered work policies, Parent education, Development-enhancing education, Recreation, Family planning services, School-linked health and social services, Information and referral services.
2. FAMILIES NEEDING ADDITIONAL SUPPORT/FACING MINOR CHALLENGES
Potential Services: Family support centers, Family resource programs, Home visiting programs Family counseling, Parent aide services, Support groups, Services for single parents.
3. AT-RISK FAMILIES NEEDING SPECIALIZED ASSISTANCE/FACING SERIOUS CHALLENGES
Potential Services: Alcohol and drug treatment, Respite child care, Special health services, Special education services, Adolescent pregnancy/parenting services, Mental health services, Services for developmentally disabled and emotionally disturbed children and their families.
4. FAMILIES IN CRISIS OR AT RISK OF DISSOLUTION PLACING CHILDREN AT SERIOUS RISK
Potential Services: Child protective services, Intensive family preservation services, Services for chronically neglectful families, Services for runaway children and their families, Domestic violence shelters, Domestic violence counseling.
5. FAMILIES IN WHICH CHILDREN CANNOT BE PROTECTED WITHIN THE HOME/NEEDING RESTORATIVE SERVICES
Potential Services: Diagnostic centers, Foster family homes, Therapeutic foster homes, Group homes, Therapeutic group homes, Residential treatment centers, Reunification services.
6. FAMILIES WHO CANNOT BE REUNIFIED
Potential Services: Adoption services, Independent living services.

Family support services include activities such as parent education and support groups, which strive to strengthen families and help them raise their children well (sometimes preventing child abuse or neglect). Family support programs provide a wide variety of services to counteract stresses, link families together, and offer needed assistance. Often guided by social support and stress theory, and taking a public health approach to service delivery, they may convene peer support groups; offer educational programs such as

training in parenting skills or child development; and organize social and learning experiences for young children, adolescents, and parents. Many programs also advocate for families with other service institutions, or represent family interests in the community at large.

Family preservation services can be divided into the following three categories: 1) rehabilitative family preservation services, 2) intensive family preservation services, and 3) family reunification services.

Family preservation services include home based activities such as counseling and other assistance to “at risk” families to prevent family breakdown, the removal of children and their placement in out of home care. Family preservation services are also conceptualized to apply to the intensive services provided to a family to assist them in the reunification process of having a child returned home from out of home placement.

Family preservation programs attempt to build the skills of family members and enhance the family’s support system. Family preservation workers draw on a variety of theoretical orientations, from family therapy to crisis intervention to ecological approaches. Therapeutic goals for individual families are usually prioritized based on a thorough psychosocial assessment. The aim of the service is to avoid the removal of children, or to hasten a child’s return.

In summary, rehabilitative family preservation services are directed toward ameliorating problems in families whose stability is threatened because abuse or neglect. The provision of these services are intended to support the child to safely remain in his/her home; the absence of said services can mean the child will be removed as conditions deteriorate due to lack of support. Intensive family preservation services are specialized therapeutic support services offered to families whose problems require immediate intervention in order to prevent a child from coming into care. Family Reunification Services are intensive family preservation services provided to families in order to ensure that children in care can return safely to their homes in the shortest amount of time possible.

Evaluating the Effectiveness of Family Preservation Services

Studies that have examined the effectiveness of family preservation services tend to affirm the importance of providing these types of supports but caution against a single outcome approach to measure efficacy. One simple way of measuring their effectiveness is to look at the overall numbers of children coming into the care of child welfare agencies. Does the provision of family preservation services reduce the overall numbers of children coming into care? The short and simple answer seems to be “not noticeably” – at least that is what the studies in the United States seem to suggest. However, McCroskey and Meezan (1998) caution against using the single outcome measure of reducing the numbers of children in out of home care. “Rather than conclude that a program approach that feels right to many families and professionals is not effective based on a single outcome measure, it would be preferable to systematically investigate the impact of services on multiple aspects of family and child functioning, including child safety and family stability.” Following are some of the positive aspects of family preservation services:

Intensive family preservation services are effective for families and children who receive them. The initial evaluations of family preservation programs, most of which lacked control groups, showed that placements were avoided for more than 90% of the children served (McCroskey & Meezan, 1998). The Institute for Family Centered Services claims to have a 15-year track record of working with the most resistant and dysfunctional of families, including those with long histories of court involvement, adjudicated commitments, and multiple out-of-home placements, with 88% success (Keeping Families Together – ICFS Corporate Brochure, 2003).

For families where there is evidence of child abuse or neglect, some evaluation studies show that families receiving intensive family preservation services avoid having children removed (or require less lengthy periods of care for children who are apprehended), compared to control groups receiving ordinary levels of child protection services” (Wachtal, 1999).

Studies have found modest but significant program impacts on outcomes such as parent-child interactions, supports available to families, living conditions, parenting skills, family cohesion, emotional climate of the family, and the level of family stress. Positive changes have also been found in children’s

school attendance, school adjustment, delinquent behavior, hyperactivity, peer problems, and oppositional behavior, and in the parents' knowledge of childcare, use of verbal discipline, and parenting skills (cited by McCroskey & Meezan, 1998).

"The relationship between the worker and the family is more critical to service success than service length, intensity, or worker caseload. Of course, if it is to be feasible for workers to develop close relationships with families, they need to have manageable caseloads, adequate training and supervision, and sufficient time to focus on the families they are trying to help. In addition, a commitment to the philosophy and values of family-centered services appears to play a key role in fostering the formation of such relationships" (McCroskey & Meezan, 1998).

While family preservation services is a program approach that feels right to many families and professionals, one has to keep in mind that the concept has been wrongly used as a rationale for not removing children from high risk family situations that have ended in children being abused, sometimes with tragic consequences (Larner, Stevenson, & Behrman, 1998). One children's rights advocate in the United States is critical of family preservation programs that are offered in name only: "too often the implementation of family preservation services meant nothing more than leaving children with parents, regardless of the problems in the home and without providing sorely needed services to support those families that are salvageable" (Lowrey, 1998). In essence then, if family preservation programs are to be effective then they must be carefully designed, effective screening mechanisms must be in place to identify appropriate clients, adequately resourced, culturally relevant and adaptable to the needs of individual families and children.

There are also a number of other factors that one has to keep in mind when evaluating the effectiveness of family preservation programs. Among these factors are: the history of child welfare practice and its emphasis on child protection, the conflict of values that exist between Indigenous peoples and Euro-Americans and Euro-Canadians, and the larger issue of poverty.

The history of child welfare policy and practice has focused on protecting children and developing placement alternatives for children requiring out of home care. There has not been enough emphasis placed on developing effective family preservation programs. The bulk of public funding goes to child

protection and child placement, while little is directed to family preservation services. "From the beginning, the primary focus of child welfare services has been to protect children from abuse and neglect. Legislation allowed child welfare authorities to remove a child from the family home when it was clear that parents could not or would not provide their child with a safe nurturing environment. Prevention, while an important focus of child welfare policy now, evolved as a secondary strategy of protection services as child welfare authorities realized that the forced removal of children from the family home did not create the best opportunity for families to heal and to develop the skills necessary to meet the needs of their children" (West Region Child and Family Services, 2002).

Indian child welfare policy in the United States has focused on protecting children and preserving culture, which has resulted in the development of culturally appropriate placement resources, but, again not enough emphasis has been placed on developing effective family preservation programs. Despite the passage of the Indian Child Welfare Act that aimed at preserving Indian families, American Indian children still continue to be removed from their families at alarming rates. "ICWA serves primarily as a vehicle for child placement rather than for purposes of strengthening and reaffirming extended kin families" (Red Horse, Martinez, et al, 2002).

Value conflicts continue to exist between mainstream service providers and Indian communities in several areas, including the definition of family preservation. The misinterpretation of aboriginal extended family systems has contributed to the large number of aboriginal children being placed in out of home care. Too many mainstream social workers continue to view aboriginal families as being deficient and they remain ignorant about First Nations cultural experiences, and their knowledge deficit is harmful to First Nations client families and their children. The European concept of nuclear family has become so dominant, that other forms of family organization are misinterpreted as "family disorganization" (Hareven, 1986).

Again, the widespread condition of poverty and its negative impact on First Nations families and community capacity directly affects the ability of FNCFS to develop and deliver a continuum of

community based family preservation services. As one so aptly stated: "While the child welfare system may indeed be "broken and in need of fixing," it cannot be fixed by attending to child welfare alone. The basic social problems that are at the core of the nation's malaise are also at the core of child welfare problems. Poverty, racism, violence, and drugs affect almost every family in the United States; for some, they affect daily activities so thoroughly that "normal" family life is impossible and children are neglected or abused" (Feild, 1996).

THE MEANING OF PREVENTION

The term "prevention" as it is used in First Nations child and family services has many different meanings. Prevention can be used to represent activities that promote an action or behaviour, such a learning life skills and acquiring improved parenting skills. The term is also used to represent activities that stop an action or behaviour, such a preventing a child from coming into the care of a FNCFSA. One dictionary defines prevention as " the act of preventing; effectual hindrance."

With respect to child abuse and neglect, prevention generally refers to activities that seek to reduce or deter the incidences of child maltreatment and to promote healthy families and healthy communities. The conceptualization of "child abuse and neglect prevention" has been strongly influenced by public health when it comes to organizing a framework of prevention services. The public health framework consists of primary, secondary, and tertiary prevention activities.

Thomas, Leight, et al, (2003) in their study "Emerging Practices in the Prevention of Child Abuse and Neglect" define Child Abuse and Neglect Prevention as a framework consisting of three levels of prevention services: **primary** prevention programs, which can be directed at the general population (universal); **secondary** prevention programs, which are targeted to individuals or families in which maltreatment is more likely (high risk); and **tertiary** prevention programs, targeted toward families in which abuse has already occurred (indicated).

Primary prevention activities are those services directed at the general population and attempt to stop the occurrence of child abuse and neglect. Primary prevention activities have a universal focus and seek to raise the awareness of the general public about the scope and problems associated with child abuse and neglect. Universal approaches to primary prevention might include:

- Public service announcements that encourage positive parenting;
- Parent education programs and support groups that focus on child development and age-appropriate expectations and the roles and responsibilities of parenting;
- Family support and family strengthening programs that enhance the ability of families to access existing services, resources and support interactions among family members; and
- Public awareness campaigns that provide information on how and where to report suspected child abuse and neglect.

Secondary prevention activities are offered to high risk families that may have one or more risk factors associated with child maltreatment, such as poverty, parental substance abuse, young parental age, parental mental health concerns, and parental or child disabilities. Secondary prevention programs that focus on high-risk families might include:

- Parent education programs located, for example, in high schools that focus on teen parents, or within substance abuse treatment programs for mothers and families with young children;
- Parent support groups that help parents deal with their everyday stresses and meet the challenges and responsibilities of parenting;
- Home visiting programs that provide support and assistance to expecting and new mothers in their homes;
- Respite care for families that have children with special needs; and
- Family resource centers that offer information and referral services to families living in low-income neighbourhoods.

Tertiary prevention activities focus on families where maltreatment has already occurred (indicated) and seek to reduce the negative consequences of the maltreatment and to prevent its recurrence. These prevention programs may include services such as:

- Intensive family preservation services with trained mental health counsellors that are available to families 24 hours per day for a short period of time (e.g., 6-8 weeks);
- Parent mentor programs with stable, non-abusive families acting as “role models” and providing support to families in crisis;
- Parent support groups that help parents transform negative practices and beliefs into positive parenting behaviours and attitudes; and
- Mental health services for children and families affected by maltreatment to improve family communication and functioning.

Thomas, Leight, et al (2003), go on to say that “distinctions between primary, secondary, and tertiary prevention, while perhaps useful for some purposes, do not necessarily reflect the way prevention-related services are actually organized and provided on the ground. Rather than sorting prevention initiatives into mutually exclusive categories, prevention is increasingly recognized as a continuum.”

Andy Wachtel (1999) in his study “The State of the Art in Child Abuse Prevention” argues from a risk/resiliency model viewpoint that there needs to be a continuum of prevention services for First Nations communities. Such a continuum would make it possible to intervene with a family at various points “to reduce the risks and/or improve the resiliency of children, families and communities”.

Using the public health framework, Wachtel describes a prevention continuum that includes primary, secondary and tertiary prevention activities and programs. “PRIMARY PREVENTION refers to activities designed to have some impact on the whole population and make child abuse less likely to occur in the first place. SECONDARY PREVENTION refers to activities aimed at specified high-risk groups to strengthen their capabilities, reduce risks and, at the very least, catch any child maltreatment at the

earliest possible stage. TERTIARY PREVENTION refers to activities designed for known abusers and victims, aimed at rehabilitating them and preventing further instances of maltreatment.”

Wachtel lists examples of Primary Prevention programs that include: Public Education Campaigns, Community Safety Programs, Personal Safety Programs, Anti-Violence Curricula and Life Skills Training, An Educational Agenda, Marriage Preparation Courses, Prenatal Classes, Parent Education, and Home Visiting. He goes on further to describe home visiting programs as a centerpiece of primary prevention of child abuse and neglect “that has built up a good body of evidence for its effectiveness”.

Wachtel describes Secondary Prevention programs as those services that target at-risk populations, which in the case of First Nations families is substantial. Secondary Prevention, therefore, requires a wide array of services and approaches. Examples of Secondary Prevention programs include: Prenatal Nutrition Programs, Infant Development Programs, Fetal Alcohol Syndrome or Fetal Alcohol Effects Support Programs, Family Support Services, Head Start, Aboriginal Head Start Initiative, Remedial Schooling, Anonymous Counselling and Referral, and Support Groups at Transition Points. He comments on family support services as being a “catchall term for a range of services of several types”.

Wachtel describes Tertiary Prevention programs to include intervention, support, treatment and rehabilitation services for victims and survivors of child abuse and neglect, caregivers and abusers. He draws attention to a trio of tertiary prevention programs that have attracted special attention as key elements in a family support agenda. These are parenting programs, family preservation programs, and services for children and youth who have experienced violence. He makes the following points about family preservation programs:

- Family preservation programs are used as an alternate intervention of last resort in families where children would otherwise have to be apprehended because of abuse and neglect. Family preservation programs are also sometimes used to prepare high-risk families for re-unification

where children have been taken into care temporarily. Often, their success is measured by the extent to which these interventions prevent removal of children.

- Family preservation programs represent the highest level of intensity in family support services. A worker (coach – homemaker – advocate, etc.) is placed right in the home from several hours a day to virtually around the clock, depending on the level of family crisis and the specific program model. The services they offer are often concrete — building on whatever strengths there are in families, teaching practical skills and problem-solving techniques, and working step by step on small measurable successes.
- The model remains controversial within child welfare because these programs walk the edge in terms of being able to ensure child protection within an admittedly high-risk family environment.
- It would be better to reconsider family preservation approaches as secondary to tertiary prevention services, brought into play earlier for families in crisis rather than as a last resort.

“While these tertiary prevention/intervention/treatment services are certainly critical, and indeed consume most of the energy, resources and concern that society expends on child abuse and neglect, they come into play very late in the day. Our broad prevention model seeks to rebalance our response to concentrate more on primary prevention (prevention in its common meaning) and on early intervention.”

PROVINCIAL AND TERRITORIAL LEGISLATION REQUIREMENTS PERTAINING TO LEAST DISRUPTIVE MEASURES SERVICES

Section 15.1 of The Charter of Rights and Freedoms guarantees equal benefit under law for all residence of Canada. This concept of equality is consistent with the United Nations Convention on the Rights of the Child (CRC) and DIAND's principal of comparability that is integrated into Directive 20-1 for First Nations child and family service agency funding. As Directive 20-1 specifically requires the First Nations child and family service agencies follow provincial legislation, Section 15.1 of the Charter of Rights and Freedoms and the UN CRC would seem to compel government to provide adequate financial resources needed to meet statutory requirements and ensure equity between children on and off-reserves.

The concept of “least disruptive measures” not only reflects best practice in social work it is also embedded in provincial and territorial child welfare legislation. It is rooted in the philosophy that children and youth have to grow up in a family environment free from abuse. Most Canadians view the family as the basic unit of society and the primary source of nurturance, love, sense of belonging, identity, and spiritual grounding for children and as such the family should be supported. The privacy of families is their sanctity and it should not be disrupted by unwarranted interference from government or agency officials. Further, children are entitled to a continuous, uninterrupted family experience among their siblings, parents and extended family members who may be providing a nurturing/care-giving role.

Some families undergo stresses that can lead to family breakdown, unless access support from extended family/kinship systems, community organizations, or from agencies whose mandate it is to provide family support services. These families need supports to preserve their autonomy and integrity and maintain their wellness. Other families live in an environment that poses a threat to the safety and well being of children because of the presence of risk factors associated with child maltreatment. These families require more formalized support services to help them ameliorate the risk of child maltreatment and family breakdown. Still, there are other families that are not safe places, where children are being abused or severely neglected. In these cases, children are entitled to protection from abuse and removing them from that abusive situation is necessary and justified.

This view of family and their right to privacy and the right of children to have a continuous family experience is reflected to some degree in all of the provincial and territorial legislation. The family is seen as the basic unit of society and it should be supported. Further, children have a right to be protected from abuse, even if it means removing them from their family system in order to protect them. CFS agencies in Canada are obligated by societies expectations and by CFS legislation to intervene and protect children that are being abused or are identified as being “at risk” of being abused. Interventions in family systems, when necessary, should be as least disruptive as warranted. If it is possible, children

should be supported in their home environment and the entire family should be engaged in a plan to make the home a safe place for children.

Least disruptive measures, as the term is used in CFS legislation refers to decision making process to determine the most appropriate level of service needed by a family whose children are at risk of being abused. Child removal also known as apprehension should only be used as a last resort after having explored all other options. In deciding whether or not a child should remain in their home, FNCFSA must consider the degree of risk, the level of family cooperation, degree of social supports and the availability of appropriate services to redress identified risk factors. Service response times and intensity levels also play in the safety assessment process.

The definition of the range of services composing least disruptive measures is not well articulated in provincial and territorial CFS legislation, however, all legislation incorporates a fundamental assumption that CFS agencies will take steps to support a family, to help a family deal with at risk and child maltreatment issues before making a decision to remove a child from that family and place him/her in out-of-home care. All statutes also incorporate sections which recognize the cultural identity of First Nations children through notification of bands and, in the case of BC, respect for a child’s cultural identity is a guiding principle and the right of a child in care. The following table is based on an analysis of each piece of provincial/territorial legislation and it depicts whether or not a CFS agency “may offer, should offer, or must consider, or must offer” family support services as a least disruptive measure prior to the removal of a child from their family.

| May Offer Family Support Services | Should Offer Family Support Services | Must Consider Family Support Services | Must or Shall Offer Family Support Services |
|-----------------------------------|--------------------------------------|---------------------------------------|---------------------------------------------|
| | | | |

| | | | |
|---------------|-------------------------|--------------|----------------------|
| New Brunswick | Alberta | Newfoundland | British Columbia |
| Quebec | Northwest Territories / | | Manitoba |
| Saskatchewan | Nunavut | | Nova Scotia |
| Yukon | | | Ontario |
| | | | Prince Edward Island |

Not all of the legislation articulates the specific kinds of family support services that a CFS agency “may, should, must consider, must or shall offer” as a least disruptive measure. However, listed below are examples of least disruptive measures/family support services that are found in provincial/territorial CFS legislation:

- (a) family counselling, guidance and assessment;
- (b) in-home support, parent aides;
- (c) child care, respite care;
- (d) parenting programs;
- (e) services for improving the family’s financial situation;
- (f) services for improving the family’s housing;
- (g) drug or alcohol treatment and rehabilitation;
- (h) mediation of disputes;
- (i) services to assist the family to deal with the illness of a child or a family member; and
- (j) other services agreed to by the agency and the person who has lawful custody of the child.

Following is an analysis of (edited) statements contained in Provincial/Territorial CFS legislation that are related to “least disruptive measures” or the requirements of CFS agencies to offer support or alternate services to a family prior to the removal of a child due to child protection concerns. Each piece of legislation is compared using the same four statements as guidelines to identify the requirements placed on CFS agencies to take a least disruptive measures approach to intervention and child protection services (See Appendix A). These four guiding statements are:

1. Statement recognizing the family as the basic unit of society; that it should be supported and the family has the right to the least invasion of its privacy and interference with its freedom;
2. Statement about the provision of family support services to help maintain family integrity and support so that children can remain at home;
3. Statement about least disruptive alternatives in child protection services that allow for a child to remain at home while the family receives support services to address child protection concerns;
4. Statement that least disruptive alternatives must be considered in child protection services before a child is to be removed from a family.

Alberta

1. The family as the basic unit of society and its well-being should be supported and preserved; further, the family has the right to the least invasion of its privacy and interference with its freedom.
2. If it is not inconsistent with the protection of a child who may be in need of protective services, the child's family should be referred to community resources for services that would support and preserve the family and prevent the need for any other intervention under this Act...Agencies may enter into support agreement with families to prevent the removal of a child.
3. If protective services are necessary to assist the family in providing for the care of a child, those services should be supplied to the family insofar as it is reasonably practicable to do so in order to support the family unit and to prevent the need to remove the child from the family.
4. A child should be removed from the family only when other less intrusive measures are not sufficient to protect the survival, security or development of the child.

British Columbia

1. A family is the preferred environment for the care and upbringing of children and the responsibility for the protection of children rests primarily with the parents.
2. Agencies have a responsibility to integrate the planning and delivery of preventative and support services to families and children.

3. If a child needs protection, after the assessment, the director may offer support services to the child and family...The plan of care developed by means of a family conference must include the director's consent and may include provision for services to support and assist the family and to make the family safe for the child.
4. At a presentation hearing relating to the removal of a child under section 30, the director must present to the court a written report that includes information about any less disruptive measures considered by the director before removing the child.

Manitoba

1. The family is the basic unit of society and its well being should be supported and preserved. Families and children have the right to the least interference with their affairs to the extent compatible with the best interests of children and the responsibility of society.
2. Families are entitled to receive preventive and supportive services directed to preserving the family unit...every agency shall: provide family counselling, guidance and other services to families for the prevention of circumstances requiring the placement of children in protective care or in treatment programs.
3. Child protective services must consider the child's best interests, including the child's sense of continuity and need for permanency with the least possible disruption.

New Brunswick

1. Whereas it is recognized that the basic rights and fundamental freedoms of children and their families include a right to the least invasion of privacy and interference with freedom.
2. The Minister may enter into an agreement with the parent of the child that specifies what is and what is not to be done to ensure that the security or development of the child is adequately protected.
3. Where the Minister places a child under protective care he shall make adequate provision for his care, and he may leave the child in his own home and may provide social services when the provision of social services is adequate to ensure his proper care...Legislation also allows for orders of supervision.

Newfoundland

1. The family is the basic unit of society, health and well being of the child; services shall be provided using the least intrusive means of intervention.
2. Prevention activities are integral to the promotion of the safety, health and well-being of a child; families shall be provided, to the extent possible, with services which support the safety, health and well-being of their children.
3. Where a child is in need of protective intervention; the director or social worker must take into consideration whether or not the child's safety could be assured without removing the child with the provision of protective intervention services.
4. Prior to the removal of a child, the director or social worker must believe that a less intrusive course of action is not available.

Northwest Territories - Nunavut

1. Whereas the family is the basic unit of society and its well-being should be supported and promoted.
2. Children should be supported within the context of their family and extended family to the greatest extent possible by the Director providing services or assisting others in providing services on a voluntary basis to support and assist the family. The Director may enter into a written agreement ... to support and assist that person's family to care for the child.
3. The application of best interests guidelines include the consideration of: the risk that the child may suffer harm through being removed from, kept away from, returned to, or allowed to remain in, the care of a parent. A plan of care for a child may include provision for support services to make the child's home safe for the child.

Nova Scotia

1. The family exists as the basic unit of society, and its well being is inseparable from the common well being. The basic rights and fundamental freedoms of children and their families include a right to the least invasion of privacy and interference with freedom that is compatible with their own interests and of society's interest in protecting children from abuse and neglect...and whereas parents or guardians have responsibility for the care and supervision of their children and children should only

be removed from that supervision, either partly or entirely, when all other measures are inappropriate.

2. Among other functions, an agency is to: (a) work with other community and social services to prevent, alleviate and remedy the personal, social and economic conditions that might place children and families at risk; (b) provide guidance, counselling and other services to families for the prevention of circumstances that might require intervention by an agency; and (c) develop and provide services to families to promote the integrity of families, before and after intervention pursuant to this Act.
3. The Minister and the agency shall take reasonable measures to provide services to families and children that promote the integrity of the family...using the least intrusive means of intervention and, in particular, to enable a child to remain with the child's parent or guardian or be returned to the care of the child's parent or guardian.
4. An agency shall not enter into a temporary-care agreement unless the agency...is satisfied that no less restrictive course of action, such as care in the child's own home, is appropriate for the child in the circumstances...The court shall not make an order removing the child from the care of a parent or guardian unless the court is satisfied that less intrusive alternatives, including services to promote the integrity of the family...[have failed, are refused or are inadequate to protect the child].

Ontario

1. To recognize that while parents may need help in caring for their children, that help should give support to the autonomy and integrity of the family unit and, wherever possible, be provided on the basis of mutual consent...To recognize that the least disruptive course of action that is available and is appropriate in a particular case to help a child should be considered.
2. The functions of a children's aid society include a duty to provide guidance, counseling and other services to families for protecting children or the prevention of circumstances requiring the protection of children.

3. A society shall not make a temporary care agreement unless the society is satisfied that no less disruptive course of action, such as care in the child's own home, is appropriate for the child in the circumstances.
4. Least disruptive alternatives preferred: The court shall not make an order removing the child from care of the person who had charge of him or her immediately before intervention under this Part unless the court is satisfied that alternatives that are less disruptive to the child, including non-residential services and the assistance referred to in subsection (2), would be inadequate to protect the child.

Prince Edward Island

1. Parents have the right and responsibility for the care and supervision of their children, and children should only be removed from that care and supervision when other measures have failed or are inappropriate. The rights of children, families and individuals are guaranteed by the rule of law, intervention into the affairs of individuals and families should be governed by law so as to protect those rights and preserve the autonomy and integrity of the family wherever possible.
2. Where the Director concludes, after an investigation, that a child is in need of protection, the Director may offer child welfare services to the parent.
3. The Director may apprehend a child, where there are reasonable grounds to believe that...a less intrusive course of action will not adequately protect the health or safety of the child.
4. The Court requires that the Director provide evidence that...a less intrusive course of action will not adequately protect the health or safety of the child.

Quebec

1. The primary responsibility for the care, maintenance and education of a child and for ensuring his supervision rests with his parents...every decision made under this Act must contemplate the child's remaining with his family.
2. The director may propose as voluntary measures that may be included in an agreement (a) that the child remain with his family and that the child's parents report periodically to the director on the

measures they apply in their own regard or in their child's regard to put an end to the situation in which the security or development of the child is in danger; (b) that the child and the child's parents undertake to take an active part in the application of the measures designed to put an end to the situation in which the security or development of the child is in danger; (f) that a person working for an institution or body provide aid, counseling or assistance to the child and the child's family.

3. The director shall periodically review the case of every child whose situation he has taken in charge. He shall, where applicable, satisfy himself that every measure designed to ensure the child's return to his parents is taken, if such a return is in his interest, or ensure that the child has living conditions appropriate to his needs and his age.

Saskatchewan

1. The purpose of this Act is to promote the well being of children in need of protection by offering, wherever appropriate, services that are designed to maintain, support and preserve the family in the least disruptive manner.
2. The Minister may provide family services to, or for, the benefit of a parent or a child where the minister considers them essential to enable the parent to care for the child; a director may enter into an agreement with the parent for the provision of family services.
3. Where, on investigation, an officer concludes that a child is in need of protection, the officer shall take all reasonable steps that he or she considers necessary to provide for the safety of the child, including, the offer of family services where practicable.

Yukon Territory

It is the policy of the Minister and the director to supply services as far as is reasonably practicable to promote family units and to diminish the need to take children into care or to keep them in care.

SURVEY RESULTS: THE VIEWS OF FNCFCs

A survey was conducted of all First Nations Child and Family Service Agencies in Canada in order to provide an opportunity to express their views regarding least disruptive measures. This confidential survey asked respondents to comment on the following key areas:

1. What kinds of least disruptive measures services are most needed
2. What would the impacts be of increased funding for least disruptive measures
3. What recommendations would they have to inform the structure of least disruptive measures funding.

It is important to note that this survey was conducted at a time when the National Policy Review for First Nations Child and Family Services acknowledges that funding for least disruptive measures is insufficient thus the survey results must be interpreted in this context. The information provided by First Nations Child and Family Service Agencies strongly affirms the importance of least disruptive measures in providing culturally based care for Aboriginal children.

Methodology

As this research project had to be completed within three months and the views of First Nations child and family service agencies formed a critical component of the research, a survey tool was selected as the best method of providing each agency with an opportunity to participate in the project. The survey tool was developed by Mr. Corbin Shangreaux and was circulated to several experts in First Nations Child Welfare for feedback prior to it being distributed to First Nations child and family service agencies for response. While the survey did provide some important feedback it is recommended that future research projects be provided more time to support survey design, distribution and analysis. The time needed to develop a meaningful survey tool meant that First Nations CFS agencies had approximately 3-4 weeks to respond to the survey. This short time frame for response coupled with the fact that some agencies expressed concern about providing information to INAC during a time when they were conducting an anomalies process which was resulting in further cuts to FNCFS funding meant that response rates were limited.

Despite the restrictions of the research process, the First Nations Child and Family Service Agency responses provide some very important data to inform least disruptive measures funding.

At the time of writing this report eleven responses were received from the following regions:

1. BC 3
2. Saskatchewan 2
3. Ontario 1

4. Quebec 1
5. Atlantic 4

Consistent with ethical standards for research, all survey responses have been aggregated in order to protect the confidentiality of respondents.

The researchers would also recommend that in future, that research projects on least disruptive measures be provided with significantly more time to complete the project and resources in order to conduct key informant interviews in order to augment survey results.

Survey Findings

As noted previously in this report, child welfare law throughout Canada either directly requires that families be provided with least disruptive measures prior to considering removal or such provision is clearly assumed in legislative guiding principals and social work practice.

It is also important to note that least disruptive measures are intended to keep children safely in their homes or, if they have been removed, to reunite them back with their family as soon as possible. First Nations CFS agencies will also have children who are in the permanent custody of the State and although it is possible that providing least disruptive measures to some of will result in some children in continuing custody returning home, most will remain in care until they reach the age of majority. The impact, then of least disruptive measures on the numbers of Aboriginal children in care must focus on children in their homes or in some form of temporary protective care.

Agencies are required by law to provide these services to First Nations families resident on reserve but do so with what INAC has already acknowledged to be insufficient funding. It is not surprising therefore that survey responses identify few examples of least disruptive measures provided by agencies as described by this respondent "We are able to provide VERY LITTLE of the least disruptive services needed by children and families in our communities." The survey response are grouped under three key themes 1) Community need for prevention and least disruptive measures services 2) Impacts of increased least disruptive measures funding and 3) recommendations for least disruptive measures funding structures.

Community Need for Prevention and Least disruptive Measures services

Respondents clearly differentiated between what would be termed prevention services and least disruptive measures. Responses to the question of what prevention service needs are needed are generally reflected in this respondent's statement "healing for the whole community" is required. While responses to the question of what least disruptive measures are needed referenced the requirements of child welfare statutes. In addition, least disruptive programs were more likely to reflect secondary and tertiary interventions provided by to a child at substantial risk while remaining in their family home. The category of least disruptive measures was reflected by this respondent "legislated mandated services under family services acts that we are under." All respondents indicated a need for an increased range of prevention services with a specific focus on the need for the secondary and tertiary prevention services which are used in least disruptive measures situations. The specific types of supports varied in keeping with the unique contexts of communities suggesting that funding definitions of least disruptive measures should be flexible.

It was clear that respondents saw a strong interconnection between prevention and least disruptive measures viewing them as being equal parts of a critical continuum of service needed to keep Aboriginal children safely in their homes. Examples of prevention service needs include: culture and language programs, substance misuse programs for youth and families with a specific emphasis on post treatment support services, residential school recovery programs, prenatal and early childhood programs, education and parenting supports, youth services, and family enhancement initiatives.

In terms of least disruptive measures, respondents indicated a strong need for least disruptive measures programs and for increased human resource funding to support the development, implementation and design of said programs. Examples of least disruptive measures needs also varied in keeping with unique contexts of communities: mediation, parent aid services, respite, mentoring, family support workers, parenting skills (nurturing, discipline, communication, listening, etc) , life skills (budgeting, home care, personal care, etc.)

Impacts of Increased Least Disruptive Measures Funding

Most agencies indicated that a significant number of children in care could be returned home if there was an adequate and sustainable range of least disruptive measures service and child welfare funding was not decreased in other areas. There was also a strong indication that future placements of children in care could be avoided if said services were provided. Examples of responses to the question of how many children could be returned if least disruptive measures were funded included: “if this [funding for least disruptive measures] were the practice we would not have too many children in care;” “the lack of funding hampers our effectiveness in keeping children in their families and communities” and “if we had more intensive family services, families could remain together at home while doing their work”. This cannot be done when our staff are only available 1-2 times/week. Even if we could assist one more family per year it would be worth all the funding.” Five agencies provided estimates of the percentage decrease of children in care averaging 33% but also cautioned that this type of reduction in children in care would take time as families would need to have adequate time to benefit from the programs. Consistent with the Joint National Policy Review on First Nations Child and Family Services, FNCFS also identified a need for research and evaluation dollars to be provided in order to inform program development and measure program efficacy over time.

Although this research project did not specifically focus on what the impacts were of Directive 20-1 not funding least disruptive measures adequately, survey results suggest that impacts include children being placed in care as in home supports are not available and children remaining in care longer than is necessary. One respondent identified that the lack of least disruptive measures funding has already been identified as a factor in the Baby Andy inquest report in Saskatchewan. Another indicated that “More funding is needed to allow the agencies to provide least disruptive services. We have had to turn families down or in some cases take from other services to cover these costs.”

Recommendations for Least Disruptive Measures Funding

The clear recommendation from respondents is that, consistent with the NPR, new monies need to be provided to fund least disruptive measures and that funding levels for other child welfare expenditures must not be decreased. There were variations in suggested methodology (i.e: should it be included in the maintenance or operations envelope) but there was universal agreement that there needed to be a clear delineation between "prevention" and "least disruptive measures" and that adequate funding be provided to support the administration, design, delivery and evaluation of both. Clarifying the fact that primary prevention services are different from least disruptive measures will be critical to avoid circumstances where INAC funding officers, who often do not have a social work background, conclude that prevention and least disruptive measures are the same thing.

Flexibility within funding design to respond to varying, and evolving, community needs was also seen as important. For example, one respondent indicated "Based on my experience here, I would say that we need a clear definition of allowable expenditures re: helping children in their won homes with room for flexibility in that area because decisions made are based on need and cannot be written in stone."

Sustainability was addressed in two key areas: 1) sustainability of least disruptive measures program funding and 2) the impact of inflation on keeping up to date on program costs. As the re-implementation of the Cost of Living adjustment was a "short term" priority in the NPR Implementation work plan developed in 2000 and remains outstanding, a specific question regarding Cost of Living Adjustment (COLA) was included in this survey. When asked about whether a cost of living adjustment should be taken out of the current funding envelope or if new monies should be identified for the purpose, agencies unanimously agreed that new monies should be identified. Sample responses include "NEW MONEY," "New Monies, " Simply re-shifting of monies to re-direct/create services is of no use. What is required is the identification of new monies," "New monies definitely." 2) In addition to the recommendations made above, respondents encouraged that least disruptive measures funding be sustainable as families may need long term support to redress multi-generational impacts of colonization and residential schools. The redressing of discrepancies in service delivery on and off reserve was also seen as being foundational

to ensuring the success of least disruptive measures. As was the need to document and share best practices in least disruptive measures.

CONCLUSION

The vast number of current socio-economic problems that beset many First Nations communities points to a need for a comprehensive approach to supporting and working with families – a continuum of care approach that includes least disruptive measures. The daily reality for many First Nations children, youth, and families is that they live with poverty, violence, racism, and substance abuse in communities that provide few resources to support them or help them solve complicated problems. “Faced with these conditions, many families need a broad array of services and supports to help them negotiate the challenges of family life and care adequately for their children” (McCroskey & Meezan, 1998). If the goal of least disruptive measures/services is to enable First Nations children to stay at home and thereby prevent out of home placements, then FNCFS need adequate funding and human resources so they can provide a continuum of services that includes prevention, family support, and family preservation services to keep children from coming into care.

Policy makers should keep in mind that providing least disruptive services to families “at risk” can make a difference for those families and children who receive the services. But, as long as the conditions of poverty, endemic to so many First Nations communities, go unchecked, then families will continue to breakdown and children will end up placed in out of home care. As one author put it: “Child welfare programs, such as family support and family preservation, don’t go far enough because they do not get at “the root cause of child maltreatment – which is child poverty” (Lindsey, 1994). The National Indian Child Welfare Association in the United States views family preservation programs as a “residual approach focusing on children at imminent risk of placement in out of home care, without addressing the root cause of child maltreatment, which is poverty” (Red Horse, Martinez, et al, 2002).

RECOMMENDATIONS: AUGMENTING THE FUNDING FOR LEAST DISRUPTIVE SERVICES

The following recommendations for policy change are made based on literature review and survey findings:

1. DIAND and the FNCFSA need to reach a common understanding as to the meaning of “prevention”, and “least disruptive measures” because it has too many different connotations in its current use and because it a concept that is borrowed from the Public Health field. According to study by Watchal (1999) that was submitted to Health Canada, “prevention in its common meaning” is referring to primary prevention activities. [By extension it is not referring to secondary and tertiary prevention “in its common meaning”.]
2. DIAND recognizes that FNCFSA have a responsibility to provide “prevention services to families, in order to keep children in the home”. If the Prevention Continuum (Primary, Secondary, and Tertiary) is going to be used as a framework for expectations of the FNCFSA then “Prevention Services” should be funded adequately and in a sustainable fashion. FNCFSA should receive adequate funding to deliver programs and services that fit the continuum of Primary Prevention, Secondary Prevention and Tertiary Prevention.
3. Increased funding for staffing and administrative costs must be provided to FNCFSA for primary prevention activities; including but not limited to:
 - Public awareness, Community meetings, publications, and workshops.
 - Resourcing of community development plans that support children and families to redress the etiological drivers of child maltreatment.
 - Increased funding for policy and program design and evaluation that reflects local cultures and the unique contexts of communities.
4. Increased funding for staffing and administrative costs to FNCFSA for secondary prevention activities must be provided; including but not limited to:
 - Community based – family centered services that incorporate programming for children of all ages.
 - Increase allocations for respite care homes.

- Provide funding allocations for crisis counselling and family intervention programs.
 - Increase funding to allow for an inter-disciplinary/integrated services to augment the quality of life for First Nations children, youth and families on reserves.
 - Sustainable funds for the design, delivery and evaluation of community based healing strategies that use First Nations cultural models and approaches.
5. Tertiary Prevention funding should be funded by Child Maintenance as an alternative to placement of the children in foster care, residential or treatment care. This would mean that children at risk could be provided with a range of services to safely care for them in their own homes. As with other services the funding design should be flexible enough to reflect the service needs of different communities. Examples of service and funding considerations in this area are:
- Rehabilitative Family Services.
 - Intensive Family Services.
 - Family Reunification Services.
 - Respite Services
 - Family Supervision Services (i.e: intensive supervision and service provision to a child at risk while they remain in their family home) Some child welfare statutes include provisions for this known as supervision orders which require agencies to deliver services and staff resources to a family pursuant to a court order (ie: the child welfare statute in BC).
 - Increase allocations for administrative costs associated with service provision.
 - Increase staff training allocations so that agencies can develop community based human resources to provide these services.
 - Increased funding to access and cover the costs of clinical supervision associated with these programs.
6. Least disruptive measures must be positioned within a continuum of support, be it a continuum of family and children's services or prevention continuum, has a fundamental assumption that there is a healthy community with adequate resources upon which to build a continuum of services. It is an assumption that ignores the reality facing many First Nations communities. Therefore, DIAND and the

FNCFSA need to actively be involved in the development of community capacity. Among considerations are:

- Funding community advisory committees (including Elders and young people) and staff positions to guide program design, implementation and evaluation.
 - Allocating increased resources for after hours services (social workers and clinical supervision) that are reflective of provincial requirements for overtime, worker safety and child welfare legislation.
7. Expansion of the Community Based voluntary sector resources to augment the range of services typically provided by child welfare. These services are available to other Canadians in addition to what is provided by provincial child welfare agencies. FNCFSA require financial support to facilitate relationship building with the voluntary sector in order to augment the range and quality of culturally appropriate quality of life services available to families resident on reserve.
 8. Further research regarding the effectiveness of Family Preservation services is required, in particular into the design and delivery principles of those programs that have been effective (See Appendices B and C for a definition of family centered services and some examples that have been used by various agencies in Canada and the United States). Further research is required regarding the effectiveness of FNCFSA practices. This research can identify best practices and the conditions that support this best practice. The identification of supportive conditions will allow other agencies to assess the transferability of program models.
 9. More on-line resources and supports should be made available to the FNCFSA in a wide array of subjects, including resources for administration, supervision, front line services, and best child welfare practices.
 10. New monies should be identified for a cost of living adjustment to ensure that levels of service and administration costs do not fall behind due to inflation.

An overriding principle is that new monies are required to support least disruptive measures and this should not come from a reorganizing of the current funding envelope. There must also not be decreases in other forms of support for children, youth and families in order to least disruptive

measures to have optimal impact. From a practice point of view, the provision of least disruptive measures funding would support greater numbers of Aboriginal families in safely caring for their children whilst the implementation of the other 16 recommendations in the NPR would augment the quality of life for those children and youth who must be admitted to child welfare care.

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Appendix A: PROVINCIAL & TERRITORIAL CFS LEGISLATION - LEAST DISRUPTIVE MEASURES STATEMENTS

| Statement of Principles Least Disruptive Principles | Statement of FAMILY SERVICES | CHILD PROTECTION & "Best Interests Considered" |
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| <p>ALBERTA</p> <p>the family is the basic unit of society and its well-being should be supported and preserved;</p> <p>the family has the right to the least invasion of its privacy and interference with its freedom</p> | <p>if it is not inconsistent with the protection of a child who may be in need of protective services, the child's family should be referred to community resources for services that would support and preserve the family and prevent the need for any other intervention under this Act;</p> <p>8 Support Agreement – as preventive to removal</p> | <p>if protective services are necessary to assist the family in providing for the care of a child, those services should be supplied to the family insofar as it is reasonably practicable to do so in order to support the family unit and to prevent the need to remove the child from the family, and</p> <p>a child should be removed from the family only when other less intrusive measures are not sufficient to protect the survival, security or development of the child;</p> |

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| <p>BRITISH COLUMBIA</p> <p>a family is the preferred environment for the care and upbringing of children and the responsibility for the protection of children rests primarily with the parents;</p> <p>93(1) A director may do one or more of the following:</p> <p>(f) establish services to assist communities strengthen their ability to care for and protect their children;</p> <p>(g) make arrangements, including but not limited to agreements (with any ministry of the government of any community agency if an agreement is necessary to integrate the planning and delivery of preventative and support services to families and children;</p> | <p>if, with available support services, a family can provide a safe and nurturing environment for a child, support services should be provided;</p> <p>the community should be involved, wherever possible and appropriate, in the planning and delivery of services, including preventative and support services to families and children.</p> <p>93(1) A director may do one or more of the following: (a) provide preventative and support services for families to promote the purposes of this Act;</p> <p>(b) make payments to a parent, or other person who has care of a child with special needs, assist the parent or other person to purchase support services, other than health and medical benefits, so that the child can reside at home;</p> | <p>if a child needs protection</p> <p>16(2) After the assessment, the director may (a) offer support services to the child and family,</p> <p>The plan of care developed by means of a family conference must include the director's consent and may include provision for services to support and assist the family and to make the family safe for the child.</p> <p>Removal of child</p> <p>30(1) A director may, without a court order, remove a child if the director has reasonable grounds to believe that the child needs protection and that (a) the child's health and safety is in immediate danger, or (b) no other less disruptive measure that is available is adequate to protect the child.</p> <p>...may return a child to the care of the parents if a less disruptive means of protecting the child become available.</p> <p>35(1) At a presentation hearing relating to the removal of a child under section 30, the director must present to the court a written report</p> |

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| | | that includes (c) information about any less disruptive measures considered by the director before removing the child. |
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| <p>MANITOBA</p> <p>The family is the basic unit of society and its well-being should be supported and preserved.</p> <p>The family is the basic source of care, nurture and acculturation of children and parents have the primary responsibility to ensure the well-being of children.</p> <p>Families and children have the right to the least interference with their affairs to the extent compatible with the best interests of children and the responsibility of society.</p> <p>Families are entitled to receive preventive and supportive services directed to preserving the family unit.</p> | <p>According to standards established by the director and subject to the authority of the director every agency shall:</p> <p>(b) provide family counseling, guidance and other services to families for the prevention of circumstances requiring the placement of children in protective care or in treatment programs;</p> <p>(c) provide family guidance, counseling, supervision and other services to families for the protection of children</p> <p>9(1) A member of a family may apply to an agency for and may receive from the agency counseling, guidance, supportive, educational and emergency shelter services in order to aid in the resolution of family matters which if unresolved may create an environment not suitable for normal child development or in which a child may at risk of abuse.</p> | <p>Child protective services must consider the child's best interests, including:</p> <p>...the child's sense of continuity and need for permanency with the least possible disruption;</p> |
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| <p style="text-align: center;">NEW BRUNSWICK</p> <p>WHEREAS it is recognized that the basic rights and fundamental freedoms of children and their families include a right to the least invasion of privacy and interference with freedom ...</p> <p>. "best interests of the child" means the best interest of the child under the circumstances taking to consideration</p> <p>(c) the effect upon the child of any disruption of the child's sense of continuity;</p> <p>(e) the merits of any plan proposed by the Minister under which he would be caring for the child, in comparison with the merits of the child returning to or remaining with his parents;</p> | <p>"community social services" or "social services" means services that are protective, preventive, developmental or rehabilitative in nature and which</p> <p>(c) prevent the need for institutional care was well as provide alternatives to it;</p> <p>(d) support or assist the aged, children or families;</p> | <p>the Minister may</p> <p>(a) enter into an agreement with the parent of the child that specifies what is and what is not to be done to ensure that the security or development of the child is adequately protected</p> <p>32(2) Where the Minister places a child under protective care he shall make adequate provision for his care, and he may (d) leave the child in his own home and may provide social services when the provision of social services is adequate to ensure his proper care</p> <p>Where the court makes a supervisory order under subsection (1) the guardianship and custody of the child remains with the parent, but the Minister has access to the child and to the home in order to supervise the conditions of the order.</p> |
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| <p style="text-align: center;">NEWFOUNDLAND</p> <p>The family is the basic unit of society, health and well-being of the child;</p> <p>Best interests of child</p> <p>All relevant factors shall be considered in determining a child's best interests, including</p> <p>(e) the importance of stability and continuity in the child's care</p> <p>(f) the continuity of a child's relationship with his or her family, including siblings or others with whom the child has a significant relationship;</p> | <p>Prevention activities are integral to the promotion of the safety, health and well-being of a child;</p> <p>(a) families shall be provided, to the extent possible, with services which support the safety, health and well-being of their children;</p> <p>(b) services shall be provided using the least intrusive means of intervention;</p> | <p>Prior to the removal of a child, the director or social worker must believe that a less intrusive course of action is not available</p> <p>Where a child is not removed</p> <p>28. (1) Where a director or social worker believes on reasonable grounds that a child is in need of protective intervention;</p> <p>(b) the child's safety could be assured without removing the child with the provision of protective intervention services;</p> |

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| <p style="text-align: center;">NORTHWEST TERRITORIES – NUNAVUT</p> <p>Whereas the family is the basic unit of society and its well-being should</p> | <p>Voluntary support services and agreements</p> <p>5(1) The Director may enter into a written agreement ... to support and assist that person's</p> | <p>Measures taken for the protection and well-being of children should, as far as possible, promote family and community integrity and continuity;</p> |

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| <p>be supported and promoted;</p> <p>The family's well-being should be supported and promoted;</p> <p>Children should be supported within the context of their family and extended family to the greatest extent possible by the Director providing services or assisting others in providing services on a voluntary basis to support and assist the family;</p> | <p>family to care for the child.</p> <p>(Including:</p> <p>(a) counseling;</p> <p>(b) in-home support;</p> <p>(c) respite care;</p> <p>(d) parenting programs;</p> <p>(e) services for improving the family's financial situation;</p> <p>(f) services for improving the family's housing;</p> <p>(g) drug or alcohol treatment and rehabilitation;</p> <p>(h) mediation of disputes;</p> <p>(i) services to assist the family to deal with the illness of a child or a family member; and</p> <p>(j) any other services agreed to by the Director and the person who has lawful custody of the child.</p> | <p>The application of best interests guidelines include the consideration of:</p> <p>(e) the importance of continuity in the child's care and the possible effect on the child of disruption of that continuity;</p> <p>(f) the risk that the child may suffer harm through being removed from, kept away from, returned to, or allowed to remain in, the care of a parent;</p> <p>Plan of care committee 23(2) A plan of care for a child may include provision for (b) support services to make the child's home safe for the child; (c) counseling</p> |
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| <p>Statement of Principles Least Disruptive Principles</p> | <p>Statement of FAMILY SERVICES</p> | <p>CHILD PROTECTION & "Best Interests Considered"</p> |
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| <p>NOVA SCOTIA</p> <p>The family exists as the basic unit of society, and its well-being is inseparable from the common well-being</p> <p>The basic rights and fundamental freedoms of children and their families include a right to the least invasion of privacy and interference with freedom that is compatible with their own interests and of society's interest in protecting children from abuse and neglect;</p> <p>AND WHEREAS parents or guardians have responsibility for the care and supervision of their children and children should only be removed from that supervision, either partly or entirely, when all other measure are inappropriate;</p> | <p>The functions of an agency are to:</p> <p>(b) work with other community and social services to prevent, alleviate and remedy the personal, social and economic conditions that might place children and families at risk;</p> <p>(c) provide guidance, counseling and other services to families for the prevention of circumstances that might require intervention by an agency;</p> <p>(e) develop and provide services to families to promote the integrity of families, before and after intervention pursuant to this Act;</p> <p>Services to families include:</p> <p>(a) improving the family's financial situation;</p> <p>(b) improving the family's housing situation;</p> <p>(c) improving parenting skills;</p> <p>(d) improving child-care and child-rearing capabilities;</p> <p>(e) improving homemaking skills;</p> <p>(f) counseling and assessment;</p> <p>(g) drug or alcohol treatment and rehabilitation;</p> <p>(h) child care</p> <p>(i) mediation of disputes;</p> <p>(j) self-help and empowerment of parents who children have been, are</p> | <p>The application of best interests guidelines include consideration of:</p> <p>(c) the importance of continuity in the child's care and the possible effect on the child of the disruption of that continuity;</p> <p>(l) the risk that the child may suffer harm through being removed from, kept away from, returned to or allowed to remain in the care of a parent or guardian;</p> <p>The Minister and the agency shall take reasonable measures to provide services to families and children that promote the integrity of the family...using the least intrusive means of intervention and, in particular, to enable a child to remain with the child's parent or guardian or be returned to the care of the child's parent or guardian,</p> <p>An agency shall not enter into a temporary-care agreement unless the agency ... is satisfied that no less restrictive course of action, such as care in the child's own home, is appropriate for the child in the circumstances.</p> |

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| | <p>or may be in need of protective services; (k) such matters prescribed by the regulations.</p> | <p>The court shall not make an order removing the child from the care of a parent or guardian unless the court is satisfied that less intrusive alternatives, including services to promote the integrity of the family ...[have failed, are refused or are inadequate to protect the child.]</p> |
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| <p style="text-align: center;">ONTARIO</p> <p>To recognize that while parents may need help in caring for their children, that help should give support to the autonomy and integrity of the family unit and, wherever possible, be provided on the basis of mutual consent.</p> <p>To recognize that the least disruptive course of action that is available and is appropriate in a particular case to help a child should be considered.</p> <p>To recognize that children's services should be provided in manner that,</p> <p>(i) respects children's needs for continuity of care and for stable family relationships,</p> | <p>The functions of a children's aid society include a duty to:</p> <p>(c) provide guidance, counseling and other services to families for protecting children or the prevention of circumstances requiring the protection of children;</p> <p style="text-align: center;">CHILD PROTECTION CONSIDERATIONS</p> <p>A society shall not make a temporary care agreement unless the society, ...(b) is satisfied that no less disruptive course of action, such as care in the child's own home, is appropriate for the child in the circumstances.</p> <p>The application of best interests guidelines include consideration of:</p> <p>(c) the importance of continuity in the child's care and the possible effect on the child of the disruption of that continuity;</p> <p>(l) the risk that the child may suffer harm through being removed from, kept away from, returned to or allowed to remain in the care of a parent or guardian;</p> | <p>Warrant to apprehend child 40(2) A justice of the peace may issue a warrant authorizing a child protection worker to bring a child to a place of safety if the justice of the peace is satisfied on the basis of a child protection worker's sworn information that there are reasonable and probable grounds to believe that, (b) a less restrictive course of action is not available or will not protect the child adequately.</p> <p>Consent order: special requirements The court shall, before making an order under section 57 that would remove the child from the parent's care and custody, ask whether the society has offered the parent and child services that would enable the child to remain with the parent,</p> <p>Least disruptive alternatives preferred 57(3) The court shall not make an order removing the child from care of the person who had charge of him or her immediately before intervention under this Part unless the court is satisfied that alternatives that are less disruptive to the child, including non-residential services and the assistance referred to in subsection (2), would be inadequate to protect the child.</p> |

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| <p>PRINCE EDWARD ISLAND</p> <p>Parents have the right and responsibility for the care and supervision of their children, and children should only be removed from that care and supervision when other measures have failed or are inappropriate;</p> <p>The rights of children, families and individuals are guaranteed by the rule of law, intervention into the affairs of individuals and families should be governed by law so as to protect those rights and preserve the autonomy and integrity of the family wherever possible;</p> <p>AND WHEREAS the prevention of abuse and neglect of children is a responsibility shared by the family, community and the province;</p> | <p>Provision of child welfare services</p> <p>13(1) Where the Director concludes, after an investigation, that a child is in need of protection, the Director may offer child welfare services to the parent.</p> | <p>The application of best interests guidelines include consideration of:</p> <p>(c) the importance of continuity in the child's care and the possible effect on the child of the disruption of that continuity;</p> <p>Apprehension of a child</p> <p>23(1) The Director may apprehend a child, where there are reasonable grounds to believe that ... a less intrusive course of action will not adequately protect the health or safety of the child.</p> <p>The Court requires that the Director provide evidence that ...a less intrusive course of action will not adequately protect the health or safety of the child;</p> <p>Court Applications</p> <p>30(3) The Director shall, ...present evidence respecting (b) where the child was apprehended, (iii) consideration by the Director of less disruptive measures than apprehension</p> |

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| <p>QUEBEC</p> <p>The primary responsibility for the care, maintenance and education of a child and for ensuring his supervision rests with his parents.</p> <p>Every decision made under this Act must contemplate the child's remaining with his family.</p> | <p>The director may propose as voluntary measures that may be included in an agreement</p> <p>(a) that the child remain with his family and that the child's parents report periodically to the director on the measures they apply in their own regard or in their child's regard to put an end to the situation in which the security or development of the child is in danger;</p> <p>(b) that the child and the child's parents undertake to take an active part in the application of the measures designed to put an end to the situation in which the security or development of the child is in danger;</p> <p>(f) that a person working for an</p> | <p>Any intervention in respect of a child and his parents must be designed to put an end to and prevent the recurrence of a situation in which the security or development of the child is in danger</p> <p>The director shall periodically review the case of every child whose situation he has taken in charge. He shall, where applicable, satisfy himself that every measure designed to ensure the child's return to his parents is taken, if such a return is in his interest, or ensure that the child has living conditions appropriate to his needs and his age.</p> |

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| | institution or body provide aid, counseling or assistance to the child and the child’s family; | |
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| <p>SASKATCHEWAN</p> <p>The purpose of this Act is to promote the well-being of children in need of protection by offering, wherever appropriate, services that are designed to maintain, support and preserve the family in the least disruptive manner.</p> | <p>The minister may:</p> <p>(b) provide family services to or for the benefit of a parent or a child where the minister considers them essential to enable the parent to care for the child;</p> <p>Where a parent acknowledges the need for family services and agree to the provision of those services, a director may enter into an agreement with the parent for the provision of family services.</p> | <p>Where, on investigation, an officer concludes that a child is in need of protection, the officer shall:</p> <p>a) take all reasonable steps that he or she considers necessary to provide for the safety ...of the child, including, ... the offer of family services where practicable;</p> <p>Withdrawal 25 An officer may withdraw an application for a protection hearing at any time if: (a) an agreement for the provision of family services is reached with the parent;</p> |

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| <p>YUKON</p> <p>The application of best interests guidelines include consideration of:</p> <p>(c) the importance of continuity in the child’s care and the possible effect on the child of the disruption of that continuity;</p> <p>(l) the risk that the child may suffer harm through being removed from, kept away from, returned to or allowed to remain in the care of a parent or guardian;</p> | <p>For the implementation of the policy described in section 108, the director shall take reasonable steps to ensure the safeguarding of children, to promote family conditions that lead to good parenting, and to provide care and custody or supervision for children in need of protection.</p> | <p>It is the policy of the Minister and the director to supply services as far as is reasonably practicable to promote family units and to diminish the need to take children into care or to keep them in care.</p> |

Appendix B: FAMILY CENTERED SERVICES DEFINED

Family support and family preservation are often referred to as “family centered” services. Family-centered refers to an approach to child welfare social work in which the family is seen as the primary unit of attention. Respecting, strengthening, and supporting the family—while guaranteeing child safety—are the hallmarks of this method and practice is rooted in the desire to improve outcomes for families and children. Family-centered intervention encompasses the belief that the family is at the center and service providers are collaborators. Families and service providers interact throughout the process of identifying, planning, accessing and evaluating formal and informal services and resources. According to the North Carolina Department of Social Services, the following beliefs provide the foundation for the family-centered services model:

1. Safety of the child is the first concern.
2. Children have the right to their family.
3. The family is the fundamental resource for the nurturing of children.
4. Parents should be supported in their efforts to care for their children.
5. Families are diverse and have the right to be respected for their special cultural, racial, ethnic, and religious traditions; children can flourish in different types of families.
6. A crisis is an opportunity for change.
7. Inappropriate intervention can do harm.
8. Families who seem hopeless can grow and change.
9. Family members are our partners.
10. It is our job to instil hope.

Acceptance of family-centered services at a conceptual level is paramount in collaboratively coordinating the needs of the child, family and community. Shared responsibility, negotiation and collaboration must occur between the family and service systems at all levels of organization. In order for successes to occur at the family and systems level, the basic and developmental needs of the family and community must be addressed and incorporated across health and human service systems (Family Resource Coalition, 1996).

The child welfare field has been broadly conceived to support the well-being of families and their children, and the use of family-centered services in child welfare is under-girded by beliefs and principles that endorse the rights of both families and children. The principles that focus on the integrity of the family include: families, in all of their diverse forms, are the best places to raise children; families have the right to fair access to resources and opportunities needed for successful functioning and child rearing;

and families have the right to privacy unless children are endangered. Counterbalancing these are three principles that focus on children's rights: parental rights are conditioned by an obligation to protect children and promote their well-being; children have the right to a fair chance in life and the essentials of healthy development, including a sense of belonging, continuity of care, safety, nurturing, socialization to constructive societal norms, and access to opportunities; and children who are at risk have the right to community protection (McCroskey & Meezan, 1998).

Appendix C

EXAMPLES FAMILY PRESERVATION SERVICES

The Surrey, B.C. Family Preservation Program, in operation since 1994, provides intensive support and clinical treatment to families who face the imminent risk of having their child(ren) placed outside their home. Key features of the program include the following:

- Family centred, alternative to foster or group placement, immediate response (72 hours or sooner from referral)
- Highly flexible scheduling (24 hours, 7 days per week availability)
- Small caseloads (3 - 4 families)
- Intensive intervention (4 - 10 hours per week as needed)
- Services delivered in the family home (and community)
- Eight-week duration, and goal oriented with "focused objectives".
- 6-month intervention available when crisis has subsided & the family is committed to continue addressing family issues

Services provided include: Therapy, Communication skills, Parenting skills, Anger management, Advocacy. Supporting families to meet needs such as: Locating food banks, Low-cost housing, Furniture, etc.

The Caring About Children and Their Families Program, Family and Children's Services, Guelph, ON operates a Family Support program that provides immediate, intensive, time limited in-home support to families in crisis, as an alternative to the admission of children into care. It is intended both to alleviate the crisis and to help the family develop new coping skills so that they can better manage the crises they will encounter in the future.

The Andrews Street Family Centre in Winnipeg, MB operates a Mom's Helping Mom's program. Four community women who had been trained as outreach/support workers were hired by ASFC to provide:

- home visiting,
- peer support and
- mentoring to young mothers.

Outreach services to at-risk teen parents who are not linked up with other helping services or systems and thereby prevent family crises and breakup. The approach represents a shifting of resources and service responses from more formal, professionally designated diagnosis and intervention strategies, to one of practical, personal, community-based support. The reason for this shift is that adolescent mothers and their children, who face the greatest risk of poverty and dependency on social services, often lack the experience, the opportunities and the practical personal supports they would require to plan for and work towards greater self reliance.

West Region Child and Family Services, Inc. Erickson, MB

Provides child and family services to 9 First Nations in Western Manitoba. Services include: child protection services, foster care, therapeutic foster care, and residential care services for special needs children, family support services and treatment support services for member First Nations families at risk of breakdown.

- Community Based – services are provided in the First Nations community.
- Home Based Services – services are provided in the home of the client family, where possible.
- Coordinated Approach: - the family support worker or treatment support worker take on only those cases that have been referred through a team based process.
- First Nations models of healing are emphasized and used in conjunction with clinically based approaches.
- Client confidentiality is maintained throughout the process.
- Positive rapport with the client family is a goal in all service.
- Services are geared for the whole family unit, where possible, or with a single individual if necessary.

Federal funding for services is by way of a Block Grant – pilot project.

Families First Resource Society, British Columbia

During the past seven to eight years Intensive Family Preservation Services (IFPS) have been delivered in British Columbia by a mix of government, nonprofit, and private organizations. Most if not all IFPS programs today are offered by non-profit or private agencies. Generally, these services are designed to prevent out-of-home placement of children through the provision of short-term intensive therapeutic services to families at risk of such placements. Family preservation services have been utilized in child welfare, juvenile justice, and mental health settings.

- Maximum use is made of family resources and strengths.
- Smaller caseloads allow availability and consistency from the same worker.
- Assessment and treatment is ongoing and is done in the home.
- Services are as flexible and intensive as necessary.
- Services reinforce parental self respect and responsibility.
- Help to lessen the time children spend in foster care.
- Increases the chance of a successful return home for children who are in placement.

Counsellors utilize a strength focused, family centered method of service delivery in the home. Services are as flexible and as intensive as needed. Through counselling, education and support, families learn to solve their problems and thus reduce their chances of having a child or children placed out of their homes. When placement is necessary, services are geared toward maintaining vital family connections to facilitate a smooth transition back into the home.

Intensive family preservation services are a particular genre of child welfare services to prevent unnecessary residential placement (foster or staffed resources) by providing a treatment model with specific service features: short-term and intensive services, in a home-based and family-centred approach.

Due to the relatively brief but intense duration of service, families are encouraged to build linkages with other community supports, such as volunteer organizations, religious institutions, and informal networks of family and friends, rather than rely heavily on government funded services.

A key element of family preservation services is that children and families will receive supports earlier, before the family unit breaks down and requires more intrusive and costly supports.

The Institute for Family Centered Services (ICFS), United States: ICFS is a nationally recognized organization dedicated to strengthening and preserving families through innovative in-home counselling. ICFS serves families in Maryland, Virginia, North Carolina, Georgia, and Florida providing in-home family counselling, comprehensive assessments, intensive case management, sex offender treatment, substance abuse treatment, and family support services. ICFS has a proven 15-year track record of working with the most resistant and dysfunctional of families, including those with long histories of court involvement, adjudicated commitments, and multiple out-of-home placements, with 88% success!

The strengths-based family assessment uses the Eco-Map, Genogram, and Family Life Cycle as instruments in a comprehensive assessment process with individuals and family systems that provide staff the insight to begin an effective intervention.

Six-month intensive eco systemic approach with the primary goal focused on one of three areas: improving family functioning to prevent the need for out-of-home placements, family stabilization and reduction of anti-social behaviors, or family reunification.

- Intensive and rigorous interventions with the entire family unit and family support systems in their own homes,
- Averaging 140-160 direct contact hours with the family, with 5-10 hours per week devoted toward attainment of treatment goals developed by the family as a result of our strengths-based family assessment.
- The clinician develops a treatment plan with the family that include family therapy, diverse structural interventions and strategies, experiential family activities to promote family cohesion and improved functioning. Individual and family sessions, functional life skills, and
- Wraparound case management are provided throughout the duration of the service period.
- Staff is available to families on a 24-hour basis, 7 days per week, with sessions determined by the family's schedule - often nights and weekends.

Research indicates that our most successful families average 5.9 months.

Healthy Families Indiana

Healthy Families Indiana is a voluntary home visitation program designed to promote healthy families and healthy children through a variety of services, including child development, access to health care and parent education. By working closely with hospital maternity wards, prenatal clinics and other local agencies, Healthy Families Indiana systematically identifies families that could benefit from education and support services either before or immediately after birth. The program is designed to strengthen families by reducing child abuse and neglect, childhood health problems and juvenile delinquency. In partnership with Healthy Families America, the national home visitation model, Healthy Families Indiana was launched in 1994.

Research over the last two decades has consistently confirmed that *providing education and support services to parents* around the time of a baby's birth, and continuing for months or years afterwards, *significantly reduces the risk of child maltreatment* and contributes to positive, healthy child rearing practices. Families receiving this type of intensive home visitor service also show other positive changes such as consistent use of preventive health services, increased high school completion rates for teen parents, higher employment rates, lower welfare use and fewer pregnancies.