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We are Coming to the Light of Day

First Nations Child & Family Caring Society of Canada

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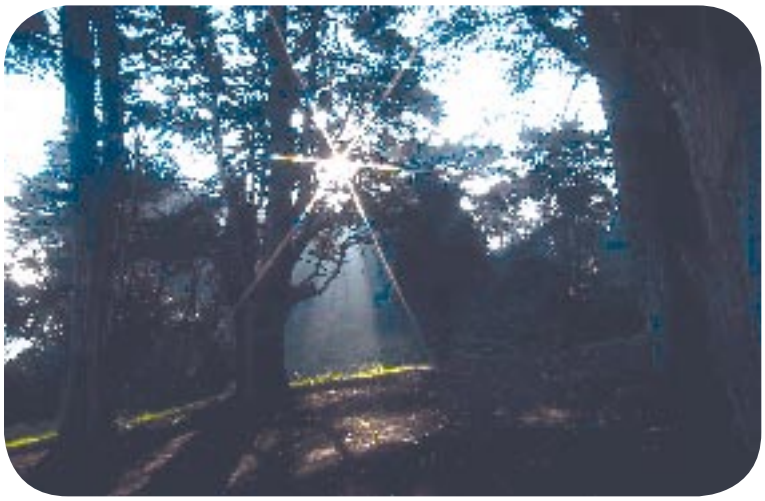

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We are Coming to the Light of Day

Throughout the many years of the National Policy Review, we have traveled down many paths –sometimes we have stumbled in the darkness trying to move forward in a good way. We could not see our way forward clearly.

This report provides the clear evidence needed to ensure First Nations children and families receive what is rightfully theirs – a chance to live with dignity, in the ways of their ancestors, safely at home.

The light is beginning to shine – to light our way forward. We can not turn back or stand still – generations are depending on us to go forward – now that we can.

Donald Horne, Kahnawake First Nation
Elder and First Nations Representative
to the National Policy Review (2000-2003).

A very special note of appreciation to Jordan's family and community who bestowed a great honour and responsibility on all of us by allowing the use of the term Jordan's principle to remind us that in the end this is all about children – and they really do need to come first – all of the time.

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Dedication

In memory of Jordan

The moments of your life live strong in the hearts and minds of all who knew you and many who were inspired by you. We join hands with your loving family and community to ensure that when decisions are made for children – the child really does come first.

Honouring

The First Nations Child and Family Caring Society of Canada extends our heartfelt appreciation to Donald Horne, Elder, Kahnawake First Nation and Derald Dubois, Touchwood Child and Family Services who so honorably served as First Nations representatives on the Joint National Policy Review Management Committee giving generously of their time and expertise. Many thanks to the Assembly of First Nations, the Department of Indian Affairs, First Nations child and family service agencies, provincial child welfare organizations, the National Policy Review Funding Design Team, the National Policy Review National Advisory Committee, the Public Health Agency of Canada and the following list of talented researchers who contributed their time and expertise to benefit First Nations children and families:

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Lloyd Levan Hall
Linda Deriviere
Kathryn Irvine
Shelley Thomas Prokop
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Many thanks to Michelle Nahanee for her beautiful design and layout work for this report. (***Note from designer:*** This report was printed on 80lb. text weight Environment paper by Neenah. It is made with 80% post consumer recycled fibre and 20% FSC certified fibre. FSC designates fibre from responsibly managed forests. The paper is ancient forest free and was produced without the use of elemental chlorine. Solid ink technology was used in printing this report with no ink waste entering nearby water streams during or after production. ***hoy chexca***)

CONTENTS

WEN:DE Coming to the Light of Day

CHAPTER 1
SUMMARY OF FINDINGS

by Cindy Blackstock, Tara Prakash, John Loxley and Fred Wien

Abstract

This multidisciplinary research project brought together experts in First Nations child welfare, community development, economics, management information systems, law, social work and management to inform the development of three funding formula options to support policy and practice in First Nations child and family service agencies in Canada. This unique research approach involved specialized research projects on the incidence and social work response to reports of child maltreatment respecting First Nations children, prevention services, jurisdictional issues, extraordinary circumstances, management information services and small agencies. These research projects were complimented by the results of twelve case studies of First Nations child and family service agencies in Canada. Findings indicate that First Nations children are over represented at every level of the child welfare decision making continuum including reports to child welfare, case substantiation rates, and admissions to child welfare care. In fact an analysis of child in care data by cultural group indicated that one in ten Status Indian children in three sample provinces were in care as of May 2005. Research results indicate that First Nations child and family service agencies are inadequately funded in almost every area of operation ranging from capital costs, prevention programs, standards and evaluation, staff salaries and child in care programs. The disproportionate need for services amongst First Nations children and families coupled with the under-funding of the First Nations child and family service agencies that serve them has resulted in an untenable situation. Recommendations for policy change and future research are discussed.

Project Overview

> *[The Committee] is equally encouraged by the establishment of First Nations child and family service providing culturally sensitive services to Aboriginal children within their communities. United Nations Committee on the Rights of the Child Concluding Observations Canada, 2003, Observation 26.*

There are approximately three times the numbers of First Nations children in state care than there were at the height of residential schools in the 1940's (Blackstock, 2003). Taken together the 9000 First Nations children in care who are resident on reserve in Canada will spend over two million nights away from their families this year (McKenzie, 2002). Through the years, many have dreamed of making a difference for these children – to allow them to stay safely at home. This research project is dedicated to those children, their families and to making the dream of keeping them safely at home a reality. The most encouraging and important finding of this research project is that there really are things we could be doing for this generation of First Nations children to improve their well being – and in most cases it is as simple as providing them access to the resources enjoyed by other Canadians – but in a manner that reflects their distinct identity.

Recent research has confirmed that First Nations children are removed at disproportionate rates due to neglect (Blackstock, Trocme, & Bennett, 2004). When neglect is unpacked – poverty, poor housing and substance misuse are identified as key drivers (Trocme, Knoke, & Blackstock, 2004). This report is as much about redefining social work to better respond to the needs of First Nations families as it is about providing an evidence base for a renewed, and hopefully, equitable funding regime for First Nations child welfare. The researchers involved in this project represent some of the most renowned experts in Canada. We are honoured they are sharing their knowledge in this report – we know they did it because they believed it would make a difference. However, no report alone can do that – at the end of the day it is up to all those who read this report to mobilize this knowledge into beneficial action that First Nations children can experience – not just hear.

Building on the 17 recommendations of the Joint National Policy Review of First Nations Child and Family Services (NPR) (MacDonald and Ladd, 2000), the National Advisory Committee of the Joint National Policy Review (NAC) requested that the First Nations Child and Family Caring Society of Canada (FNCFCS) undertake research to respond to the research questions identified in Phase One[1] of the research project to inform three possible funding options for First Nations child and family services:

1) **Integrating recommendations of the NPR into the current funding formula, Directive 20-1, Chapter 5 (hereinafter called the Directive or Directive 20-1)**

2) **Linking First Nations child and family service agency funding with provincial child welfare funding levels**

3) **A new First Nations based funding formula.**

The first two possible funding models are relatively well defined with the first having benefited from the recommendations of the Joint National Policy Review on First Nations Child and Family Services completed in 2000 and the second based on standardized provincial funding formulae where they exist. In terms of the restructuring of Directive 20-1, the seventeen recommendations improve funding for First Nations child and family services contained in the National Policy Review were validated in Phase One and formed the primary frame of reference for analysis of this option in Phase Two (excluding the recommendation for a review of the funding arrangement in Ontario which will need to be done under a separate process).

The provincial option is also reasonably well defined although it is not always clear how specific child welfare services are funded within universal provincial social services funding pools. Moreover, as detailed later in this report there were instances where provinces had lost sight of the original funding formula over time and had simply adjusted the rate according to volume and

cost of living indices. Nonetheless, three provinces were identified for further research – Alberta, Nova Scotia and Manitoba and should provide a reasonable basis for determining if linking First Nations child and family service funding to the level of funding provided by the province in their respective area is a viable option.

The First Nations model is potentially the most promising although it is undoubtedly the most difficult to develop as there are no pre-existing funding template models to refer to. The potential lies in the possibility of re-conceptualizing the pedagogy, policy and practice in First Nations child welfare in a way that better supports sustained positive outcomes for First Nations children. There are several theme related studies in Phase Two which will contribute to this model – such as the secondary analysis of the First Nations data set in the Canadian Incidence Study of Reported Child Abuse and Neglect (CIS) and the Management Information System report. Although other study methodologies will inform this model, these two studies are particularly important given that any new funding regime should be founded on evidence based research and data – not speculation.

In terms of the CIS, this study describes the characteristics of children and their families who came into contact with the child welfare system over a three month period in 2003 (eight First Nations child and family service agencies participated.) As this is the second cycle of the CIS it is possible to compare results respecting Aboriginal children collected and analyzed as a part of the 1998 study.

The review of management information systems will also be a critical report in that will describe the current capacity of First Nations agencies to collect and report data that could potentially inform a First Nations funding formula model. The MIS review includes key informant interviews with First Nations child and family service agencies using a variety of data management systems ranging from pen and paper to agency based MIS systems.

The research for Phase Two began in January 2005 when FNCFCSA identified an interdisciplinary research team including experts in economics, First Nations child and family services, sociology, substance misuse, community development, management, public administration, management information systems, psychology and law. Methodological approaches for research projects were designed in accordance to the requirements of each research question identified in Phase One. A key method was to conduct detailed case studies of 12 First Nations child and family service agencies and the provinces using standardized questionnaires administered by regional researchers. The surveys include questions describing the range of services currently provided as well as to map out optimal levels of service and the costs associated with ensuring an equitable and culturally based funding formula going forward.

Selected First Nations child and family service agencies were also contacted by experts in management information systems, jurisdictional disputes and child maltreatment prevention services in order to inform the funding formula research. culminating in a report on the findings in June of 2005. These tight time frames have impacted the ability of our research team to fully analyze all aspects of the project. Nonetheless, results suggest that given the variety of research methodologies, the expertise of the research team and the cooperation of First Nations child and family service agencies and the federal and provincial governments have yielded substantial information to guide the National Advisory Committee in its efforts to develop a new funding formula.

This chapter provides an overview of the findings of all research projects and describes the implications of these findings for three funding formula options. In the spirit of transparency, full research reports on specific research areas are published in subsequent chapters in this report except in instances where publication of the report would reveal the identity of research participants.

Guiding Principles

The following set of guiding principles was established by the National Advisory Committee to guide the development of a new funding formula for First Nations child and family services:

- Supports culturally based services
- Consistent with the United Nations Convention on the Rights of the Child
- Ensures equal benefit to children under the law
- Supports preventative services and community development in relation to child maltreatment
- Responsive to the proportion of high needs children
- Accommodates unexpected occurrences
- Responsive to remoteness and service context
- Permits flexibility in allocation of budget
- Provides automatic price adjustments
- Provides adequate funds to meet needs of children in care
- Reflects the mandate of INAC

Research Questions and Methodology Summary

Table One on the following page summarizes the research questions identified in Phase One to inform each of the funding options and the methodology used to respond to each question.

Once all the data was retrieved from the various projects, the principal investigators reviewed the projects to identify how the research findings linked together to inform the three funding formula options. This analysis was presented to the National Advisory Committee for their review and the final report was prepared after having considered their comments.

Table 1: Summary of Research Questions

Funding Formula Option	Research Question	Methodology
Redesign of Directive 20-1	• Prevention • Identifying gaps in the current formula • Extraordinary Costs • Management Information Systems (MIS) • Capital Costs • Implications for small agencies • Jurisdictional disputes	• Principal methodology for all topic areas involves conducting literature reviews and key informant interviews. • Key informant interviews with 12 sample FNCFSA representing diversity in cultures, operating contexts and sizes will inform the development of a questionnaire to be administered to all FNCFSA in the Phase III of the research. • MIS and legal experts conducted independent studies for the MIS and jurisdictional dispute analysis. • Secondary analysis of the Aboriginal sample of the Canadian Incidence Study on Reported Child Abuse and Neglect (2003) informed prevention and gaps research topics. • Focus group conducted for prevention services
Tying the Formula to Provincial Standards	• Identification of funding formulas used by each province/territory • What results would be achieved if provincial formulas were applied to FNCFSA? • Comparative analysis of provincial formula versus Directive 20-1	• Literature review • Key informant interviews with each province/territory to identify funding formula • Key informant interviews with FNCFSA (using sample of 12 agencies) • Analysis of three provincial funding formulas • Analysis of all information by econometrician and policy experts
First Nations Based Formula	• Identification of unique conditions faced by FN communities in CFS. • Best Practices in FNCFSA and conditions that support best practice • Ideal set of programs and services in this context and the cost of delivering them • What adjustment factors would be needed to accommodate different communities • What is the range of funding formula options that could best support a First Nation child welfare system • Implementation steps	• Literature reviews to describe the unique conditions and best practices in FNCFSA and economic formula options. • Key informant interviews with a diversity of First Nations Child and Family Service Agencies (utilizing 12 case studies proposed for option one) • Identification of specific data sets and concordant infrastructure needed to further develop this option. • Canadian Incidence Study on Child Abuse and Neglect

Research Team

FNCFCS was honoured to work with the following esteemed researchers, many of whom are broadly recognized as being amongst the best in their field of research, both nationally and internationally:

Table 2: Researchers for each Research Project

Research Project	Researchers
Canadian Incidence Study on Child Abuse and Neglect-2003 Cycle *	Dr. Nico Trocme, Della Knoke, Corbin Shangreaux, Dr. Barbara Fallon and Bruce MacLaurin
Management Information Systems **	Stanley Loo
Prevention Services ***	Dr. Fred Wien, Dr. John Loxley and Linda DeRiviere
Jurisdictional Disputes ****	Kelly MacDonald, Dr. Gerry Cradock
Extraordinary Circumstances *****	Dr. Gerry Cradock
Remoteness Factor	Tara Prakash and Dr. John Loxley
Capital Costs	Lloyd Levan Hall
Small Agencies ******	Dr. John Loxley, Tara Prakash, Valerie Lannon and Judy Levi
First Nations and Provincial Case Studies	Fred Wien, John Loxley, Cindy Blackstock, Valerie Lannon, Kathryn Irvine, Shelley Thomas-Prokop, Corbin Shangreaux, Melanie Vincent, Judy Levi, Tara Prakash, Justin Julien, Sarah Clarke, Kathryn Minichiello, Rachel Levasseur
Project Coordination	Dr. Fred Wien and Cindy Blackstock
Report Design and Layout	Michelle Nahanee

Research Project Chapter Locater

Research Project Title	Chapter and Page Number
The Experience of First Nations Children Coming into Contact with the Child Welfare System in Canada: The Canadian Incidence Study on Reported Abuse and Neglect *	Ch. 2, page 60
Management Information Systems **	Ch. 5, page 146
Promoting Community & Family Wellness Least Disruptive Measures and Prevention ***	Ch. 4, page 113
Jordan's Principle: A Child First Approach to Jurisdictional Issues ****	Ch. 3, page 87
Extraordinary Costs and Jurisdictional Disputes *****	Ch. 6, page 178
Small Agencies ******	Ch. 7, page 208

Summary of Research Project Findings

1. TheExperience Of First Nations Children Coming Into Contact With The Child Welfare System In Canada: THE CANADIAN INCIDENCE STUDY ON REPORTED ABUSE AND NEGLECT

The profiles of Aboriginal families differ dramatically from the profile of non-Aboriginal families. Aboriginal cases predominantly involve situations of neglect where poverty, inadequate housing and parent substance abuse are a toxic combination of risk factors.
(Trocme, MacLaurin, Shangreaux & Fallon, 2005)

Study Design and Methodology

Despite the graphic over-representation of Aboriginal children in the child welfare system in Canada, until 1998 there was no information available on why these children were coming into child welfare care. The 1998 Canadian Incidence Study on Reported Child Abuse and Neglect (Trocme, et. al., 2001) (hereinafter called CIS-98) included Aboriginal children in the study sample, as well as three First Nations child welfare agencies. This national study documents the assessments of social workers on reported cases of child abuse and neglect that came to their attention during a three month period. The study captures information on why the child was reported to child welfare, report substantiation rates, child functioning items, caregiver functioning items and case disposition. This study was replicated in 2003 including eight First Nations child and family service agencies in the sample. The CIS -2003 Aboriginal data sample reflects the experiences of 2,328 investigations involving Aboriginal children: 304 First Nations children served by a First Nation's agency, 1,244 First Nations children served by mainstream agencies and 476 Métis, Inuit, and other Aboriginal children. A new feature of the CIS 2003 analysis is that the sample size of substantiated cases was large enough in some cases to compare the experiences of First Nations children on reserve with First Nations children off reserve, other Aboriginal children and non Aboriginal children. To follow is a brief summary of the secondary analysis of the 2003 CIS data respecting Aboriginal children with the full report appearing in Chapter 2.

Building on the Findings of CIS-98

Secondary analysis of the Aboriginal data in CIS-98 revealed that although Aboriginal children were less likely to be reported to child welfare authorities for physical or sexual violence they were twice as likely to experience neglect (Blackstock, Trocme & Bennett, 2004). When researchers unpacked neglect by controlling for various care giver functioning and socio-demographic factors – they determined that the key drivers of neglect for First Nations children were poverty, poor housing, and substance misuse (Trocme, Knoke & Blackstock, 2004). It is important to note that two of these three factors are arguably outside of the domain of parental influence – poverty and poor housing. As they are outside of the locus of control of parents is unlikely that parents will be able to redress these risks in the absence of social investments targeted to poverty reduction and housing improvement. The limited ability for parents to influence the risk factors can mean that their children are more likely to stay in care for prolonged periods of time. This is particularly a concern in regions where statutory limits on the length of time a child is being put in care are being introduced. If parents alone can not influence the risk and there are inadequate social investments to reduce the risk – children can be removed permanently. The third factor, substance misuse, is within the personal domain for change but requires access to services. Overall, CIS- 98 results suggest that targeted and sustained investments in neglect focused services that specifically consider

substance misuse, poverty and poor housing would likely have a positive impact on the safety and well being of these children.

Providing an adequate range of neglect focused services is likely more complicated on reserve than off reserve due to existing service deficits within the government and voluntary sector. A study conducted by the First Nations Child and Family Caring Society in 2003 found that First Nations children and families receive very limited benefit from the over 90 billion dollars in voluntary sector services provided to other Canadians annually. Moreover, there are far fewer provincial or municipal government services than off reserve. This means that First Nations families are less able to access child and family support services including addictions services than their non Aboriginal counterparts (Nadjiwan & Blackstock, 2003). Deficits in support services funding were also found in the federal government allotment for First Nations child and family services (MacDonald & Ladd, 2000.) This report found that the federal government funding for least disruptive measures (a range of services intended to safely keep First Nations children who are experiencing or at risk of experiencing child maltreatment safely at home) is inadequately funded. When one considers the key drivers resulting in First Nations children entering care (substance misuse, poverty and poor housing) and couples that with the dearth in support services, unfavorable conditions to support First Nations families to care for their children emerges.

Although there has been no longitudinal studies exploring the experiences of Aboriginal children in care throughout the care continuum (from report to continuing custody[2]), data suggests that Aboriginal children are much more likely to be admitted into care, stay in care and become continuing custody wards. It is possible that the over representation of Aboriginal children in child welfare care is a result of the structural risk factors (poverty, poor housing and substance misuse) not being adequately addressed through the provision of targeted least disruptive measures at both the level of the family and community. The lack of service provision may result in minimal changes to home conditions over the period of time the child remains in care and thus it is more likely the child will not return home. This is an area for further study.

Findings of CIS 2003

Consistent with the findings of CIS-98, neglect continues to be the primary reason why Aboriginal children are reported to child welfare authorities. Amongst the various forms of neglect, physical neglect and failure to supervise were the most frequently reported. Physical neglect relates to the caregivers failure to provide adequately for the child's needs such as nutrition, clothing, hygienic living conditions. CIS requires that the social worker suspect or believe that the parent is at least partially responsible for the situation.

CIS -03 data suggests that First Nations children on and off reserve have higher rates of child functioning concerns than their non Aboriginal peers. First Nations children on reserve were more likely to be reported as having depression/anxiety, negative peer involvement, misuse substances, irregular school attendance, and to experience a learning disability than their First Nations peers resident off reserve, other Aboriginal children and non Aboriginal children. On the positive front, First Nations children on reserve were less likely to experience ADD, ADHD, inappropriate sexual behaviour, to have a positive toxicology at birth or young offender involvement than their peers off reserve.

In terms of caregiver functioning, it is clear that First Nations caregivers are facing more pressures than their non Aboriginal counterparts. Although First Nations caregivers on reserve are less likely to be single parents than their non Aboriginal peers, they are more likely to rely on benefits for income and to live in public housing, in unsafe housing, and overcrowded conditions. Alcohol abuse continues to be a key factor affecting 44% of First Nations caregivers on reserve versus 58% for First Nations off reserve, 43% for other Aboriginal caregivers and 11% for non Aboriginal caregivers. First Nations caregivers were more likely to experience drug and solvent abuse (44%) versus 10% for non Aboriginal caregivers. However, the

rates for drug and solvent abuse amongst First Nations caregivers resident off reserve were higher at 58% than amongst other Aboriginal caregivers (43%).

In terms of social worker response, cases involving Aboriginal families were two and one half times more likely to be substantiated (49 per thousand) than non Aboriginal families (19.8 per thousand.) In terms of investigative outcomes, cases involving First Nations children were more likely to remain open for services (68%) versus their non Aboriginal peers (41%). Court applications were also more likely for First Nations children on reserve occurring in 10% of cases versus 6% of cases involving non Aboriginal children. Rates for court applications were slightly higher at 13% for both First Nations off reserve and other Aboriginal peoples. When it came to placement First Nations children on reserve were two and a half times more likely to be placed in child welfare care than non Aboriginal children. Specifically, First Nations children on reserve experienced placement rates of 15% as compared to 6% for non Aboriginal children. First Nations children off reserve were placed in child welfare placements in 16% of cases.

CIS -03 compared where Aboriginal children on and off reserve were being placed once admitted to child welfare care. Overall, children on reserve were three times more likely to be placed in either informal kinship care, kinship care or with a family foster home than their non Aboriginal counterparts.

Conclusions

The following concluding statement is taken directly from the CIS report completed for the First Nations Child and Family Caring Society by Trocme et.al. (2005) which appears in full in Chapter 2 of this report:

A number of striking differences emerge from this preliminary comparative analysis of child welfare investigations of Aboriginal and non-Aboriginal children. **From the very outset, Aboriginal children are more than twice as likely to be investigated compared to non-Aboriginal children. Once investigated, cases involving Aboriginal children are more likely to be substantiated, more likely to require on-going child welfare services, more than twice as likely to be placed in out of home care, and more likely to be brought to child welfare court.** The profiles of Aboriginal families differ dramatically from the profile of non-Aboriginal families. Aboriginal cases predominantly involve situations of neglect where poverty, inadequate housing and parent substance abuse are a toxic combination of risk factors. Surprisingly, fewer differences were noted at the level of the children themselves.

The most systematic pattern to emerge from this first analysis highlights the differences between Aboriginal and non-Aboriginal children. It would be helpful to discuss with Aboriginal service providers any on/off-reserve differences that have not been highlighted by this statistical analysis.

Multivariate analyses controlling for some of the differences between Aboriginal and non-Aboriginal families should be undertaken to better understand the factors underlying the differences in service response. **Regardless of these possible explanations, it is apparent that one should expect the cost of providing services to Aboriginal children to be significantly higher given that these cases involve a significantly higher rate of intervention at every point of contact.**

2. JORDAN'S PRINCIPLE: A CHILD FIRST APPROACH TO JURISDICTIONAL ISSUES

Every individual is equal before and under the law and has the right to equal protection and benefit under the law without discrimination and, in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability
Canadian Charter of Rights and Freedoms, Section 15

The spirit of the Canadian Charter of Rights and Freedoms (hereinafter called the Charter) is reaffirmed by Canada signing the United Nations Convention on the Rights of the Child where non-discrimination is a key principle. These principles in domestic and international law provide a foundation for First Nations children to receive equal benefit under the law and should provide adequate incentive for all levels of government to coordinate their policies and programs respecting First Nations children. Unfortunately, as the United Nations Committee on the Rights of the Child (2003) suggests, the lack of coordination between federal, provincial and territorial governments has left open the possibility of uneven implementation of the objects of the Convention.

This report, completed by Kelly A. MacDonald, a Tsimshian lawyer and child rights expert with the assistance of Kylie Walman provides a synopsis of how case law, international law and inquest findings come together to inform the development of a new funding formula that better reflects the non discrimination provisions of the Charter and the United Nations Convention on the Rights of the Child. Ms. MacDonald uses a combined methodology of literature reviews (both for case law and inquests) supplemented by over 20 key informant interviews.

Findings

The research finds that jurisdictional disputes continue to have significant impacts on the lived experiences of First Nations children – particularly those with special needs. Although both the federal and provincial governments embrace the principle that the safety and well being of the child is a paramount consideration, in practice jurisdictional disputes often supersede the interests of children. **The lived experience of this situation is saliently outlined in the case of Jordan, a young child, in Manitoba who remained in hospital for a prolonged period of time due to jurisdictional wrangling between federal government departments as to which department was responsible for paying at home care costs. A sad update is that Jordan passed away before the jurisdictional dispute could be resolved and never had a chance to live in a family environment – the only home he ever knew was a hospital (Lavalee, 2005).**

As key informants contributing to this research confirm, Jordan's experience with jurisdictional disputes is not unique. Efforts to clarify the responsibilities of the federal and provincial governments have been attempted using the court system but as Ms. MacDonald found, existing case law does little to clarify government roles and responsibilities. Lower court decisions such as the decision by Justice MacInnes of the Manitoba Queens Bench find that there is not a clear fiduciary obligation on behalf of the federal government to fund First Nations child and family services. Additionally, a Manitoba provincial court decision found that the provinces have an obligation to ensure equal benefit under the child welfare law for every child within the province irrespective of their views of federal government responsibilities to First Nations children. This suggests that where there is a gap between what

the federal government will fund on reserve and what the provincial statute requires, the province must step in and fund the service. These lower court decisions, however, must be taken within the broader context of Canada's obligations under the Charter of Rights and Freedoms and the United Nations Convention on the Rights of the Child. Ms. MacDonald notes that although there is no existing case law that specifically explores the implications of federal government under funding of child welfare services, perpetuating inequities in child welfare services through inequitable funding regimes is likely inconsistent with Section 15 of the Charter.

As this report notes, the lack of non judicial forums for the resolution of jurisdictional disputes is a problem. This is also evident in the First Nations agency survey responses which indicated that the **12 agencies had experienced 393 jurisdictional disputes this past year requiring an average of 54.25 person hours to resolve each incident.** The most frequent types of disputes were between federal government departments (36%), between two provincial departments (27%) and between federal and provincial governments (14%). Examples of the most problematic disputes were with regard to children with complex medical and educational needs, reimbursement of maintenance, and lack of recognition of First Nations jurisdiction. There were variations in the responses with some regions reporting higher incidents than others which may reflect the uneven development of dispute resolution mechanisms. Although tripartite tables have been established in some regions with INAC, the province and First Nations child and family service agencies, the efficacy and authority of these tables to resolve jurisdictional disputes is unclear and inconsistent. Moreover, as some jurisdictional disputes involve federal, provincial or tribal authorities outside of these core participants it is critical that mechanisms for engaging these groups are integrated into a dispute resolution process. Importantly, dispute resolution mechanisms must be reflective of cultural values and processes of the participating First Nation child and family service agency.

Conclusion: Jordan's Principle to Jurisdictional Dispute Resolution

There is no way to know if implementing recommendation number 4 of the National Policy Review calling for the clarification of jurisdictional disputes involving special needs children would have prevented Jordan's death, but putting Jordan first would have at least provided him with the best opportunity to live in a family environment. Despite the stated intentions by governments, including Canada, the predominant strategy for resolving jurisdictional disputes affecting First Nations children has been to put the needs of the child on the back burner while governments sort out who is going to assume the costs. In far too many cases the government puts its needs before the needs of the child. The predominance of the child second solution in managing jurisdictional disputes is fundamentally inconsistent with our national values, social norms, laws and international commitments. **The well being and safety of the child must be the paramount consideration in resolving jurisdictional disputes – the child must come first in all instances.**

We recommend that a child first principle be adopted whereby the government (provincial or federal) who first receives a request for payment of services for a First Nations child will pay without disruption or delay when these services are otherwise available to non Aboriginal children in similiar circumstances. The government then has the option of referring the matter to a jurisdictional dispute resolution process. Consistent with recommendations made by the Baby Andy inquest we recommend that jurisdictional dispute resolution tables be established to resolve funding disputes between and within federal, provincial and First Nations child and family service agencies. These tables will receive complaints by parties and recommend a resolution.

In Jordan's memory we recommend that this new child first approach to resolving jurisdictional disputes be called Jordan's Principle and be implemented without delay.

3. LEAST DISRUPTIVE MEASURES AND PREVENTION

Our calculations on the cost of child maltreatment in Canada are as follows:

Judicial	$616,685,247
Social Services	$11,780,062,222
Education	$ 23,882,994
Health	$ 222,570,517
Employment	$11,299,601,363
Personal	$ 2,365,107,683
TOTAL	$15, 705,910, 047

This total reflects a minimum [annual] cost to society…The investment of Canadian governments at all levels in social services directed at this serious problem [child maltreatment] represents only a small fraction of billions of dollars lost every year (Bowlus, McKenna, Day & Wright, 2003 P. v)

The projected cost of child maltreatment respecting First Nations children has not been researched in detail. However, considering that Aboriginal children compose approximately 30-40% of all children in child welfare care and the vast majority of those are First Nations, the annual economic costs in Canada are likely in the billions of dollars per annum. The staggering costs noted in the Bowlus e. al. 2003 study are consistent with data from the United States. According to the World Health Organization (2004) **the estimated costs of child maltreatment in the United States in 2001 are reportedly 94 billion dollars or a full 1% of the GDP for the United States.** Alexander Butchart, WHO Coordinator for Violence Prevention notes that "The good news from this report on the economic dimensions of violence is that, according to cost-benefit studies that have been conducted, violence prevention is cost-effective…. Providing graduation incentives for high risk youth and parents or new parents are, respectively, between seven and five times more cost-effective in preventing violence than investing in increased legal enforcement and incarceration." (WHO, 2003 P. 2).

The 1998 Canadian Incidence Study of Reported Child Maltreatment documented an overrepresentation of Aboriginal children in foster care placements and other institutional settings compared to non-Aboriginal children. Although socioeconomic hardship can account for much of this phenomenon, it has been suggested that funding arrangements may also create perverse incentive effects that work against family-based approaches. **In light of this present situation, more suitable alternatives for ensuring the well-being of Aboriginal children are a priority. Prevention constitutes a significant component of the general holistic philosophy of care in First Nations communities and a number of studies have illustrated that setting priorities in prevention is not only fiscally prudent, but also a humanitarian response to child maltreatment.**

The purpose of this study was to identify best practices and least disruptive measures in primary, secondary and tertiary child maltreatment prevention. For the purposes of this study, primary prevention is defined as the range of population based or community development services provided to prevent child maltreatment. Secondary prevention is the range of services provided to children at risk of experiencing child maltreatment. Tertiary prevention is responding to children who are at significant risk or are experiencing child maltreatment. In child welfare legislation in all provinces tertiary prevention services (often termed least disruptive measures) must be exhausted prior to considering the removal of the child from her/his family.

A secondary goal of this study was to identify a realistic level of cost that can be expected by reducing the number of children in care by filling identified prevention funding gaps in Directive 20-1.

Study Design and Methodology

The conclusions of these reports are informed by a literature review on prevention services which was complemented by a one day focus group of

child welfare practitioners, policy makers and researchers. An additional economic cost benefit analysis utilizing data from West Region Child and Family Services Agency in Manitoba was completed in order to inform what savings could reasonably be expected with investments in prevention services over time. It is important to recognize that as the current funding formula inadequately funds prevention services we were limited as to the number of agencies that this type of cost savings analysis could be conducted on. It is important to note that West Region CFS is a large agency which has been in operation for over two decades meaning it was in an ideal position to optimize benefits of block funding. As Dr. McKenzie (2002) notes there are very few other agencies that could benefit from block funding as their economies of scale are too small or they continue to experience fluctuations in costs year over year making setting the base amount for the block a difficult exercise. However, for the purposes of this costing analysis, West Region provides a good indication as to what would be possible if all agencies had access to a holistic and community based range of prevention and least disruptive measures services.

Summary of Findings

There is a general consensus in the literature that child removal should really be the last resort in responding to child maltreatment. This can only be fully realized if there is a focused investment in all three levels of prevention services (primary, secondary and tertiary.) The NPR (MacDonald & Ladd, 2000) found that the current funding formula inadequately invests in prevention and least disruptive measures. Meanwhile the formula does reimburse for services once a child is removed from their family home. **This means that, in practice, there are more resources available to children who are removed from their homes than for children to stay safely in their homes.** Focus group participants echoed this finding and urged strategic and sustained investments in prevention services which would provide families the best opportunity to have their children remain safely in their homes. These services, however, must be reflective of local culture and context and also consider the broader structural risks that impact on child safety such as community poverty, lack of infrastructure and inadequate or overcrowded housing.

Many First Nations child and family service agencies work with families where the children are experiencing, or are at significant risk for, child maltreatment. Focus group participants see a direct relationship between the lack of primary and secondary prevention options that could mitigate family crisis and the high proportion of families who experience family crisis and child maltreatment. If social workers do not effectively respond to early symptoms of child maltreatment and/or family crisis then problems can escalate both in terms of degree and scope creating conditions where removal of the child is the only option. It is suggested that providing a diversity of primary and secondary prevention services would reduce the scale of crisis-related interventions. Currently these services, if offered, are fragmented and poorly funded. Also the Directive does not allow flexibility to work with other departments to jointly undertake prevention projects – funding agreements are structured in such a fashion that stove piping of services is the end result. This needs to be changed to promote more interdisciplinary and holistic prevention interventions (i.e: development and implementation of programs in partnership with addictions services, health or band schools.)

The classification of prevention in terms of primary, secondary and tertiary as used in the literature is to some extent, incongruent with the notion of holism in Aboriginal terms where program strategies often entail a continuum of overlapping and interlocking child welfare services comprising all three levels of prevention. The new funding formula should encourage a seamless continuum of prevention services that allow children and their families to transition easily between programs.

Overall focus group participants echoed the findings of the literature review. There was general consensus that the current funding formula works against a comprehensive prevention agenda for

First Nations agencies. Participants emphasized the need for an increased investment in all aspects of culturally based prevention programs whilst ensuring the maintenance of prevention programs that agencies have been able to establish. The major outcomes of the focus group were as follows:

- Prevention is conceptualized as a front-end investment in people and should be reflected in prevention oriented legislation and funding arrangements.
- The need for a multidisciplinary collaborative approach to intervention.
- There is a need for a contextual framework encompassing broader community related environmental factors and socio-demographic issues.
- Flexibility and sustainability in funding is needed to support prevention programs which respond to the range of risk factors affecting child safety including structural risk.
- There is a need for adequate funding to build infrastructure and human resource capacity to design, deliver and evaluate prevention programs. This is particularly acute in remote communities.
- Building the FNCFSA human resource base and community volunteer capacity in First Nations communities for prevention programs is identified as a priority.
- The need for development of a comprehensive plan relating to capital requirements such as office space, vehicles and computer systems needed to operate prevention programs needs to be addressed.

Cost-benefit Analysis

A cost-benefit analysis was conducted to determine the realistic savings that can be expected by reducing the numbers of children in care using West Region Child and Family Services as an example. **Consistent with the findings of Bowlus et. al. (2003) and the World Health Organization (2003), the calculations demonstrate substantial returns on spending geared toward prevention. It is important to emphasize that reductions in children in care should be conceptualized as an outcome of programs intended to strengthen families and communities.** It is equally important that artificial means of reducing children in care be avoided. For example, in some mainstream regions reduction in child in care numbers have been achieved by reducing the maximum age children can be in care to 16 years. This approach to reducing children in care is not only poor practice, it is inconsistent with federal age of majority (age 18) and the age of majority set out in the Convention on the Rights of the Child (age 18.) Reductions of children in care need to be conceptualized as a positive long term outcome of supporting healthy families. To achieve this there is a need to re-direct policy in favor of primary and secondary services as a principal component of the casework model, while continuing adequate responses to more complex cases of high risk and family conflicts. The cost-benefit analysis confirms that a shift in focus must be directed to family preservation and reunification wherever possible. **A detailed analysis of the cost benefits of West Regions investment in a continuum of primary, secondary and tertiary prevention services revealed that 1.5 million dollars was saved each year as more children were able to stay safely at home versus being placed in child welfare care. This clearly demonstrates that doing the best thing for children and their families can, over the longer term, result in economic benefits as well.**

Gaps In Formula

Analyzing the current national funding formula from the perspective of the general holistic philosophy of care recommended by First Nations experts reveals a number of significant gaps. One of the key gaps is that the cost of living adjustment in the current formula has not been implemented since 1995. Focus group participants felt that this had resulted in a reduction in overall funding for First Nations child and family service agencies across all service areas including prevention as they could not keep pace with inflation. Their opinion was later validated by the Dr. Loxley's analysis of the cost of living that appears later in this chapter.

Although prevention is a significant aspiration of First Nations agency programming, the funding provided by the current formula is insufficient

to meet needs in primary, secondary or tertiary (least disruptive measures) prevention services. Another complication is that agencies have been disallowed prevention based expenditures that they have billed as a part of the child maintenance. It is an expectation of all child welfare statutes in the country that once a child is admitted to care; the child welfare authority has to provide services to the family and the child to optimize conditions for the child's safe return. In many cases, agencies find themselves in a catch 22 situation – they have inadequate funds in the operations pool to pay for these services and then regional INAC staff would disallow the expenditure if it was billed under maintenance. This means that agencies in this situation effectively have no money to comply with the statutory requirement to provide families with a meaningful opportunity to redress the risk that resulted in their child being removed. More importantly, the children they serve are denied an equitable chance to stay safely at home due to the structure and amount of funding under the Directive. In this way the Directive really does shape practice – instead of supporting good practice. There is a clear need to amend INAC policy, or interpretation of policy, to recognize the need to provide family and child supports to children in care.

The issue of compulsory services under provincial statues versus discretionary programs is also an area requiring further attention. There are several categories of discretionary costs consistent with Aboriginal values such as preventative community development expenditures which are not uniformly reflected under statutory legislative standards and therefore are not funded.

Three broad funding recommendations with the goal of suitably redistributing funds to reflect lower maintenance costs and an increased percentage of funds for prevention and community development or family healing support initiatives are:
1) a multidisciplinary team approach to funding, 2) linking prevention funding to children in care and/or families receiving services and 3) linking prevention to agency capacity to implement and evaluate programs.

Conclusion

Many **First Nations child and family service agencies work with families who could avoid experiencing significant family crisis or child maltreatment if they had received primary or secondary prevention services**. Providing an adequate and sustained amount of funding for the development of a holistic and culturally based continuum of primary, secondary and tertiary prevention services would go a long way to ensuring that child removal is a last resort for First Nations children. This finding is consistent with recommendations made in both the NPR and in CIS-98.

There are strong social work and economic cases for making prevention a priority with substantial fiscal and societal savings. Unfortunately, the current funding formula does not adequately provide for prevention programming and may in fact, discourage prevention by under funding the continuum of services that the operations formula was intended to support. Still, some First Nations agencies have been able to implement successful prevention programs through the diversion of maintenance dollars under a block funding arrangement. As the use of maintenance funds in this manner is subject to uncertainty, it is not an option exercised by all agencies.

A separate budgetary provision is recommended for both primary and secondary prevention. In addition to this a separate budget for least disruptive measures which would include services to children in care so that they can safely return home needs to be established. The efficacy of these programs could be supported by incorporating flexibility in funding use to promote interdisciplinary approaches.

4. MANAGEMENT INFORMATION SYSTEMS

The December 2002 Report of the Auditor General of Canada concluded that First Nations agencies must rely on computer technology to manage currently cumbersome and excessive federal

> **reporting requirements. All agencies agree with this totally and want to have their own information system tailored to their needs for a variety of reasons, but absence of technology funding has been the most major problem. Currently, very few agencies have their own system, and they can barely afford it or keep it working smoothly due to constant lack of funds. (Loo, 2005, P.28)**

Study Design and Methodology

This research report was completed by Stanley Loo who is broadly acknowledged as a leading expert in child welfare information systems having been retained by the Provincial and Territorial Directors of Child Welfare and the University of Toronto, Faculty of Social Work to complete a national child welfare outcomes data project. The specific research questions in the Phase One study were:

1. What kinds of MIS systems are currently in use by FNCFSA and how do they compare with provincial systems?
2. What kind of MIS system is required to meet agency requirements and ensure adequate interfaces with provincial and national data systems?
3. What are the costs of developing and maintaining such a system?
4. What are the implications for a funding formula budget?

Methodological approaches included key informant interviews with eight First Nations child and family service agencies representing all regions except Alberta where we were referred to the province as all agencies use the provincial data base system. Provincial government staff were interviewed from all regions except Quebec and British Columbia where MIS contacts were either unavailable or unknown. Additionally, three external MIS experts who provided services to First Nations child and family service agencies were interviewed.

Summary of Findings

The Auditor General of Canada (December, 2002) has recommended that First Nations make greater use of information management technology to manage federal reporting requirements. FNCFCSA interviewed for this research project are supportive of this recommendation but are unable to implement it due to inadequate funding for MIS in the current funding formula. . Findings indicate a diversity in terms of existing MIS capacity. Additionally, Mr. Loo argues that MIS funding should be linked to agency office structure, location, data collection and management needs and capacity. There is no support for linking MIS to child population as in the current operations formula.

Additionally, findings of this report indicate that, despite the recommendations of the Auditor General of Canada (December, 2002) to streamline reporting requirements using information systems as a tool whenever possible, there is a broad variation in the data management systems being used by First Nations child and family service agencies in Canada. Additionally, most agencies expressed a desire to develop their own data management systems which would facilitate data collection for policy making and evaluation purposes and support the reporting needs of tribal governments, INAC and the provinces. A very small number of agencies have developed these systems and in some cases have licensed the resulting product for use in other First Nations communities. Agency based MIS systems, however, are still the rare exception with the vast majority of agencies having inadequate MIS capability. Currently there is broad variation in MIS capacity within First Nations agencies ranging from pen and paper operations to agency developed information systems. There are also a number of agencies who are using the provincial government's case management system but operate separate data collection regimes to collect reporting data required by INAC. It is likely that variation in MIS capacity is related to the amount of operational funding available to the agency – in general large agencies were in a better position to fund MIS services than small agencies.

Moreover, the structure of agencies varies from single office operations to multiple site structures as do the distribution of agencies in rural, remote and urban centers. Both of these factors – agency structure and location influence the MIS needs of agencies.

Another complicating variable is that First Nations child and family service agencies are often required to report to the provinces and tribal leadership on service quality whereas they need to report to the Department of Indian Affairs in order to sustain funding. Although most provincial governments invite agencies to use their data systems (at no cost or on a fee for service basis) agencies must have adequate computer systems/ staff to take advantage of this option. Moreover the provincial computer system option is limited as the systems are designed with the human resources and MIS capacity of the province in mind and are intended to achieve provincial government data collection and reporting requirements. We have not identified an example where a province involved First Nations child and family service agencies in key design elements of the provincial data collection system. Taken together these issues have resulted in many First Nations identifying concerns with the use of provincial systems. For example, there is no harmonization between provincial data systems and INAC data systems thus agencies experience redundancies in data entry – increasing personnel costs. Additionally, agencies reported navigation problems in provincial systems or with province imposed restricted access to systems modules.

In order to analyze the computer hardware needs of diverse agencies – Mr. Loo proposes linking MIS costs to agency structure, location, data collection and reporting needs according to the following agency typologies:

1. Single agency office less than 75 computers
2. Single agency office more than 75 computers
3. Multiple locations (head office and other branches.

The shortcomings in information management systems impact the ability of First Nations child and family service agencies to collect data that would inform promising policy and practice solutions. As noted by the Nico Trocme (2003) collecting consistent data on children and families coming into contact with the child welfare system is critical to being able to understand what practices are effective in child welfare and which are not. In terms of First Nations child and family service agencies there is limited capacity to collect data on outcomes measures. Current data collection is often restricted to that required by INAC and child welfare regulatory agencies. INAC reporting requirements for FNCFSA vary depending on the funding methodology used but as the Auditor General of Canada (December, 2002) reports, information collected by INAC generally consists of a Child Care Notification Form which is submitted by the FNCFSA on the 10th day of every month in order to receive reimbursement of expenses. The form is completed when the child is removed from the home and requires the following information:

- Child information (name, date of birth, address and health insurance number)
- Date of removal and residence of the child at time of removal
- Legal status of the child pursuant to provincial statute
- Parental information including information on legal custody and Indian status
- Identity of the caregiver if someone other than the birth parent
- Identify of fiscally responsible entity (i.e: provincial child welfare, INAC, health, justice, etc.)

Consistent with the concluding remarks to Canada made by the United Nations Committee on the Rights of the Child (2003) disaggregated data would provide some guidance to First Nations child and family service agencies on children in care but the data INAC currently collects was not designed to inform policy and practice decisions on critical factors such as why the children are coming into care, services provided to children at risk while living in the family home, longitudinal experiences of children post removal. It is important to note that although INAC collects some child welfare

data for its financial reporting purposes, it is not consistently reported in public documents at a regional or national level. This limits the policy impact of even the limited amount of data that is currently collected. The further development of MIS capacity in First Nations child and family service agencies will augment their capacity to collect outcomes measures on children and families coming into contact with child welfare thereby informing evidence based policy and practice solutions.

Conclusions:

We recommend that each agency be assessed for capital MIS equipment and infrastructure needs in order to bring them to the minimum standard recommended by Stanley Loo in his report. Moreover, the new formula should include adequate funds for MIS staff training, system upgrades and maintenance.

In addition to these recommendations, Stanley Loo offers the following conclusions taken directly from the report completed for the First Nations Child and Family Caring Society:

1) How to determine how much an agency needs to acquire an information system is a critically important but exceedingly complex issue. Determining technology costs goes way beyond, for example, counting number of workers or cases served, or size of on-reserve child population. The kind of computer equipment needed, hence the cost, is mainly determined by:

- The type of information system an agency needs and the features desired.
- Adequacy of computer equipment in use, i.e., which existing computer hardware and software items need to be upgraded or replaced, and what additional equipment is needed.
- Geographical spread (number of locations) of the organization.
- Size of the organization.

The third and fourth conditions also influence the design of a technological infrastructure needed to support an agency's information system. These four factors are the key determinants of technology costs in the case of FNCFSAs.

2) The report also shows that the cost of an information system or database application itself is actually quite small, compared to the cost of the technological infrastructure required. However, it is extremely important that the right database application is used otherwise serious usability problems will surface sooner or later.

3) In making decisions concerning selecting an information system, identifying the types of computer hardware, software and related requirements, and estimating costs, it is always useful, and actually important, that agencies follow a consistent framework. Otherwise agencies could easily lose sight of the purpose of an information system and/or end up acquiring inappropriate technology. For this reason, the report includes a number of checklists or sets of criteria for, respectively:

- Helping an agency to determine the adequacy of its existing hardware and software, as per requirements of a typical agency-level information system,
- Helping an agency currently without its own information system to decide whether to develop its own system or to lease a commercial system.
- Showing an agency how to select a commercial information system.
- Helping an agency to identify the "typical" mix of computer hardware, software, peripherals, remote access options and associated considerations needed to build a technological infrastructure based on agency size and geographical spread. (Suggestions for technology refresh are also included.)

In addition, two other sets of information are included:

- Information system or database features deemed essential for meeting expectations regarding outcomes measures, program performance monitoring, electronic data exchange, ad hoc data or report requests, etc.

These are above and beyond day-to-day agency service delivery and management requirements.

- Prevailing cost (regular price as well as special discounted price for charitable organizations, where available) of each hardware, software, or service item. Most of the hardware and software prices are standard across Canada, although service charges may vary between regions and/or suppliers.

4) Given the high degree of complexity of the subject, it is important to treat this framework of information or checklists as educated guidelines, which may require adjustment when they are applied to individual agencies. Situational needs and other factors hitherto unknown or that may surface later, as well as constant technological advances necessitate periodic adjustment to this set of information to ensure currency and continual applicability. It is also suggested that agencies engage a technical consultant to help identify the specific technology they need to match agency characteristics, using the checklists as a reference guide. This person should be familiar with Microsoft server products, database development, computer hardware, and infrastructure design and implementation.

5. EXTRAORDINARY COSTS AND JURISDICTIONAL DISPUTES

Under the current formula, First Nations child and family service agencies are reimbursed for child welfare services provided to Status Indian children on reserve. Unlike the provinces, First Nations child and family service agencies operate on a budget that should theoretically zero out at the end of each fiscal year –there is no process in the Directive to deal with cost overruns or unexpected costs. As Dr. Cradock notes the problem is that the costs of child welfare are not predictable enough to respond to this rigid zero based funding structure in the formula. Provinces also typically receive an annual fixed budget, but they can also appeal to the provincial treasury board or a similar structure for additional funding should an unexpected event occur. First Nations child and family service agencies do not have this type of safeguard.

Additionally the overall under-funding of First Nations child and family service agencies mitigates their ability to respond effectively to what would be "normal" circumstances in provincial child welfare systems (e.g: changes in legislation or special protocol investigations (such as investigating child welfare staff) and thus the realm of what is considered an extraordinary expense expands.

Community infrastructure also impacts conceptions of what is, and what is not, extraordinary. The fact that First Nations have varying degrees of community infrastructure influences their ability to respond within and across community services to extraordinary events. This report reviews the nature of extraordinary circumstances whilst providing recommendations for response.

Study Design and Methodology

The information for this study was gathered from a review of literature, a review of policies from nine provinces (British Columbia, Alberta, Saskatchewan, Manitoba, Quebec, Nova Scotia, New Brunswick and Newfoundland) and survey data from 12 First Nations Child and Family Service Agencies.

Findings

The report begins by outlining two primary challenges when examining extraordinary circumstances:

1) the boundary between extraordinary costs and jurisdictional disputes is not always clear
2) The conceptualization of what is an ordinary or extraordinary event is significantly linked to the First Nations community context in which the event occurs. Thus it is critical to understand the community context in order to

judge whether or not something is extraordinary or not.

In terms of interface between extraordinary costs and jurisdictional disputes, aggregated survey results from First Nations child and family service agencies indicates that eleven of twelve agencies in the sample experienced jurisdictional disputes. Taken together they reported 393 jurisdictional disputes this past year. The frequency of these disputes varied widely with agencies reporting anywhere from 1 to as many as 165 disputes within a year. The amount of time and human resources taken to resolve these disputes was in itself extraordinary. Over the duration of one year, the resolution of each dispute took an average of 54.25 person hours with some disputes taking up to 200 hours of staff time to sort out. The human resource costs related to resolving jurisdictional disputes make them an extraordinary cost for agencies which is not covered in the formula.

Although it is fair to say that provincial child welfare agencies also experience jurisdictional disputes, FNCFSA face the additional burden of sorting out the federal/provincial jurisdictional disputes arising from Section 88 of the Indian Act or disputes between different federal government departments over the funding of services to Status Indian children that are not likely to occur at the same rate or in the same form for provincial governments. This is typified in the FNCFSA survey responses with six of the nine responding agencies reporting persistent disputes between the federal government Departments of Indian and Northern Affairs Canada (INAC) and Health Canada over funding for non-insurable medical costs. Problems with jurisdictional disputes between federal departments are more likely to occur for agencies responsible for remote communities. These types of disputes delay or withhold necessary non-insured health benefits. Children with complex developmental, mental health and physical health issues are particularly impacted by the resulting delays in service.

The second type of jurisdictional dispute, reported by four agencies, is between the federal government and provincial child welfare agencies. The principle disputes in this area revolve around figuring out which government (federal or provincial) is responsible to fund child welfare services which are required by provincial statute or policy but are not funded by INAC within current authorities. This type of dispute was reported by a third of agency respondents who indicated that these disputes consume a considerable amount of agency time.

Consistent with the findings of Irvine (2004), this report found that the unique context of First Nations communities directly influences the definition of what is and what is not an extraordinary circumstance. Given the variance in geography, community size, access to services and degree of community social development there are vast differences in conceptions of extraordinary amongst First Nations and between First Nations and the rest of Canada.

In comparison with other Canadians, the high levels of socio economic need, the experience of colonization and the comparative lack of service infrastructure means that many events that would be described as extraordinary in the overall Canadian context are ordinary in the First Nations experience. For example, best estimates indicate that one in ten Aboriginal children are removed by child welfare authorities whereas the rate for non Aboriginal children in one in four hundred; graduation rates for non Aboriginal children are three to four times higher than for First Nations children. This boundary between extraordinary and ordinary is complicated. The assignment of "ordinary" to circumstances experienced by First Nations children and families which would be extraordinary by other Canadians can serve to normalize the perception of the risk and moderate the type of urgent response one would expect from all levels of government.

Similarly, First Nations also have diversity in contexts, cultures, community development and history that impact on their definitions of what is extraordinary and their ability to respond thereto. For example, what may be described as ordinary in a remote First Nations community may constitute the extraordinary in an urban First Nation. For example, one remote community described how social workers had to pass by bears and travel

over partially thawed ice to get to a community in the spring time. Although dodging the bears is an everyday activity for a remote community it would likely be an extraordinary circumstance in an urban community. The reverse is also true, what may be considered ordinary in an urban First Nation may be extraordinary in an isolated community. For example for one urban First Nation in this sample reports that it has no less than four types of transportation lines cutting through their reserve lands creating hazards for children and adults alike.

A community capacity assessment is proposed as a means to gage community context and ability to respond to extraordinary circumstances and to help distinguish between ordinary and extraordinary local events

Incidents of extraordinary costs were reported by six agencies in the FNCFSA survey. Agencies reporting extraordinary costs reflect the concerns expressed with jurisdictional disputes in the sense that extraordinary costs are associated with isolated and high needs communities. Reported costs are primarily related to travel associated with providing services in extraordinary circumstances or due to costs linked with lack of specialized services and resources and costs.

Events that are unanticipated, unforeseen or outside normal risks are not reflected in the First Nations survey data on extraordinary costs although key informant interviews identified incidence such as a series of youth suicides as being an extraordinary event. The survey data suggests that what is considered extraordinary is a body of predictable and repetitive events for which agencies are currently unable to respond due to funding issues or established jurisdictions cannot or will not take responsibility.

Conclusions

Much of what is considered within the parameters of jurisdictional disputes and extraordinary costs are in fact neither. Instead, in approximately half the cases these disputes and costs are actually problems related with under funding. More specifically, lack of funding for the particular circumstances of certain agencies. Degree of community isolation appears to be a variable in both jurisdictional disputes and extraordinary costs and agencies serving isolated communities are particularly impacted. In addition to the following recommendations proposed by Dr. Cradock, the research team endorses the recommendation by Kathryn Irvine (2004) that funds be set aside to promote inter-agency cooperation in extraordinary circumstance reports such as investigations of staff members or incidents of multiple abuse.

The recommendations based on the findings of this study are:

1. Community Capacity Assessments:

Community capacity assessments are recommended as a means of distinguishing between ordinary and extraordinary local events and as a means of assessing the particular needs of communities serviced by agencies. These assessments would also include an inventory of existing resources and infrastructure that could be activated to respond to exceptional circumstances. This assessment would provide a baseline for the assessment of First Nations child and family service agency requests for extraordinary circumstance funding.

Prevention is, of course, the best strategy for avoiding jurisdictional disputes and community capacity assessments may be instrumental in this regard. It is strongly recommend that a change in the current federal funding to First Nations child welfare agencies must include a provision for community capacity assessments.

2. Committee Structure

From the perspective of jurisdictional disputes and extraordinary costs, a major recommendation is for improved relationships between Health Canada and INAC. Increased cooperation between these agencies would save considerable effort and expenditure agencies are currently taking on. The establishment of interagency committees with an independent discretionary budget for family and children's services may be instrumental in helping to resolve disputes and sustain the process of networking and cooperation

between staff and government departments.

3. Funding For Mediation

A funding mechanism to provide mediation services for jurisdictional disputes where applicable is suggested. This would provide a separate budget which agencies could utilize to engage a mediator in the resolution of jurisdictional disputes.

4. Increased Funds For Travel

Increased funding for travel is required particularly for agencies serving remote communities even for day to day operations let alone extraordinary circumstance response. The formula for operational funding must reflect actual demands placed on agencies by various provincial legislative requirements. As agencies do not have control over shifts in provincial legislation and policy, the operational formula will require regular scheduled reviews to monitor changes in provincial requirements.

5. Establishment Of A Central Extraordinary Circumstances Budget

Establishment of a central budget administered either by INAC or by a committee system to ensure adequate funding for agencies on an as-needed basis. Extra costs generated by special institutional care, is one example of where these funds would be directed. As well, the funding formula for maintenance should be adjusted to recognize the real incidents of complex special needs amongst on reserve children in care. The formula should take into account both residential costs and costs for the purchase of necessary professional support. The research team recommends that this amount be set at an initial, and minimum, value of 2 million dollars to be adjusted annually according to volume and price.

6. Consideration Of Legal Liability

Considerations must be made for the potential extraordinary costs related to liability exposure stemming from the discrepancy between agency's legal responsibility to protect children and level of resources to fill this legal mandate. This is of particular concern for agencies serving isolated communities where there is a gap between the agencies legal responsibility to protect children and the actual resources available to do the job.

7. Independent Advocate

A formal independent advocate representing First Nations children would ensure the voices of First Nations children are heard and that resources designated for the maintenance of these children are not diverted elsewhere such as to the resolution of jurisdictional disputes. The advocate must have an investigatory mandate and access to federal decision-making processes.

6. FIRST NATIONS CHILD AND FAMILY SERVICE AGENCY SURVEY RESULTS

A key research methodology used in this report was to conduct a detailed survey of 12 First Nations child and family service agencies. These agencies were selected on the basis of the following criteria:

1) Balance of urban, rural and remote locations
2) Francophone and Anglophone agencies in Quebec
3) Balance of small, medium and large agency sizes
4) Fully delegated and partially delegated agencies in British Columbia
5) Two agencies in each of six regions (BC, Alberta, Saskatchewan, Manitoba, Quebec, Atlantic (New Brunswick and Nova Scotia)

All agencies were compared against these criteria and a sample of 12 agencies was selected and presented to the National Policy Review Funding Design Team who finalized the selections. Taken together the agencies broadly reflect the diversity of First Nations child and family service agencies.

The surveys were completed by the First Nations child and family service agencies with the assistance of a researcher in each region. All regional researchers received training on the use of the standardized survey instrument and were also supported by a researchers guide to ensure standardization of process and ability to compare results across surveys. Confidentiality of survey responses is ensured through the presentation of findings in aggregate form only.

Findings

To follow is a summary of the aggregate agency survey responses by major research category. Please be advised that in some cases agency surveys were considered along side the findings of a separate research project to inform the conclusions and recommendations regarding the funding formula options.

Please also be advised that the number of responses for some questions is more or less than the sample size of 12 agencies. For example, some agencies may have multiple offices so in questions relating to office space there may be more than 12 responses or if the question relates to remoteness not all agencies will be in remote locations so the number of responses will be reduced.

In reviewing the findings and consulting with the regional researchers it was clear that many agencies had difficulty estimating the costs of services that they would like to provide but do not currently provide. This is not surprising given that accurate program costing would entail knowing the design of the program, the setting in which it is being implemented and then costing out the budget associated with this program.

A. General Background Question

The vast majority of agencies in the sample were fully delegated (91.7%) and were therefore delivering the full range of child welfare services. Only one agency was operating under the partially delegated model providing guardianship, voluntary care agreements and family support services.

First Nations agencies report a misalignment between what the Directive funds and what the needs of the community are. The developmental approach contained in the Directive for the development of new agencies requires a community needs assessment but does not in any way link funding to it. First Nations agencies in the sample were asked if they had ever conducted a needs assessment of the community in relation to child welfare services. Three quarters of the agencies had completed such an assessment suggesting that if a more needs based approach was undertaken many FNCFSA have at least a baseline for knowing what the community needs are.

Records management requirements and mechanisms have evolved significantly over the fifteen years the Directive has been in place. This is in tune with an increased public and legal sensibility related to confidentiality and client access to records. 91.7% of the agencies stated that they have a records management policy for child-in-care files which were guided by laws or

Table 3: Cultural Placement Match For Children In Care Of First Nations Child And Family Service Agencies

Placement Type	Number of Responses for Placement Type	Number of Children in Placement Type	Number of Responses for Cultural Match	Cultural Match (%)
Kinship Care / Family Placement 'restricted'	8	257	8	99.75%
Non-relative foster home	7	127	7	63%
Respite care home	10	0	10	100%
Group home	5	48	2 (10 children)	20%
Institution	7	49	7	17.85%

regulations covering the storage of child-in-care records in their agency. There is currently no specific funding in the formula to account for statutory or regulatory requirements regarding records management.

B. Children in Care

When asked if the amount of funding provided under the funding formula is adequate to meet the need of children in care, only 33.3% of the agencies said yes. Of the 33.3% of the agencies which responded yes, 8.7% indicated that the formula is adequate to meet the needs of the children in care, so long as that funding that is provided in a block funding arrangement – the other 25% of the agencies did not indicate why they felt funding was sufficient. An overwhelming 66.7% of the agencies indicated that there was inadequate funding in the formula for children in care particularly in relation to prevention services and in home supports.

Many First Nations child and family service agencies have indicated that one of their primary objectives was to place First Nations children in care in culturally matched placements. As Table 3 indicates, First Nations child and family service agencies have to their great credit, largely achieved that goal. Please note that the number of responses to individual questions varied thus we have indicated the number of responses for each placement type identified in Table 3.

The provinces do not uniformly collect information on cultural match so comparative statistics are difficult to access. The British Columbia Children's Commissioner found in 1998 that only 2.5% of Aboriginal children in the care of that province were placed in culturally matched homes despite a statutory obligation to give preference to Aboriginal homes (British Columbia Children's Commission, 1998).

When asked what, if any, impact increased investment in prevention and least disruptive measures services would have on children in care numbers over time, most agencies felt that over time the numbers of children in care would decrease. Estimates of the reduction of children in care over ten years averaged at about 50% but some agencies noted that there might be shifts in categories of care with fewer children entering care by court order and more by agreement as parents increasingly access support services.

The agencies were unanimous in their belief that increased investments in prevention and least disruptive measures services would benefit children in continuing custody (in care under court order until the child reaches the age of majority.) A response by one agency was echoed in the responses of the others:

"Children in care would emotionally/ psychologically improve because their family or

caregivers would be functioning better – their placements in foster care would be more stable. Since many children are placed in their communities with extended family members, these children would have more access to their natural family through increased visits. In some cases, permanent orders of guardianship could be rescinded after a successful trial reunification and these children could be discharged from care and returned to their natural families"

Other expected benefits include:

- Support the child in reestablishing family and community relationships
- Programs to support the cultural identity of the child
- Assistance with preparing the child for independence by creating a holistic continuum of support around the child.
- It may be possible to return some children to their parents with support.
- Quality of life supports such as personal and family counseling

Key informants advise that the degree to which INAC allows for reimbursement of prevention services related to children in care varies widely between regions. Prevention and least disruptive measures clearly have benefits for both children at risk living at home, children in temporary forms of care and children in permanent care. INAC Treasury Board authorities should be reviewed to ensure that an adequate and equitable full range of prevention and least disruptive measures are available across the country.

C. Board Costs (Incorporated Boards and Advisory Boards / Committees)

Incorporated Non Profit Agencies

Among the 12 agencies surveyed a large proportion (75%) are registered non profit organizations with a board of directors. Of these nine agencies, 58.3% of the non profit agencies indicated that they have a special honourarium or travel cost policies for Elders who are members of the board of directors. Board members were paid honourariums for service in addition to reimbursement for travel costs for service in 66.7% of the cases.

In addition to operating a board of directors, 56% of the 9 non profit agencies had community advisory board/ committee (s). When asked if advisory board members receive an honourarium for sitting on the advisory boards, 20% of the agencies said yes, yet 40% said no and 40% did not provide an answer. The survey also asked if the advisory board members receive reimbursement for travel expenses related to their duties as advisory board members, and though 20% of the agencies responded yes, 60% answered no and 20% of the agencies did not respond. Special honourarium and travel policies were in place for Elders in 20% of these agencies - another 40% did not have this policy and the remaining 40% did not provide an answer.

When the survey inquired if the amount of funding provided under the funding formula is adequate to meet the needs of non profit board governance 44% indicated that funds were not sufficient and 56% did not provide an answer.

Agencies Operating under other Governance Models

For those agencies operating under a different governance model (i.e: reporting directly to Chiefs and Council or to the Tribal Council), the survey asked about the existence and costs associated with advisory committees. Amongst the 25% of agencies that used a governance model other than an incorporated non profit, 66.7% indicated they had community advisory committees, whereas 33.3% indicated they did not. Further, when the not registered non profit agencies were asked if their advisory board members receive reimbursement for travel expenses related to their duties as advisory board members, 33.3% replied yes, 33.3% replied no, while 33.3% did not provide a response. Also, 33.3% of the agencies indicated that they have special honourarium or travel cost policies for Elders who are members of the advisory board, however, 33.3% said no, while 33.3% did not provide an answer.

When asked if the amount of funding provided under the funding formula is adequate to support their governance needs, 66.7% of the agencies replied no, while 33.3% did not respond – none of the agencies replied yes.

D. Legal, Capital Costs and Insurance Costs

First Nations child and family service agencies incur a number of capital costs ranging from office space, staff housing, vehicles, and equipment costs. Legal costs for an agency range from corporate legal costs (maintaining incorporations, human resources, liability insurance) to child in care legal costs. Insurance for a FNCFSA should include policies typical of corporate insurance (fire, theft, "household" liability) but should also include liability insurance related to child welfare itself. Agencies were asked about all three of these issues in the survey.

In terms of capital costs, the NPR indicated that there was no money in the formula that was specifically targeted for capital costs. Although there were funds included for office rent, costs associated with renovations, staff housing, capital investments in technology were not included. The FNCFSA survey results below indicate that although agencies have tried to make do with the current allotment there are deficits in accessibility and adequacy of both office space and staff housing costs (for remote communities).

In terms of staff housing, 25% indicated that their agency provided housing for staff, while 66.7% of agencies revealed that their agency did not and 8.3% of agencies did not respond. Remote communities were more likely to provide staff housing than agencies in rural or urban areas. Among the 25% of agencies who provide staff housing, 33.3% indicated that their agency charges for staff housing that the agency provides, while 66.7% of the agencies indicated that they do not. Accessibility of staff housing for disabled persons was a concern as 67% of agency housing is not accessible.

The survey also asked agencies if the amount of funding provided under the funding formula is adequate to meet the housing needs of staff. 75% answered no and 16.7% did not supply a response and 8.3% stated that this question was not applicable. Of the 75% who answered no, 16.7% revealed that between $900,000.00 and $1,650,00.00 is needed to either repair existing staff housing or to build new housing for staff.

Accessibility of agency office space was also a problem. The National Building Code of Canada contains the following two articles specific to building accessibility for disabled persons

A1 - Barrier-Free Path of Travel

An objective of this Code is to limit the probability that, as a result of the design or construction of the building, a person with a physical or sensory limitation will be unacceptably impeded from accessing the building or circulating within it.

A2 - Barrier-Free Facilities

An objective of this Code is to limit the probability that, as a result of the design or construction of the building, a person with a physical or sensory limitation will be unacceptably impeded from using the building's facilities."[3]

Despite the requirements of the National Building Code of Canada, one third of the agencies indicated that their buildings were not accessible to persons with disabilities (31.2%). It is important to note that if the building is not accessible for persons with disabilities it is likely that the building is also inaccessible to persons with child strollers thus limiting access to the very children the agencies are attempting to service. Amongst those who responded that their buildings were not accessible to the disabled, lack of funding to do the needed renovations was identified as the key reason why the buildings were inaccessible. To our knowledge, First Nations child and family service agencies have not been given specific and targeted funds to ensure their space is accessible for persons with disabilities.

When asked if agencies felt their office space provided a safe and child and youth friendly environment, 71.4% of agencies answered yes and 28.6% answered no. One agency is operating in a building that is beyond repair. Overall, the overwhelming majority of agencies (91.7%) felt that they did not have adequate funding in the current formula to meet their office space requirements.

It was clear from these respondents that First Nations were providing significant support to the agencies in terms of providing or supplementing office space costs. Specifically, 25% of agencies indicated they received their office space free of charge whereas 8.3% responded that a partial subsidy was provided.

It is recognized that proper maintenance of workplace vehicles is critical for reducing employee injury and in the case of social workers transporting clients, injury to community members as well. Despite the need for proper workplace vehicle maintenance, FNCFSA indicate that capital travel costs are a critical need. The agencies that provided company vehicles were asked to indicate if they have sufficient funds within the current travel amount provided in the funding formula to ensure their company vehicles are properly maintained and safe for road conditions, only 8.3% of the agencies said yes, while 41.7% said no, 25% specified that this question was not applicable and 25% did not respond.

When it came to staff using their own vehicles for business purposes, 66.7% of agencies agreed that the transportation allowance in the current funding formula intended to cover staff costs for the use of personal vehicles was inadequate. Although agencies were not specifically asked what mileage rates they provide to staff, comparable benchmarks are the rates set by the American Automobile Association and the Treasury Board of Canada. The American Automobile Association estimates that it costs 56.2 cents per mile US to operate a new vehicle in 2005 (Internet Auto Guide, 2005). Treasury Board of Canada mileage reimbursement rates vary from a low of 41 cents per km in Saskatchewan to a high of 52.0 cents per km for the Yukon, the mean rate is 45.8 cents per km (Treasury Board of Canada, 2005.) The under funding of workplace vehicle travel is a critical issue given that workplace safety regulations frequently require employers to ensure proper vehicle maintenance with an increasing number of provinces passing laws to ensure the safe transportation of children (e.g.: baby/toddler car seat requirements). The failure to provide adequate funding not only has implications for workplace safety it also introduces the possibility of children in care and their families being in harms way when transported in vehicles which are not road worthy.

Finally, when the agencies were asked if they felt they had adequate funds for other types of capital expenses (i.e. computers, photocopies, office furniture, office equipment), 75% of the agencies that answered no and 25% responded affirmatively. The need was particularly critical for information technology related capital expenses with some agencies reporting there was no funding to support purchase and upgrades for information technology equipment.

Overall, agencies in the sample report significant difficulty funding capital expenditures within the current formula. Moreover, a review of workplace safety regulations and federal building code standards indicate that the under funding of capital expenses may place agencies in a position where they are out of step with workplace safety and accessibility legislation/standards.

E. Management Information Systems

Consistent with Stanley Loo's report, the Auditor General of Canada (December, 2002) has called for significant investments in management information technology for First Nations to assist them in adhering to federal reporting requirements whilst introducing efficiencies in how reports are produced. The current funding formula was developed in 1989, prior to there being any significant use of information systems amongst First Nations child and family service agencies hence information technology costs (capital, maintenance or training) were not included in the original formula. Reports from agencies indicate that they have drawn from the

already stretched operations funding to pay for information technology needs. **Survey results indicate that 66.7% of agencies have some form of management information system whereas 33.3% indicated that they did not. This means that a full one third of agencies surveyed had no computer information management systems.**

When asked if the current funding formula adequately covers costs for MIS, 58.3% said no, 16.7% said yes, and 25% of the agencies did not respond to this question. The agencies who answered no indicated that additional funding was absolutely necessary for services such as, technical support, IT personnel, hardware upgrades, links between an agency's main office and its satellites offices and the creation of an information system for case management. The cost of these services was estimated to be between $60,000.00 and $600,000.00 per agency.

F. Programs and Services

This section of the questionnaire described the child population served by First Nations child and family service agencies. In addition, questions were asked regarding the range of services each agency provided and what services each agency would like to provide in optimal circumstances.

In terms of who is receiving services from the agencies, in addition to serving Status Indian children on reserve, survey results indicate that (83.4%) of agencies provide services to non status First Nations children on reserve. 8.3% of the agencies offer partial services and the remainder provide no service. Agency responses indicate that reimbursement from the provinces is not adequate in one third of cases (33.3%) whereas 53.3% did receive adequate funding and the remainder indicated the question was not applicable to their agency.

Furthermore, 58.4% of the agencies indicated that they provide services to non Aboriginal children resident on reserve, while 33.3% of the agencies revealed that they do not offer these services and 8.3% of agencies did not respond to this question. Agencies reported that under-funding for services provided to these children by the provinces was even a more serious concern than with non Status First Nations children with only 33.3% reporting adequate funding, 8.3% of the agencies did not respond to this question and a majority (58.4%) indicating inadequate funding by the province to provide these services.

G. Remoteness Factor

First Nations child and family service agencies operate throughout the country including in remote areas. This section of the questionnaire focused on exploring the adequacy of the current funding formula in covering the costs of providing child and family services in remote First Nations. Issues such as remoteness related salary; capital and operational costs were explored.

At the beginning of the survey 33.3% of agencies stated that their agency services remote communities. Of the 33.3% of agencies that service remote agencies, 25% indicated that they offer a salary incentive for staff working in remote locations, while 75% revealed that they do not provide salary incentive. Further, when these agencies were asked if they covered any exceptional moving costs associated with new staff being posted in a remote location, 50% responded yes and 50% responded no.

Agencies were asked to estimate the costs associated for remoteness in five areas, the number of respondents (N) varies with each question and thus it is indicated in each situation.

1) Estimated annual shipping costs for goods and services related to remoteness. N=3 Average cost: 155,233.33
2) Estimated annual cost for buildings and utilities related to remoteness. N=2 Average cost: 13,570.
3) Estimated annual travel costs to government services. N=3 Average cost: 66,666.66
4) Estimated additional staff travel costs per year related to remoteness that are not covered by the maintenance budget. N=3 Average cost 36,666.66

Table 4: Minimal Educational Requirement By Staff Position In FNCFSA

Occupation	Minimum Reported	Maximum Reported	Most Frequent Requirement
Executive Director	College Diploma	Master Degree	Bachelor/Master Degree (78%)
Clinical Supervisor	Technical Training (non diploma)	Master Degree	Bachelor of Social Work (72.7%)
Direct Protection Workers	High School	Bachelor of Social Work	Bachelor of Social Work (BSW) (54.5%)
Prevention Workers	High School	Bachelor of Social Work	High School (18.2%) and BSW (18.2%)
Permanency Planning Workers	High School	Bachelor of Social Work	College Diploma (18.2%), University Degree (non BSW) 18.2% and BSW (18.2%)
Foster Home Workers	High School	Bachelor of Social Work	BSW (45.5%)

* These 2 agencies receive delegation training that is partially subsidized by the province.

5) Estimated annual cost of transporting children in care related to remoteness not covered by the maintenance budget. N=2 Average cost 33,500.00

Finally, of the 33.3% of agencies which stated that they serve remote communities, 75% answered no when asked if the current remoteness factor in the funding formula is adequate to offset any additional costs to the agency, while 25% did not provide an answer.

H. Staff Salary and Benefit Levels

Throughout the National Policy Review process, First Nations child and family service agency representatives have consistently raised concerns regarding the adequacy of funding in the Directive for staff salaries and benefits. This section of the survey explored adherence to human resources standards/laws, comparability of salaries and benefits to the province and the overall adequacy of funding in the Directive to support human resources costs.

The survey asked questions about the minimal education qualifications of staff in various positions. Table 4 contains a brief summary of the results in key occupations.

Agencies were then asked how many of their staff actually have the minimal educational qualifications in various positions. Table 5 on the next page is a brief summary of results in key occupations, please note ten agencies responded to this question:

Agencies noted that social workers require additional non academic training to work effectively in their communities. Survey responses indicate that the types of training are diverse (there were 38 different types of training identified by the 10 agencies who completed this section.) Table 6 lists the most frequent types of training and the associated cost per worker.

The survey asked agencies if the FNCFSA had a human resource manual that includes salary levels and benefits, 75% of the agencies reported having a human resource manual, whereas 25% of agencies do not. The survey went on to ask if agencies were confident that their human resources policies and procedures met applicable labor laws and regulations. One half of agencies said that their human resource manuals were in compliance whereas, 25% said no, 16.7% responded 'partially'

Table 5: Percentage Of Staff Meeting Minimal Educational Requirements Of FNCFSA

Occupation	Percentage of Staff Meeting Qualifications	Percentage of Staff not Meeting Qualifications
Executive Director	77.8%	22.2%
Clinical Supervisor	100%	Nil
Direct Protection Workers	77.8%	22.2%
Prevention Workers	66.7%	33.3%
Permanency Planning Workers	88.9%	11.1%
Foster Home Workers	77.8%	22.2%

Table 6: Training Costs by Staffing Position

Training Program	Number of Agencies Reporting Need for this Training	Cost per Worker
Delegation Training	5	$1500-2000* (2 agencies) $1500-9000 (3 agencies)
Cultural Education	4	$100-500 (2 agencies) $1000 (1 agency) Unknown (1 agency)
Sexual Abuse Training	3	$100-300 (1 agency) $1000 (1 agency) $1500 (1 agency)
Computer Training	2	$1000 (1 agency) $24,000 (1 agency)
Child Abuse Investigations	2	$2500 (1 agency) $10,000 (1 agency)
Family Conferencing	2	$100-300 (1 agency) $420 (1 agency)
Suicide Intervention	2	$1000 (1 agency) $1,200 (1 agency)

and 8.3% indicated that this question was not applicable.

Feedback from key informants during the survey development process indicated that overtime compensation for staff working after hours on child protection matters was a critical area of concern, thus a question specific to over time compensation was included in the survey. When agencies were asked if their overtime compensation policies complied with applicable labor regulations, 50% of the agencies answered yes, 41.7% answered no and 8.3% stated that this question was not applicable. Overtime compensation rates varied widely from a flat rate of $50.00 per call to a flat rate per week on call plus time and a half for hours worked. After hours provisions would apply to social workers as well as staff providing clinical supervision. Survey responses indicate that the clinical supervisor is often on call (75%) to provide advice to social workers and in their absence executive directors, contracted supervisors and senior social workers fulfill this role.

In terms of the degree to which the agency can assure social worker safety after hours, 2 agencies said they cannot currently ensure staff safety; the majority relied on local police or the RCMP. Other approaches included employing a buddy system to make sure no worker went out alone, to using community contacts, providing cell phones and workplace safety training. Social workers have to

intervene in some of the most difficult of family circumstances, including situations where adults and youth are impaired – provision of funding within the human resources envelope to ensure their safety is critical.

Predictably there was some variation in caseload size and case composition according to the structure of the agency. In some agencies social workers perform all duties whereas others have adopted a more specialized approach with targeted investigation, family support and permanency planning and intake workers. Specialized workers in agencies are often taking up some of the workload for other specializations (e.g. intake workers also managing child in care files.) Given the range of responses and the fact that several agencies could not respond to this question due to the holistic approach to their work it is not possible to adequately gauge the caseloads across all functions. From the 7 agencies who did respond to the question the data suggests the following:

- Intake workers carry an average of 2 family service files, 2 children in care and 20 investigations
- Family service workers on average carried no family service files, 17 children in care and 10 investigations
- Permanency planning workers on average carried no family service files, 22 children in care and 25 investigations
- Foster home workers carried one investigation, 5 children in care, 20 foster homes and 2 adoption homes.

Caution should be used in basing a formula solely on caseload alone as it is typical for First Nations child and family service agencies social workers to assume duties which would typically be dealt with by specialized divisions within provincial governments. For example, the Directive does not currently fund policy positions for First Nations child and family service agencies so social workers often take that up as a function above and beyond their child welfare duties whereas provincial child welfare workers can rely on policy divisions to do this work. Moreover, the workload involved with managing a case varies according to severity and as the CIS-03 findings noted, First Nations children and families require more service and thus more staff resources.

There is an increasing trend in child protection in Canada toward certification of professional staff and thus a question specific to this issue was included in the survey. One half of agency respondents (50%) indicated that there is a professional certification/registration (i.e. registration with association of social workers) requirement for agency staff, whereas 41.7% said no and 8.3% noted that this question was not applicable. When asked if agencies pay for professional certification and registration the staff require, 50% said yes, 25% said no, 8.3% said 'partially', while 16.7% indicated that this question was not applicable.

In terms of salary and benefits comparability, two thirds (66.7%) of agencies felt their salary and benefits rates were not competitive whereas 25% felt they were and 8.3% stated that this question was not applicable. In terms of staff turnover related to salary and benefits levels, 16.7% of the agencies revealed that in the past three years, they have had staff leave to join another child welfare organization where the primary reason for their transfer was to get better benefits and salaries yet 83.3% indicated that this had not occurred. Turnover rates are generally low between 1-10% over three years and the primary reasons staff leave the agency are work related stress (related to doing the job but not to workplace safety and morale) (63.6%) and personal and family stress (36.4%) followed by moving to get better salary and benefits (27%.)

Overall, the vast majority of agencies (83.3%) felt that the current formula did not provide adequate funds for human resources costs. This is obviously an area for more focused review in the development of the new formula and will need to be considered in regards to annual costs of living adjustment considerations within the new formula as well.

I. Standards and Cultural Appropriateness

One of the key reasons for developing First Nations child and family service agencies was so

that First Nations children and families could receive culturally based child and family services. The development of culturally based standards and policies for agency operations is a key element in the delivery of culturally based services yet there is no funding in the current formula to support policy development. This section of the questionnaire asked agencies about their ability to develop culturally based services and programs.

The agencies involved in the survey were asked if the funds provided in the formula were adequate to ensure culturally appropriate services. An alarming 83.4% responded no with a further 8.3% responding yes and the remainder indicated that this question was not applicable.

Amongst those agencies who have developed their own standards, 33.3% of the agencies were required to get approval from the province; 25% required partial approval and 25% said no – the remaining 16.7% of agencies did not respond.

Consistent with recommendation number one of the NPR indicating that the future funding formula should be responsive to tribal legislation and governance, survey responses indicate that 41.7% of the agencies were developing their own child welfare laws while 50% replied no, and 8.3% maintained that this question was not applicable.

In terms of community development planning, 58.3% of agencies indicated that the First Nation communities they serve have developed a community development plan that integrates responses to child maltreatment, whereas 25% answered no and 16.7% indicated that this question was not applicable.

Survey responses indicate a clear and critical need for upgrading funding to support culturally based standards and practice in First Nations child and family service agencies. Moreover, the fact that 41.7% of agencies in the sample are in the process of developing their own child welfare laws indicates a need to seriously consider implementing recommendation one of the NPR to expand the range of fundable child welfare authority beyond provincial delegation.

J. Jurisdictional Issues

First Nations child and family service agencies have long reported that jurisdictional disputes between government departments and levels of government (provincial/federal) have resulted in children unnecessarily being denied services or experiencing delays in service. Moreover, agencies indicated that resolving these disputes was taking an inordinate amount of staff time. This section of the survey explored the nature of these disputes, the incidence of the disputes and the time required by agency staff to resolve the disputes.

Survey responses from the 12 agencies indicated that they experienced a staggering **393 jurisdictional disputes this past year** requiring an average of **54.25 person hours to resolve each incident** or 21,320 person hours each year. If this is typical then agencies across the country are dedicating over 200,000 person hours per year resolving these disputes – and this does not include the time of government officials. **If one assumes an average salary of 45K per annum – then jurisdictional disputes cost agencies, and by extension INAC close to five million dollars per year**. The most frequent types of disputes were between federal government departments (36%), between two provincial departments (27%) and between federal and provincial governments (14%). Examples of the most problematic disputes were with regard to children with complex medical and educational needs, reimbursement of maintenance, and the lack of recognition of First Nations jurisdiction. There were variations in the responses with some regions reporting a higher number of incidents than others which may reflect the uneven development of dispute resolution mechanisms. Although tripartite tables have been established in some regions with INAC, the province and First Nations child and family service agencies, the efficacy and authority of these tables to resolve jurisdictional disputes is unclear and inconsistent. Moreover, as some jurisdictional disputes involve federal, provincial or tribal authorities outside of these core participants, it is critical that mechanisms for engaging these groups are integrated into a dispute resolution process. Additionally, dispute resolution mechanisms must be reflective of cultural values and processes of the

participating First Nation child and family service agency.

K. Negotiation of Agreements with the Provinces and Federal Government

Directive 20-1 requires agencies to operate pursuant to provincial legislation and thus agreements must be negotiated between the First Nations child and family service agency and the province to enable the agency social workers to carry out duties pursuant to the child welfare statute. In addition to delegation agreements, agencies must also negotiate funding arrangements with the federal government in order to receive funding for on reserve services. This section describes how these negotiations impact on FNCFSA.

Directive 20-1 allows for the negotiation of tripartite agreements (the province, INAC and the First Nation, Tribal Council or non profit FNCFSA) or complementary bilateral negotiations (agency negotiates one agreement with the province and another with INAC.) Survey results suggested that seven agencies in this sample were using multi-year tripartite agreements. Three others operated under a community and provincial delegation model and one other had delegated authority pursuant to a specific piece of legislation. The most typical period for renewals of these arrangements was within the 1-5 year time frame.

There was wide variation in the amount of legal costs agencies reported as being linked to negotiation of delegation agreements. Three agencies noting that no legal expenses were incurred, three others did not answer the question, 4 estimated their costs to be between $20,000 and $40,000 and one agency reported spending in excess of $300,000 on delegation arrangements. This is likely a reflection of the wide variety of delegation processes throughout the country with some provinces having more detailed and prolonged processes for delegation.

In terms of the provinces, the survey asked agencies if the province provides any financial assistance to the agency for the purposes of reaching a delegation agreement, or renewing a delegation agreement. 91.7% of agencies received no funding from the province to negotiate these agreements with 8.3% indicating that this was not applicable.

Agencies had a variety of suggestions on how to make the delegation negotiation and funding agreement negotiation processes more efficient. To follow is a sample of the recommendations:

1) Greater time to discuss and negotiate (two respondents indicated having received the agreement with only days to review it and sign or have their funding allotment delayed.)
2) Ensure consistency of people at the table
3) Governments should fund the negotiations
4) Government should not dictate criteria to the community
5) Governments should honour their responsibilities
6) Bilateral agreements are needed.

Once negotiated, agencies indicated a wide variation in the amount of staff time needed to maintain the delegation agreements. Six respondents indicated that it took 1-10 days; and there was one agency for each of the following levels 11-20 days; 81-90 days and 141-150 days. For agencies where delegation arrangements take a significant amount of time, the fact that they receive no reimbursement from the provinces to maintain these agreements results in a significant tax on limited resources

Agencies were also asked if their staff provided consultation services to the province and whether or not these were reimbursed by the province. 8 agencies in the sample indicated that they do provide consultation services to the province. Of these 8 agencies, 6 estimated the number of staff days per year to be up to 50 days per annum with the other two estimating 201-250 days per year. In none of the cases did the province provide a fee for service to compensate the agency for its personnel costs or expertise and only 4 respondents indicated that they received compensation for travel costs associated with the consultation.

The survey inquired about agency agreements and consultation services with INAC.

The most frequent period for renewal of funding arrangements with INAC was one year (6 agencies) with two others reporting renewal periods of 1-5 years, another was on a flexible funding arrangement and one respondent indicated the question was not applicable.

Similar to results with the provinces, agencies report wide variation on the amount of staff time taken to negotiate and maintain these agreements from minimal (3 agencies), 1-5 days (4 agencies), 20 days (2 agencies), 30 days (1) agency and 165-200 days (1 agency.) Moreover, some agencies who reported minimal negotiation times indicated that this was due to a "take it or leave it" approach used by INAC – in that the funding agreements were not in practice negotiable. Legal costs associated with the negotiation of funding agreements with INAC varied with 3 agencies reporting no costs, 2 indicating costs ranged between $1-$1000;1 respondent indicated costs of $30,000 and one agency at $100,000; two other agencies noted this was not applicable.

Survey responses indicate that the federal government, like their provincial counterparts, benefit from consultation services provided by agencies. Of the agencies in the sample, four agencies had provided consultation to INAC. In terms of staff time, two agencies indicated that 5-15 days per year were dedicated to INAC consultation services; one agency reported 16-25 days and the other did not specify. Like the provinces, INAC does not provide any compensation for human resource time provided and provided travel costs in 50% of the circumstances.

L. Other Sources of Agency Financial Support

Mainstream child welfare organizations draw upon services and funding provided by the voluntary sector and other government bodies. This section of the survey is intended to identify the degree to which FNCFSA receive financial support or gifts in kind from First Nations or other sources (i.e.: voluntary sector funders).

The agencies were asked to indicate if their agency receives any services from the band council or tribal council as gifts in kind (e.g.: bookkeeping services, funding for prevention services). 16.7% of the agencies responded yes, 75% of the agencies responded no, while 8.3% stated that this question was not applicable. Of those responding yes, one agency received 25,000 for agency staff and another 100,000 for legal costs from their band or tribal council.

41.7% of agencies indicated that they received funding from sources other than INAC, the First Nation or Tribal Council, yet 50% of the agencies responded no and 8.3% indicated that this question was not applicable. Two agencies had received funds from the Aboriginal Healing Foundation, another from a community foundation, one from the province, one from a federal government department (not INAC) and one unspecified source. Funding allotments ranged from $50 to $250,000.

The limited number of agencies accessing external funding sources may be due to the fact that one third of those surveyed (33.3%) indicated that there were barriers to their applying for provincial or voluntary sector grants while 25% indicated that this question was not applicable. Specifically, 33.3% of agencies in the sample indicated that the key barrier to accessing outside funding was the stacking provision contained in INAC funding arrangements.

As noted in a study conducted by FNCFCS in 2003, voluntary sector supports for children and families are virtually non-existent on reserves and thus agencies must do more than what would be required of a mainstream agency which can refer families to local voluntary sector supports (Nadjiwan and Blackstock, 2003.)

Conclusions

Overall, First Nations child and family service agencies report that current funding levels are inadequate in the following areas: prevention services (including least disruptive measures),

human resources, capital costs, standards/ evaluation, culturally appropriate services, records management and information technology. Human resources funding was identified as a critical need to support current operations and the anticipated expansion of prevention services in the new formula. Two thirds of agencies in the sample feel there are inadequate funds to pay staff equitable salary and benefits packages.

Jurisdictional disputes are a key problem and need to be resolved in order to ensure that Status Indian children on reserve do not face discriminatory allocation of services. In addition, there is likely to be substantial savings in human resources costs should a meaningful dispute resolution mechanism be put in place instead of the current case by case approach that too often places the needs of the child second while governments scramble to see who will pay for the service. Adoption of Jordan's principle where the needs of the child come first in the resolution of all jurisdictional disputes is very strongly recommended.

There is a trend toward FNCFSA developing their own legislation to ensure culturally based services. This suggests that the new generation funding formula should allow for both tribal based and provincially delegated child welfare legislation. In the meantime, delegation and funding agreement negotiations need to be standardized to create efficiencies in negotiations whilst still allowing for adaptation to reflect community specific needs. First Nations child and family service agencies indicated that there should be a move away from the "take it or leave it" negotiation approach by some provinces and in some situations, by INAC.

FNCFSA provide significant gifts in kind to both the provincial and federal governments in terms of consultation services. Although both governments appear to value this input neither is prepared to pay for it – meaning that this service is an additional drain on agencies.

Although some agencies were receiving additional funding from other sources, there is clearly a need to clarify the application of the stacking provision in INAC funding agreements with agencies in order to ensure that they can benefit from voluntary sector funding sources and other types of government funding to enhance the range of services provided outside of INAC funding.

8. PROVINCIAL CHILD and FAMILY SURVEY RESULTS

Regional researchers contacted the following provinces to request that they complete a comprehensive survey designed to identify the range of child welfare services provided, number of First Nations children and families serviced, nature of the funding formula in use in each region, including adjustments for remoteness, capital costs and extraordinary costs:

- British Columbia
- Alberta
- Saskatchewan
- Manitoba
- Quebec
- Nova Scotia
- New Brunswick

Two provinces completed the full survey, with an additional three provinces partially completing the survey. The remaining provinces either chose not to participate or were only able/ willing to provide a very limited amount of information. The low response rate coupled with the inconsistency in questions answered between provinces makes it very difficult to determine with any reliability the range of services typically offered by the provinces or the costing formulas to support such works. However, information provided by the provinces on the numbers of children in care and their funding methodologies is very valuable. Consistent with our approach with the First Nations child and family service agencies, provincial information is presented in aggregate form only to respect the confidentiality of each informant.

Findings

The range of services provided by respondents was linked to provincial statute and legislation in

each area – no province as able to provide specific descriptions of the range of services or the costs of said services. One province noted that the budget is allocated provincially to regions which then have some discretion on how to allocate the budget based on community needs.

Consistent with the findings in the Canadian Incidence Study on Reported Child Abuse and Neglect, the provinces that completed the survey reported disproportionate numbers of Aboriginal children in care. Unfortunately there was wide variation in the degree to which provinces recorded information regarding Aboriginal children and their families. Some regions could only approximate a percentage; others could report numbers of children in care of the province and not of First Nations agencies. However, there were three provinces that maintained excellent data records on Aboriginal children and disaggregated that data by First Nations status. To follow is a summary of the numbers of children in care as reported by these three jurisdictions:

As Table 7 demonstrates, Aboriginal children are over-represented amongst children in care from a low of 350% in Province C to highs of approximately 600% in Provinces A and B.

As indicated in Table 8, overall, the data from these three sample provinces indicates that First Nations children are vastly over-represented amongst both children in care and Aboriginal children in care. Table 7 also provides some indication as to what this over-representation looks like as compared to non Aboriginal children in Canada. Table 8 shows the differences in child in care numbers for First Nations, Metis and Inuit children whilst indicating the percentage of the population that these three groups represent. Pay particular attention to the difference between the cultural groups by child population as compared to the percentage of children in care for the provinces.

Statistics Canada (2001) data indicates that status First Nations children under 14 years compose 6.2% of the overall child population in the 3 sample provinces while Métis and other children representing 3.1% and 90.6% of the child population respectively. As shown in Table 9, when it comes to children in care, the proportion of Status First Nations and Metis in child welfare care compared to other Canadian children, the figures are astounding. **10.23% of all First Nations Status Indian children in these three provinces are in child welfare care as compared to 3.31% for Métis children and less than one percent of other children (0.67%).** This means that approximately one in ten Status Indian children in these three provinces was in care as of May 2005. Considering that a portion of these children in care are likely to transition out of care at some point, **it would not be unrealistic to estimate that about 20% of Status First Nations children will have been in child welfare care at some point of their childhoods.** This staggering statistic affirms First Nations community reports of mass removals of children. This finding also suggests that pan Aboriginal policy and practice

Table 7: Proportion of Aboriginal and non Aboriginal Children in Care in Three Sample Provinces contrasted with population of Aboriginal children

Cultural Identity/Status	Province A		Province B		Province C	
Aboriginal CIC	4,197	52%	4,379	48%	4,803	83%
Non Aboriginal CIC	3,751	48%	4,715	52%	979	17%
Aboriginal Children as percentage of total child population*	8.7%		7.3%		23.1%	

* Statistics Canada (2001) Aboriginal children 0-14 as a percentage of total child population by province

Table 8: Children in Care by Aboriginal Status in Three Sample Provinces

Aboriginal Identity of Child	Province A		Province B		Province C		Total	
Métis	492	11.7%	622	14.2%	510	10.6%	1,624	12.1%
Inuit	26	0.6%	22	.5%	9	.2%	57	.4%
First Nations (status)	3,317	79%	2,592*	59.2%	4,022	83.7%	9,931	74.2%
First Nations (non status)	362	8.6%	1143	26.1%	262	5.5%	1,767	13.2%
TOTAL	4,197		4,379		4,803		13,379	

*includes children who registered and are eligible to be registered with applications pending

Table 9: Percentage of Children in Care by Cultural Group in Three Sample Provinces

Cultural Group	Population of Specific Cultural Group in 3 Sample Provinces*	Percentage of overall Child Population in 3 Sample Provinces	Number of Children in Care (3 Provinces)	Percentage of Children in Child Welfare care by Cultural Group in 3 Sample Provinces***
First Nations Status children	97,065	6.2%	9931	10.23%
Métis children	49,040	3.1%	1624	3.31%
Other children**	1,411,280	90.6%	9445	0.67%

*note that child population data represents children 0-14 years in Canada in the 2001 census. Statistics Canada data indicated that the overall child population (0-14 years in all three provinces was 1,557,385 in the 2001 census)

**note that population of other children includes non status First Nations, Inuit and non Aboriginal children

***note that the proportion of Status Indian children in child welfare care by provinces A, B and C are Province A (11.06%), Province B (8.34%) and Province C (11.1%)

approaches may not be advised given the disproportionate representation of status First Nations children in child welfare care and calls for an enhanced investment in services to Status Indian children.

In terms of funding formulas, two provinces provided details regarding their funding formulas – one in very specific terms and another provided a less detailed formula. The remaining provinces reported that the details regarding the original funding formula for provincial child welfare had been lost over time and was now simply adjusted on an annual basis according to price, volume or changes in circumstances. Several of the respondents indicated that although they operate under a fixed amount of funding they have the option to appeal to the provincial treasury for additional funds in cases of extraordinary circumstances including significant organizational or practice change.

Three provinces report basing human resource needs on caseload or workload models. One province uses a complicated workload formula involving over 1700 pieces of data which has a built in adjustment for changes in social work practice. This model has been in place since 1997 and is subject to a union collective agreement. This particular province did not comment on whether its salary ranges are similar or different from FNCFSA in the area. Another province using a caseload model, noted that when it reimburses agencies for services it assumes funding for one worker for every 7228 days of care provided by the agency – no funding is provided for community services, or executive core funding and only partial reimbursement is provided for protection services. The third province used a caseload model funding one social worker for every 20 cases and noted that the FNCFSA match the salary levels provided by the province. The other regions were unable to respond to this question.

Conclusions

Despite the limited response rate, the provincial surveys revealed some important data:

1) First Nations children are over-represented in child welfare care and compose the largest group within the Aboriginal category. Data from three provinces indicates that First Nations Status Indian children are over 15 times more likely to be placed in child welfare care than other children in the provinces.
2) Ranges of services are based on provincial legislation, regulations and standards, but no province was able to specifically identify the range of services they provide, noting in at least one case, that this was due to the flexibility given to regions to allocate funding based on community need.
3) Caseload or workload appears to be the most significant variable in shaping provincial human resource needs.
4) The good example set by the three provinces in the sample that collect information on Aboriginal children disaggregated by cultural group should be made uniform throughout all provinces. Collecting disaggregated data allows for a more targeted understanding and response to the needs of Aboriginal children from diverse cultures and contexts.

Further analysis of provincial funding formulas where they exist will occur in Phase Three of the research program.

9. REMOTENESS FACTOR

The National Policy Review (MacDonald & Ladd, 2000) found that the remoteness factor in Directive 20-1 required review in order to ensure it adequately reflected the additional costs to child and family service agencies related to remoteness. In addition to the analysis of remoteness questions in the First Nations child and family service agency survey, Dr. John Loxley analyzed the current remoteness factor and compared it with two other formulas (one used by a provincial government and the other by a corporation.)

Findings

The current remoteness factor classifies agencies in accordance with their distance from the service centre, degrees latitude, and year round road access. It contains three separate adjustments– one on the per band amount, one on the per child

amount and another on the per agency amount. These adjustments vary and no documented rationale exists to support the varying amounts. So changing the adjustment factors may correct the concern by remote agencies that the current formula is inadequate to meet costs. However it is unclear whether this type of adjustment would address the primary concern expressed by remote agencies which was that the current service centre used to calculate the remoteness factor for the agencies does not necessarily reflect the place where agencies go to access the specialized range of services and products related to child welfare.

A more promising option is to run analysis of the current remoteness factor replacing the current service centres with the city centres used to calculate remoteness for other INAC programs. Preliminary analysis of the city centers indicates that these locations seem to correlate more closely with the locations from which agencies are likely to access their services and products.

The current remoteness factor formula was compared to two other remoteness factors – one used by a province and another by a corporation. In each case the remoteness formula was applied to First Nations child and family services in the province were these two formulas were derived. Neither formula proved to be an improvement over the current remoteness factor as they were not designed with the unique needs and economies of scale of First Nations child and family service agencies in mind.

Conclusions

Replacing the service centre used in the current formula with the city centre used for some other INAC programs appears to be the most promising resolution to ensure First Nations child and family service agencies operating in remote area have adequate funding. Further analysis of this option will be conducted in Phase 3 of the research program. Importantly a question asking agencies to identify the centre where they go to access specialized child welfare services and products will be included and these results will be compared to the service centers and city centers identified in the INAC remoteness factor.

10. How Much has INAC's Failure to Adjust the Operating Formula for Inflation COST FIRST NATIONS CHILD AND FAMILY AGENCIES?

Although Directive 20-1 does contain a cost of living adjustment it has not been implemented since 1995. This is considered by many to be a major weakness in the formula, one which leads to both under-funding of services and to distortion in the services funded since some expenses subject to inflation must be covered, while others may be more optional. How much has this failure to adjust for inflation cost First Nations Agencies since the last adjustment in 1995?

Table 10 shows that the Consumer Price Index, the most widely accepted indicator of cost of living increases, rose from 104.2 in 1995 to 126.3 in 2005 (May). If the starting point in 1995 is expressed as 100, then the index in 2005 rises to 121.21, i.e. prices increased by 21.21% over this ten year period, when no adjustments were made for inflation by INAC.

Table 10: Increases in the Consumer Price Index (1995-2005)

CPI	Year	CPI set at 100
104.20	1995	100.00
105.90	1996	101.63
107.60	1997	103.26
108.60	1998	104.22
110.50	1999	106.05
112.50	2000	107.97
116.40	2001	111.71
119.00	2002	114.20
122.30	2003	117.37
124.60	2004	119.58
126.30	2005	121.21

Source: Statistics Canada

Table 11: Inflation Adjustments by Region (1999-2005)

INAC Region	Formula Funding	Adjusted for Inflation	Difference
British Columbia	$80,992,151	$92,059,053	$11,516,902
Alberta	$144,061,110	$164,650,535	$20,589,425
Saskatchewan	$151,445,637	$173,138152	$21,692,514
Manitoba	$191,591,040	$218,703,956	$27,112,916
Ontario	$123,427,998	$140,728,620	$17,300,623
Quebec	$59,956,671	$65,154,656	$8,197,985
Atlantic	$39,705,067	$45,312, 751	$5,607,684

We know, therefore, that had cost of living adjustments been made annually since 1995, then funding would have been higher in 2005 than in 1995 by 21.21% purely on account of inflation, i.e., ignoring any increase in the number of children, number of agencies etcetera. Although we do not, have access to data for funding levels in 1995.

We do have data for 1999 to 2005. If we adjust the funding data for each year by the cost of living index in Table 10, we can calculate what funding would have been available over this six year period had inflation protection been available in each region (please see Appendix 2 for tabulation per year in each region). Table 11 shows what this would have been for each INAC region from 1999 to 2005 and the difference between this and actual funding, representing lost revenues from INAC for operations.

Table 12 shows what that total would have been the national operations funding with inflation adjustment and what the difference is in total for all regions. It shows that **between 1999 and 2005, cumulative operations funding would have been larger by $112 million, at $900 million instead of the $788 million which was provided in actuality**.

This represents a loss of 14% of funds over the period. For the year 2005, operations funding would have been $142 million instead of $117 million, or $24.8 million higher than funding actually provided. This amount is roughly the additional monies the government has promised to make available to First Nations Agencies this year, one time only!! To fully compensate for inflation losses over this period, this $25 million, and more, would need to be made available every year from now on. This helps to situate the additional money in the broader context of historical under funding.

11. SMALL AGENCIES

Small agencies (those serving child populations of less than 1,000) represent 55% of the total number of First Nations child and family service agencies in Canada, excluding the province of Ontario. It is critical to understand the needs and challenges of these agencies in order to promote optimal support and functioning.

Study Design and Methodology

The objective of this study is to describe the challenges faced by small agencies and ensure the needs of these organizations are considered in the development of an alternative funding formula for First Nations child and family service agencies.

The data for this study was gathered using a structured interview conducted with fourteen executive directors of small First Nations child and family service agencies. Information was gathered using a standardized questionairre and was administered either on site or by telephone.

Table 12: Losses on INAC Operations Funding Due to Lack of Inflation Adjustment (All INAC Regions)

Year	Formula Funding	Adjusted for Inflation	Difference
1999	$105,053,015	$111,404,589	$6,351,574
2000	$108,573,428	$117,221791	$8,648,363
2001	$110,959,054	$123,950,421	$12,991,367
2002	$113,702,424	$129,852,097	$16,149,673
2003	$114,848,709	$134,798,437	$19,949,728
2004	$117,895,263	$140,976,486	$23,081,222
2005	$117,147,781	$141,993,903	$24,846,122
Total	$788,179,674	$900,197,723	$24,846,122

Agencies were selected from the provinces of British Columbia and New Brunswick due to the high distribution of small agencies in these regions. Quebec, the only other region with a significant number of such agencies was not included due to resource limitations. The primary areas of inquiry for this report are:

1. **What are the core administrative staffing and related requirements of small agencies?**
2. **How should the funding formula be adjusted to meet these requirements?**
3. **What is the minimum size of agency and related population consistent with good social work practice and economies of scale?**

It is important to note that maintenance in British Columbia is not reimbursed at actual costs but rather on the basis of an "average actual cost" that is set by the province each year for foster and group care. This amount may exceed the actual costs for maintenance for some children in First Nations child and family service agency care and in these instances, the INAC region has allowed agencies to keep the maintenance surplus and apply it against expense shortfalls under the operations formula. This has worked to the benefit of First Nations agencies in British Columbia as most of the agencies in that province are small agencies and thus do not receive the full operations allotment.

Summary of Findings

In addition to child protective services, provided by fully mandated agencies, the agencies in the study provide a diverse range of services which include, but are not limited to, family and child supportive services, foster care, family reunification, prevention and community development. There are, however, a number of services which agencies indicated they would like to provide but are unable to due to limitations of the current funding formula. Virtually all respondents stated that in order to provide the full range of services needed by the community, additional full time staff would be needed. The most commonly identified staffing need was for social workers and prevention workers.

The findings indicate that small agencies face a number of challenges in the areas of core administrative and staffing related requirements with 75% of respondents indicating that their salary and benefit levels are not comparable to other child welfare organizations.

The most frequently cited non-staffing cost that would be incurred if agencies provided their preferred range of services is associated with capital costs for office buildings, space or renovations. New Brunswick agencies placed equal priority on costs for information technology software and hardware. **There is a substantial gap, with an average differential of $320,000, between the funds required to run an agency with the preferred full range of services and the amount of funds agencies currently receive.**

To optimize services, most agencies share resources with other reserve based programs. Examples include joint funding of staff positions, cosponsoring training or community events and sharing costs to bring in specialized services. Due to the high level of needs in their communities, none of the respondents stated that there should be a minimum population size to ensure good social work and economies of scale.

The pressure on First Nations child and family services to deliver services comparable to the provincial government child welfare agencies is a challenge for small agencies. In regards to cost-effectiveness, participants were unanimous in the position that their services were more cost-effective as compared to provincial counterparts due to the broader scope and extensive nature of the services provided. Cost differences are also due to lower maintenance costs and non-unionization. The demands on staff in small agencies are high with virtually all respondents agreeing that staff members perform duties not expected by employees in larger agencies.

In order to meet some the challenges small agencies face in providing a full range of services, the option of centralizing some agency functions was explored. While this was a favored approach by most agencies, notably all New Brunswick participants, it was not accepted by all due to issues regarding geographic isolation and/or high travel costs.

Directive 20-1, the use of surplus funds and alternatives for maintenance funding formed the basis of inquiry regarding alternative funding approaches. The majority of respondents believed that an entirely new formula was required incorporating prevention and out of care options, an increased rate for remoteness, a mechanism for block funding and consideration of the total population - whether status or non status.

The population policy threshold in Directive 20-1 was considered to be an inadequate means of benchmarking operations funding levels by all participants in the study. Approximately half of the respondents stated that funding should be based on community needs not child population counts. Another 25% of participants stated that population counts should reflect the entire population, not just children as it is the entire family which needs support when a child is unsafe or at risk in the home.

Policy directing the use of surplus funds differs by region and accounts for the variances in agency possession and use of these funds. Surplus funding was reported by British Columbia agencies only due to their maintenance per diem arrangement. While agencies in New Brunswick must return surplus funds, British Columbia agencies are able to use these funds for child and family services.

British Columbia is unique in using the per diem arrangement to pay for maintenance costs. In terms of the allocation of funding for maintenance based on actual costs or by per diem, all New Brunswick agencies expressed preference for payments based on actual costs, while most British Columbia agencies preferred the per diem arrangement. The positions expressed by both regions appear to be motivated by fear. New Brunswick agencies feared per diem arrangements would result in a budget deficit or reduced service delivery while British Columbia agencies feared that removing the per diem arrangement and associated surpluses would mean reduced funds for staff and prevention programs.

Conclusions

While small agencies remain viable and cost-effective resources, they face significant challenges in terms of administrative and core staffing requirements. The average cost actual system in BC has appeared to have partially compensated for the

low operational funding. Cuts or changes to this funding arrangement would likely substantially decrease the ability of these agencies to provide the current range of services.

There is a substantial disparity in salary and benefit levels as compared to other child welfare organizations as well as a significant gap in what is required to run an agency with the preferred full range of services and what agencies currently receive. Although agencies had different perspectives on the used of surplus funds and maintenance funding alternatives, dissatisfaction with the current Directive 20-1 population threshold policy was unanimous.

Recommendations for alternative funding approaches include:

1. Funding for prevention and out of care options
2. An increased rate of funding for remoteness
3. Development of a mechanism for block funding
4. Consideration of the total population, whether status or non-status.

Similar to their larger counterparts, small agencies maintain a holistic approach to child and family welfare which includes an emphasis on prevention and community development. These are proactive services which function to reduce the incidence of child abuse over time. Small agencies do face some unique challenges and as these agencies constitute the majority of First Nations child and family services in operation, it is evident that more focused study is required.

LIMITATIONS OF THE RESEARCH

In every research project there are important limitations and this is true of the works undertaken for this Phase Two project. Overall, we are very pleased with the quantity and quality of the data but it is important to acknowledge the limitations in the research and analysis. This phase of the project had to be completed in its entirety in less than five months and thus, time was definitely a factor which limited our ability to collect and validate data. This was particularly true for the provincial surveys. Although all provinces were contacted for the research (except Ontario, PEI and Newfoundland) the researchers did not always have the time needed to negotiate consent to participate and collect the data within the defined time frame. We, and the individual researchers, have made every effort to identify limitations in the research whenever possible.

As noted before, this research does not include Ontario (as it is funded under a separate funding arrangement), nor has it specifically focused on foster care costs or the proposed block funding methodology. Dr. Brad McKenzie (2002) prepared a report to inform block funding and cautions that this approach, whilst having benefits of increased flexibility, is not appropriate for all First Nations child and family service agencies (i.e. small agencies, new agencies, agencies lacking a long term track record that allows for accurate prediction of future costs (thus setting a reasonable base amount for the block.)

An additional limitation is that given the short time frames for the research to be completed, there is an incomplete analysis of the costs related to children in care and it strongly recommended that future research be undertaken to define the range of services provided to children and care and the relative costs thereof.

We have also not accounted for unpredictable changes INAC may make to current funding levels or arrangements. We would hope that any such changes would be put in abeyance until adequate analysis of how these proposed changes would interface with any new formula were fully considered in partnership with First Nations.

IMPLICATIONS FOR THE THREE FUNDING FORMULA OPTIONS

Redesigning Directive 20-1

Overview of Directive 20-1

The current funding formula was designed in 1989 in an effort to standardize funding levels

amongst First Nations child and family service agencies in Canada and promote their further development. The Directive requires that agencies follow the provincial child welfare legislation in each province but includes no adjustment for the content of said statutes. It includes a guiding principle that services should be comparable to those provided to children in similar circumstances off reserve. but contains no mechanisms to ensure this is achieved.

In addition to a calculation for remoteness, Directive 20-1 provides funding pursuant to two broad categories of funding:

1. **Operations**: Based on the Status Indian child population resident on reserve this pot of funds is intended to support the administrative functioning of the agency and includes a small amount for prevention services and legal fees.
2. **Maintenance:** Provided on a reimbursement basis for placing Status Indian children resident on reserve into out of home care.

The Directive also includes an allotment for a cost of living adjustment although this has not been implemented since 1995. Additionally, the Directive included funds for agencies to conduct evaluations at years three and six of operations but as the Auditor General of Canada (December, 2002) has noted First Nations child and family service agencies consider evaluation as a key management tool to inform best practices and would like to see ongoing funding for evaluation.

Although it is broadly acknowledged that the Directive achieved the goal of increasing the numbers of First Nations child and family service agencies in Canada, there were significant concerns being expressed by First Nations child welfare agencies about insufficient levels and flexibility in funding arrangements – particularly with regard to providing primary, secondary and tertiary prevention services.

In response to these concerns, the Assembly of First Nations and the Department of Indian Affairs and Northern Development undertook a review of the Directive in partnership with a panel of First Nations child and family service agency staff and departmental officials. The resulting report, the Joint National Policy Review on First Nations Child and Family Services (MacDonald & Ladd, 2000) contained seventeen recommendations for change. As more than four years had passed between the time of that report and the commencement of this research project, the research team checked the validity of the NPR recommendations in Phase One and found that participating First Nations child and family service agencies continued to believe the recommendations were valid and had application in a 2005 context.

Implications of Research Findings for Directive 20-1 Option

Based on the research findings **the Directive would need substantial alteration in order to meet the requirements of First Nations child and family services and ensure equitable child welfare services for First Nations children resident on reserve.** From the outset, ongoing separate pools of funding outside of the current operations and maintenance budgets are being recommended for inclusion in the new formula to cover the following expenses:

1) Community Development (primary prevention)
2) Least Disruptive Measures
3) MIS system maintenance and training
4) Standards and evaluation funding
5) Exceptional circumstances funding pool (2 million dollars as a minimum value to be adjusted annually) to be held nationally.

Additionally separate funding is recommended for one time or exceptional expenses:

1) Community assessments relating to extraordinary circumstances
2) Capital costs to bring MIS systems up to minimum standards and to develop national and regional data collection frameworks to inform policy and practice.
3) Capital costs for the development of culturally based standards.
4) Capital costs to allow for accessibility of offices for disabled persons.
5) Capital cost to allow for adequate office space

for agency operations and to ensure that office space meets building code standards.

6) Funds for research and development at a national, regional and agency level.

7) Funds to adjust funding when changes in provincial legislation are introduced.

In addition to these costs, we recommend the reintroduction of the cost of living adjustment. **The failure to implement the cost of living provision in the current formula has resulted in a 112 million dollar loss of funding in the national operations budgets for the years 1999-2005**. This means that the 24.8 million dollars is needed to meet the cost of living requirements for 2005 alone, if the loss of purchasing power since 1995 is to be restored.

Adjustments to the remoteness factor are required so that it better reflects the costs associated with child welfare and providing adequate funds for staff salary and benefits are required.

Importantly, the research recommends the adoption of Jordan's Principle. In circumstances where a service would normally be available to non Aboriginal children, the provincial or federal government department which first receives a request to pay for services for a First Nations child should fund the service without delay or disruption. The government of first pay then has the option of referring the payment to a jurisdictional dispute table for review. Consistent with the Convention on the Rights of the Child Jordan's principle would ensure that child's needs come before the needs of governments – all the time.

It is also clear that **a number of agencies are moving toward the development and implementation of their own child welfare laws and thus the implementation of recommendation one of the NPR which encourages that the new funding policy support First Nations based jurisdiction and governance** is becoming increasingly important. This would simply mean expanding the eligibility range for jurisdiction to include First Nations child welfare legislation.

Recommendations

That the research team move forward with a full survey of First Nations child and family service agencies in order to quantify the implications of these modifications to the funding formula for both First Nations agencies and INAC. This will be accomplished through the development, implementation and analysis of results of a survey to be administered to all First Nations child and family service agencies in Canada (except in Ontario where a separate funding agreement exists.) This survey would be informed by the results of Phase Two and will include specific questions on the areas where modifications to the current formula are being considered. It is anticipated that the survey will be administered over the summer of 2005. This timing is not ideal as agency staff often take their vacations during this time, but unfortunately deferring this to the fall is not an option as INAC needs to develop the Memorandum to Cabinet requesting the new funding authority no later than September of 2005.

In addition to this agency survey, specific focused research is recommended in the following areas:

1) Research on the minimum economy of scale for operation of a First Nations child and family service agency.

2) Legal review of tort law relevant to First Nations child and family service agencies to determine a minimal level of liability coverage.

3) Research on the implications of substituting the city centre for the current service centre in the remoteness factor.

4) Obtain population trend data on the status Indian children in care in order to understand how the current definition of eligible child impacts FNCFSA funding over time.

5) Analyze the interface between Directive 20-1 and the funding instruments used by INAC (e.g.: contribution funding agreements.)

Overall, a blending of this option and the First Nations formula appears to be the most promising option emerging from the research. The additional information provided by the universal First Nations child and family service

agency survey and the recommended focused research projects will help better define the practice and economic implications of the proposed modifications to Directive 20-1.

LINKING FNCFSA FUNDING TO PROVINCIAL FUNDING LEVELS

This option involved identifying the funding formulas used by each province and then applying it to the First Nations child and family service agencies in the respective province to see what the implications were. **Although at first glance this option may suggest that there would be "provincial comparability" if the formulas were applied to First Nations child and family service agencies further analysis immediately identifies complications.** From the outset there were several complications regarding this approach: 1) application of provincial formulas could result in no fewer than 10 different funding formulas thereby creating potential for inequities between regions 2) provincial funding formulas are developed with provincial economies of scale and service contexts in mind – application to FNCFSA that serve smaller communities with greater service needs was questionable and 3) provincial child and family service authorities may draw upon the resources of other provincial ministries to support delivery of child welfare (i.e.: for capital building costs, legal costs) – if these services were funded outside of the provincial formula then the formula would need to be adjusted to reflect these costs and 4) provincial funding formulas are developed by provincial staff and have not included First Nations or the federal government thus pursuing this option would mean locating the control of funding strictly within the ambit of the provinces and 5) consistent with the findings of CIS-03, provinces typically serve a population with lower needs for child welfare services than First Nations child and family service agencies.

Despite the initial complications of this approach, the NAC directed that further analysis of this option be conducted in phase three of the research program. The research team had initially hoped to conduct an economic analysis of three provincial funding formulas, but as two of three of the provinces identified for analysis turned out to not know what their formula was, a detailed analysis could only be completed for one province.

Description of Provincial Models

Several provinces interviewed report that they no longer have any record as to what the original structure of the funding formula for child and family service deliver was in their area. They have simply adjusted the amount provided annually by price and volume. This creates an obvious complication as the intent was to apply the provincial formulas to First Nations child and family service agencies in each jurisdiction.

As noted above, the research team had initially planned to identify the funding formulas for three provinces and then apply them to the First Nations child and family service agencies in each province to see what the results would be. However, two of the provinces identified for study did not have any record of how their funding formulas were derived. Therefore, analysis of the implications of the applying a provincial funding formula to First Nations child and family service agencies in that province was only conducted in one region.

This province indicated that their province unilaterally applies a funding formula based on the Universal Cost of a Direct Service Worker. The formula provides a Direct Service Worker for each 7228 days of care provided by the agency. Unlike their provincial agency counterparts:

- The FNCFS Agencies do not receive Services to Community funding.
- The FNCFS Agencies do not receive Executive Core funding.
- The FNCFS Agencies receive partial funding for Protection Services.

When the provincial funding formula was applied to First Nations child and family service agencies in this province the majority of agencies would receive less funding than under the Directive.

Provincial surveys indicate that workload and caseload are primary determinants of human resource needs in at least three provinces. One province uses a complicated workload formula involving over 1700 pieces of data which has a built in adjustment for changes in social work practice. This model has been in place since 1997 and is subject to a union collective agreement. This particular province did not comment on whether its salary ranges are similar or different from FNCFSA in the area. Another province, using a caseload model, noted that when it reimburses agencies for services it assumes funding for one worker for every 7228 days of care provided by the agency – no funding is provided for community services or executive core funding and only partial reimbursement is provided for protection services. The third province used a caseload model funding one social worker for every 20 cases and noted that the FNCFSA match the salary levels provided by the province. The other regions were unable to respond to this question.

Implications of Research Findings for Provincial Funding Level Option

An analysis of this funding option indicates that this is the least promising of all three funding formula options in that even if the funding formulas could be identified for all ten provinces, there is no indication that the formulas were developed to be responsive to the unique service needs or economies of scale for First Nations child and family service agencies.

Moreover, selection of this option would be inconsistent with the recommendations of the National Policy Review which sought to reduce inequities in funding levels between regions – if the provincial option were selected there would be, in effect, ten funding formulas for First Nations child and family services.

Recommendations

1) **Given the short time frame for the analysis of all three formulas and the need to focus on the most promising alternative for the survey of all FNCFSA, we recommend not pursuing the option of applying provincial funding formulas to FNCFSA.**

2) **Analysis of the existing provincial funding formulas should, however, continue to identify possible best practices for integration into the new formula for FNCFSA.**

3) **If possible within the time frame for Phase Three the research team will attempt to identify another provincial funding model and apply it to First Nations child and family service agencies in the region to see what the results would be.**

THE FIRST NATIONS BASED FUNDING MODEL

Description of First Nations Model

There is no preexisting template for this model – it would be an entirely new funding formula which, taking into account the recommendations of the NPR, would respond to the unique needs of First Nations child and family service agencies. **In principle, this approach would be the most community based and reflect the findings of the research conducted by Cornell and Kalt (2002) which indicated that community based decision making accompanied by adequate resources creates optimal conditions for sustained socio-economic improvements.** It would involve comprehensively researching the needs of children and families serviced by the diversity of First Nations agencies and then, with the involvement of the FNCFSA, develop a funding model that best equips them with the tools needed to support families in their communities taking into full account the current status and evolution of child welfare legislation, standards and best practice (provincial and First Nations) Integration of outcomes and evaluation mechanisms would be key as agencies measure the efficacy of various approaches to enhancing child safety and well being.

The range of tools available to First Nations agencies would include the ability to draw upon the resources and expertise of neighboring First

Nations agencies to respond to exceptional circumstances such as the admission of large numbers of children in care or a child maltreatment investigation involving a staff member. Regional and national research, policy and networking non government organizations would further support agencies in their regions. The mandates of these organizations would reflect local needs, but may include the design of training programs for staff, development of standards templates, information management systems, and research on key regional basis. Consistent with the NPR the establishment of national NGOs to support FNCFSA through the provision of policy, research and networking functions that may include monitoring the implementation of the Convention on the Rights of the Child respecting First Nations children, conducting national research projects, information sharing on promising practices and linkages to promising practices amongst Indigenous peoples worldwide.

The development of such a model would require having broad based information on the longitudinal experiences of First Nations children and families coming to the attention of child welfare and the range of community based responses currently provided by First Nations child and family service agencies. Once this is determined a costing exercise would need to be designed to be undertaken and a funding formula developed. Unfortunately, much of the baseline data needed to develop a fully First Nations formula is currently unavailable. However, the research conducted for Phase Two did reveal some important findings relevant for the development of this option over time.

Implications of Research Findings for First Nations Model

The Canadian Incidence Study on Reported Child Abuse and Neglect is the first national data set that describes the experiences of First Nations children coming into contact with the child welfare system. Although this study is limited to reported cases of child maltreatment, it has the benefit of running in five year cycles allowing researchers to mark changes over time. The 2003 study, the second cycle of CIS, finds that Aboriginal children continue to be over-represented at every decision making point from reporting to admission into care. It also confirms findings of the 1998 study that First Nations children are by far the largest group of children comprising the Aboriginal sample, accounting for over 67% of all investigations.

The most important finding of 2003 is that it affirms the findings of the 1998 cycle indicating that Aboriginal children are twice as likely to come into contact with child welfare authorities for neglect than their non Aboriginal peers. Physical neglect (failure to provide for a child's basic needs such as clothing, shelter, nutrition) is the most frequent form of neglect experienced by Aboriginal children. This is important as the ability to provide for a child's needs is correlated with income and Aboriginal parents continue to be more likely to rely on financial assistance or part time employment than their non Aboriginal counterparts.

The CIS data signals that investments in family support services that account for poverty, poor housing and addictions could maximize the standard of family care and avoid the current over-representation of First Nations children in child welfare care.

An interesting finding is regarding the placement of Aboriginal children in care. **When the child is on reserve they are three times more likely to be placed in the range of extended family and kinship placements than their off reserve counterparts**.

First Nations child and family service experts have routinely advocated that social work approaches in families must balance assessment of risk with the recognition and leveraging of protective factors (strengths) (Foxcroft & Blackstock, 2003; Blackstock, 2003). **As Dr. Helen Jones (2003) notes this approach has been integrated into child protection services in the UK in what is known as the Integrated Children's System (ICS.) This system relies on three inter-related components: 1) an assessment model framework that considers**

the child's developmental needs, the family and environmental factors and parenting capacity 2) developing information requirements and 3) sample formats for producing and generating reports. This system relies heavily on information management because one must have a holistic data management system that can be used for child and family case planning and policy making. The ICS system collects data to inform five over arching goals: healthy children, staying safe, enjoying and achieving, making a positive contribution and economic wellbeing. The data management system was designed to be attuned to social workers motivations for using a system and thus maximized their use of the system. The primary motivating factors for social workers to use the system were better outcomes for the children they served and more efficient use of their time. It also provided ample staff training time and opportunities for feedback into the process. Results of pilots of the ICS system are very encouraging with the following positive outcomes having been reported:

- Better descriptions of children and their families provide a stronger foundation for the development of effective service plans at the family level.
- More comprehensive information allows for more effective targeting, and coordination of resources to meet needs of children.
- Provides a basis for mapping trends of child need and identification of service gaps.

A model such as ICS would have important applications in a First Nations context as it accounts for the structural risk factors identified in the CIS -98 (Trocme, Knoke & Blackstock, 2004) study and puts in play a system that better describes the strengths and risks experienced by children and families allowing for a more effective and efficient use of resources over time. A caution must be raised about importing the ICS model without accounting for the cultural differences in, and between, First Nations but the integration of a holistic and strength based approach holds significant promise.

As Stanley Loo notes, **augmenting information systems would greatly increase reporting efficiencies as recommended by the Auditor General of Canada and would have the added benefit of supporting First Nations child and family service agencies to better identify changes in community needs and measure the efficacy of service outcomes.**

In terms of jurisdiction disputes, the new formula would entrench Jordan's principle of putting the needs of the child first and the resolution of the jurisdictional dispute second. This does not mean that jurisdictional disputes would go unresolved. Ideally, a First Nations funding formula would include an arms length dispute resolutions system that involves relevant stakeholders and, whenever possible, the integration of cultural approaches to resolving disputes.

Additionally, **a separate pool of funds needs to be established to respond to exceptional circumstances and communities in crisis that supports community based solutions and allows for cooperative resource sharing with neighboring First Nations child and family service agencies when necessary.** Consistent with the findings of Irvine (2004) the definition of a community in crisis or an extraordinary circumstance is contingent on the context of the community, available resources, degree of crisis response planning and resources and the precipitating event.

To set a baseline for understanding what is, or is not, extraordinary in each community, Dr. Cradock recommends that a community capacity assessment be completed on each community. This assessment will also identify existing community capacity to respond to exceptional circumstances and identify gaps in capacity. This assessment should account with the following continuum of extraordinary circumstances response as recommended by Irvine (2004):

- Recognize that First Nations child and family service agencies are often the first responders to community crisis and thus need to have equitable funding bases in order to meet the additional demands of crisis situations.
- Building community capacity to respond to crisis situations including the development of

crisis response procedures, protocol agreements and by providing training to First Nations child and family service agency staff.

- Moving to prevention as a mechanism to avoid as many crisis situations as possible – this means further investment in prevention services and the coordination of said services
- Building relationships within the First Nation, with neighboring First Nations child and family service agencies, non profits and levels of government to augment the range of resources available and engage the broadest available skill set in community crisis plan planning, immediate response and after crisis care.

Improving staff salary, benefits and training resources would be an important validation of the skills and expertise of FNCFSA staff would ensure that agencies are able to recruit and maintain qualified staff. It is important to keep in mind that professional development options should include a balance of academic and non academic pursuits allowing staff to upgrade their skills and knowledge. Adequate funding should also be provided to cover off costs related to workplace safety.

Recommendations

Implementation of the following recommendations would significantly advance the development of a First Nations based formula in the future:

1) Implement targeted funding for community development and least disruptive measures and include funds for ongoing evaluation of new programs.
2) Implement funding for adequate culturally based policy and standards development and maintenance that includes ongoing evaluation and maintenance.
3) Ensure that human resources funds are sufficient for FNCFCSA to offer competitive salaries and benefits whilst ensuring workplace safety and professional development (academic and non academic)
4) New treasury board authorities should provide funds for INAC to support national and regional research projects such as the CIS that significantly inform policy and practice for FNCFSA.
5) Increased investment in research to describe promising practices in FNCFSA management, policy and practice whilst identifying the conditions that made the promising practice possible.
6) Implement recommendation one of the National Policy Review by increasing the scope of child welfare authority eligible for funding to include First Nations based legislation.
7) Introduce a financial review and adjustment to account for changes to provincial child welfare legislation.

Conclusion

This report is dedicated to Jordan and to all First Nations children and families. In reading the statistics and the findings it is their images that should guide our interpretation and inspire our action.

This research presented a unique opportunity to bring together a multi-disciplinary team of experts whilst balancing academic and community expertise. To date, research on First Nations child and family services has been limited in Canada despite the over-representation of First Nations children in care and the development of First Nations child and family service agencies. This report represents the most comprehensive overview of First Nations child and family services completed to date. The findings, whilst having their limitations, affirm the calls by First Nations child and family service agencies for greater emphasis on prevention and least disruptive measures services in order to support family well being and over time reduce the numbers of children in child welfare care.

To follow is a highlight of some of the most important findings of this research report:

1) Status First Nations children are drastically over-represented amongst both children in care and Aboriginal children in care. In three sample provinces First Nations children are 15 times more likely than other children to enter

child welfare care. One in ten Status Indian children in these provinces was in care as of May 2005.

2) The most common reason why First Nations children come to the attention of child welfare authorities is neglect.

3) First Nations children are twice as likely as their non Aboriginal peers to have their cases substantiated and to be admitted into child welfare care. Funding levels should reflect the increased costs associated with these increased levels of service

4) The cost of living increment has not been provided to First Nations child and family service agencies since 1995. What this means is that for the time period where we have data (1999-2005) the loss of funds due to inflation for the operations portion of the funding formula was 112 million dollars.

5) Funds for prevention and least disruptive measures are not adequate either in terms of program development, program delivery and evaluation or staffing requirements.

6) First Nations child and family service agencies are having significant success in placing children in culturally based placements.

7) Two thirds of First Nations agencies report that funding for salaries and benefits was not sufficient in the current formula.

8) A large majority (84%) of agencies felt that current funding levels were insufficient to provide for adequate culturally based services.

9) The First Nations child and family service agencies in the sample reported an aggregate of 393 jurisdictional disputes that took an average of 54.25 person hours each to resolve.

10) First Nations child and family service agencies provide significant gift in kind consultation service to the provinces and federal governments.

11) Management information systems vary widely ranging from pen and paper to agency developed systems. In the vast majority of cases MIS systems do not meet minimum standards.

12) There is currently no adjustment to account for changes in provincial legislation resulting in reported gaps in services provided on and off reserve.

The ongoing research will help refine these findings and determine the costs of standing still and going forward with modifications to the funding formula.

In the end the value of this research will be judged by the actions that are taken in its spirit. Knowing what the problems are and knowing what the solutions are is simply not enough. If we do not act courageously and without compromise to ensure that First Nations have as Elder Donald Horne says *"what is rightfully theirs- a chance to live with dignity, in the ways of their ancestors, safely at home."*

(family photo by Michelle Nahanee in Alert Bay B.C.)

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(Footnotes)

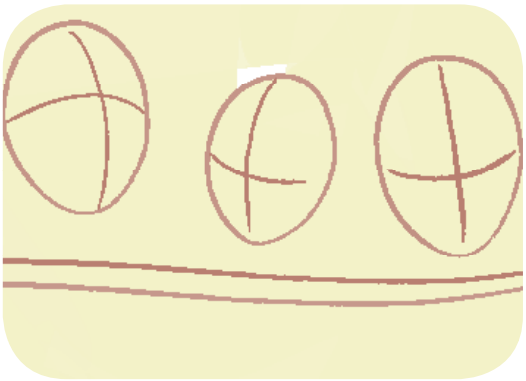
[1] Note: This study did not include Ontario as child welfare is funded under a separate funding arrangement known as the Indian Child Welfare Agreement (AKA the 1965 Child Welfare Agreement)

[2] Continuing custody is meant to describe those children in the child welfare care who by court order are in care until the age of majority.

[3] Canada (2005) National Building Code of Canada. Retrieved 8 July 2005 at http://www.nationalcodes.ca/nbc/index_e.shtml#

THE EXPERIENCE OF FIRST NATIONS CHILDREN

Coming into Contact with the Child Welfare System in Canada: *The Canadian Incidence Study on Reported Abuse and Neglect*



CHAPTER 2

based on the
Canadian Incidence Study of Reported Child Abuse and Neglect-2003
(CIS-2003)

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Introduction

This report presents a comparison of Aboriginal and non-Aboriginal children investigated for maltreatment in Canada in 2003. The analyses are based on the preliminary findings from the ***2003 Canadian Incidence Study of Reported Child Abuse and Neglect*** (***CIS-2003***) (Trocmé, Fallon, et al., to be released in October 2005). Analyses were conducted under contract for the First Nations Child and Family Caring Society to support the Caring Society's review of the Federal Government's child welfare funding framework. The purpose of the analyses was to examine differences in profiles of and service responses to Aboriginal children compared to non-Aboriginal children. The CIS 2003 study was made possible by a grant from the Public Health Agency of Canada.

Methodology

The ***CIS-2003*** is the second nation-wide study to examine the incidence of reported child maltreatment and the characteristics of the children and families investigated by Canadian child welfare services. The estimates presented in this report are primarily based on information collected from child welfare investigators on a representative sample of over 11,000 child welfare investigations conducted across Canada, excluding Quebec.

Specifically, the CIS–2003 is designed to

1. Examine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence as well as multiple forms of maltreatment;
2. Examine the severity of maltreatment as measured by forms of maltreatment, duration, and physical and emotional harm;
3. Examine selected determinants of health for investigated children and their families;
4. Monitor short-term investigation outcomes, including substantiation rates, out-of-home placement, use of child welfare court, and criminal prosecution, and
5. Compare 1998 and 2003 rates of substantiated physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence; the severity of maltreatment and short-term investigation outcomes

Sample

The ***CIS-2003*** captured information about children and their families as they came into contact with child welfare services over a three-month sampling period. Maltreated children who were not reported to child welfare services, screened-out reports, or new allegations on cases currently open at the time of case selection were not included in the ***CIS-2003***. A multi-stage sampling design was used, first to select a representative sample of child welfare offices across Canada, and then to sample cases within these offices. Information was collected directly from the investigating child welfare workers. The core sample of 11,562 child investigations was used to derive estimates of the annual rates and characteristics of investigated child maltreatment in Canada, outside of Québec[1].

A stratified cluster design was used to select maltreatment investigations for the ***CIS-2003***. Because of variations in the organization of child welfare service systems across Canada, a four-stage sampling process was required to select a nationally representative sample of children investigated because of suspected maltreatment. Fifty-five sites were selected from a pool of 327 child welfare service areas in Canada, outside of Québec.[2] Five sites declined to be involved because of their particular circumstances, and five replacement sites were randomly selected from the remaining pool.

A total of eight Aboriginal agencies were involved in the ***CIS-2003***. Five Aboriginal agencies were contacted for recruitment but were unable to participate as a result of external demands on the organization, organizational change, or existing service demands. Multiple presentations were made to agencies in an effort to recruit them and to establish trust between the agency and members of the study team. Two agencies initially agreed to

participate in the study and then were unable to due to capacity issues. Although the intention was to have ten aboriginal agencies participate in the study, only eight aboriginal agencies are included in the final sample.

The second sampling stage involved selecting cases opened in each site over a three-month period between October 1, 2003 and December 31, 2003.[3] Three months was considered to be the optimum period to ensure high participation rates and good compliance with study procedures. Consultation with service providers indicated that case activity from October to December is considered to be typical of the whole year.

The third sampling stage involved screening opened cases to identify those cases that met ***CIS-2003*** definitions of suspected maltreatment. The Intake Face Sheet of the CIS Maltreatment Assessment Form was completed on all open cases. Investigating workers then evaluated each case to determine whether maltreatment was alleged by the referral source or suspected at any point in the investigation process. In cases where maltreatment was suspected, the remainder of the CIS Maltreatment Assessment form was completed.

The final case selection stage involved identification of the specific children who had been investigated. In many jurisdictions, cases are classified on the basis of family units, while in others each investigated child is counted as a case. In jurisdictions using family-based case counts, children who had been specifically investigated because of suspected maltreatment were identified, yielding a final sample of 11,562 investigated children.

The sample includes 2,328 investigations involving Aboriginal: 304 First Nations children served by a First Nation's agency, 1,244 First Nations children served by mainstream agencies and 476 Métis, Inuit, and other Aboriginal children.

As with any sample survey, estimates must be understood within the constraints of the survey instruments, the sampling design, and the estimation procedures used. Please refer to the Canadian Incidence Study of Reported Child Abuse and Neglect Major Findings Report (***CIS-2003***) for a full discussion about the ***CIS-2003*** methodology and a discussion of the strengths, limitations, and impact on interpreting the ***CIS-2003*** estimates. [4]

Aboriginal Definition

The Aboriginal population figure was derived from Census 2001 data.[5] According to Census documents, the Aboriginal identity population figures refer to "North American Indian, Métis or Inuit (Eskimo), and/or those who reported being a Treaty Indian or a Registered Indian as defined by the Indian Act of Canada and/or who were members of an Indian Band or First Nation." The Census population figures may differ from those calculated by INAC because of methodological and conceptual differences.

Aboriginal Analyses

For the purposes of this comparative report, First Nation status children and First Nation non-status children were combined and then categorized as living on or off reserve[6a]. Other Aboriginal children included Métis, Inuit and other Aboriginal children. Non-Aboriginal children were those children for whom the worker did not categorize as Aboriginal.

Most tables are limited to estimated counts of the number children in each Aboriginal category because we were unable to obtain reliable population estimates for on and off reserve children. **Tables 1a and 2a** provide population based incidence estimates by collapsing the three Aboriginal categories. Caution should be used in comparing the investigation statistics in the other tables because counts of number of investigations and differences in the distribution of these cases do not reflect the significant base-rate difference in incidence rates between Aboriginal and non Aboriginal children. For example, in **Table 2a** 13% of substantiated cases of maltreatment involving Aboriginal children involved physical abuse, compared to 29% for non-Aboriginal children. However, since Aboriginal children

were nearly 2.5 times more likely to be reported and substantiated, the incidence of substantiated physical abuse was in fact higher for Aboriginal children: 6.4 per thousand compared to 5.7 per thousand for non-Aboriginal children.

Given that the purpose of the report was to explore differences in profiles of and service responses to Aboriginal children compared to non-Aboriginal children, the statistical analyses in this report examine the differences in distribution of key characteristics of both groups. In most cases this is done using a Chi-square analysis[6b] of these distributions. Thus the significant difference reported in **Table 2a** means that there is a significant difference in the distribution of categories of maltreatment (13% physical abuse vs. 29%). However, this statistical analysis does not examine the difference in incidence rates (6.4 vs. 5.7)

Child Maltreatment Investigations by Level of Substantiation

Tables 1a and 1b describe investigations of maltreatment in terms of the three levels of substantiation specified by child protection workers involved in the *CIS-2003*:

A case is considered substantiated if the balance of evidence indicates that abuse or neglect has occurred.

A case is suspected if you do not have enough evidence to substantiate maltreatment, but you also are not sure that maltreatment can be ruled out.

A case is unsubstantiated if the balance of evidence indicates that abuse or neglect has not occurred.

Table 1a describes incidence rates for Aboriginal and non-Aboriginal children. Nearly 10% of Aboriginal children in Canada (95.3 per thousand Aboriginal children) are estimated to have been investigated in 2003 because of alleged maltreatment, over double the rate for non-Aboriginal children (42.2 per thousand). The rate of substantiated maltreatment was 2.5 times higher: 49 substantiated victims per thousand Aboriginal children compared to 19.8 per thousand non-Aboriginal children.

Table 1b provides the breakdown in substantiation rates by Aboriginal group. A higher proportion of child maltreatment investigations were substantiated for First Nations on reserve (51%), First Nations off reserve (51%), and other Aboriginal (55%) compared to non-Aboriginal (47%). In addition, a higher percentage of child investigations for First Nations off reserve and other Aboriginal were determined to be suspected following the completion of the initial investigation period.

Table 1a: Incidence of Child Maltreatment Investigations by Level of Substantiation in Canada in 2003, (Quebec Excluded)

	Aboriginal			Non-Aboriginal			Total
	%	# of Child Investigations	Rate per 1000	%	# of Child Investigations	Rate per 1000	
Substantiated	52	15,273	49.0	47	88,025	19.8	103,098
Suspected	15	4,506	14.6	12	23,574	5.3	28,053
Unsubstantiated	33	9,715	31.4	41	76,254	17.1	85,969
Total Maltreatment Investigations		29,494	95.3		187,826	42.2	217,320
Estimates- abor registered pop=309, 388; non-abor pop =4,757,845-309,388=4,448,457							
Analysis is based upon a sample of 11, 562 child maltreatment investigations with information about substantiation							

Table 1b: Child Maltreatment Investigations by Level of Substantiation in Canda in 2003 (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Substantiated	51	3,473	51	8,496	55	3,299	47	88,025	103,298
Suspected	12	822	15	2,506	20	1,178	12	23,574	28,053
Unsubstantiated	37	2,480	34	5,696	25	1,539	41	76,254	85,969
Total Maltreatment Investigations	100	6,780	100	16,698	100	6,016	100	187,826	217,320

Canadian Study of Reported Child Abuse and Neglect 2003 $X^2=50.16$ $p<0.001$

Analysis is based upon a sample of 11, 562 child maltreatment investigations with information about substantiation

Categories of Substantiated Maltreatment

Investigating child protection workers could identify up to three types of maltreatment for each investigation. Workers could choose from a list of twenty-five forms of maltreatment, under five categories of maltreatment (physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to domestic violence). Note that because a case could include more than one form of maltreatment the columns in **Tables 2a to 3f** add up to more than the total number of substantiated cases. Estimates are not presented when there are insufficient cases sampled to provide a reliable estimate. In such cases, two dashes (--) appear in the table cell.

Incidence Rates: **Table 2a** shows that rates of substantiated maltreatment were similar or higher for Aboriginal children for all categories of maltreatment compared to non-Aboriginal children.

Physical Abuse: Significant differences were seen in the proportion of investigations that identified substantiated physical abuse for the four groups (First Nations on reserve, First Nations off reserve, other Aboriginal and non-Aboriginal). Twenty-nine percent of non-Aboriginal investigations indicated that physical abuse had been substantiated compared to 10% for First Nations off reserve and 11% for other Aboriginal.

Sexual Abuse: A higher proportion of non-Aboriginal investigations involved substantiated sexual abuse than for First Nations and other aboriginal categories.

Neglect: A much higher proportion of First Nations and Aboriginal investigations involved substantiated neglect compared to non-Aboriginal investigations. This ranged from 51% for First Nations on reserve to 65% for other Aboriginal.

Emotional Maltreatment: Seventeen percent of substantiated maltreatment investigations for First Nations off reserve noted emotional maltreatment. This proportion was higher for First Nation on reserve (27%), other Aboriginal (26%) and non-Aboriginal (24%).

Exposure to Domestic Violence: The proportion of substantiated child maltreatment investigations involving exposure to domestic violence ranged from 28% for other Aboriginal to 38% for First Nations on reserve.

Forms of Substantiated Physical Abuse

For the purposes of the *CIS-2003*, cases of investigated maltreatment were classified as physical abuse if the investigated child was suspected to have suffered or to be at substantial risk of suffering physical harm at the hands of his or her caregiver. The physical abuse category includes five forms of abuse:

Table 2a: Incidence of Categories of Substantiated Maltreatment in 2003 in Canada (Quebec Excluded)

	Aboriginal			Non-aboriginal			Total
	%	# of Child Investigations	Rate per 1,000 children	%	# of Child Investigations	Rate per 1,000 children	
Physical Abuse	13	1,982	6.4	29	25,454	5.7	27,436
Sexual Abuse	2	259	0.8	3	2,944	0.7	3,203
Neglect	60	9,211	29.5	30	26,631	6.0	35,842
Emotional Maltreatment	21	3,227	10.4	24	20,808	4.7	24,035
Exposure to Domestic Violence	31	4,656	15.0	35	30,461	6.8	35,117
Total investigations involving substantiated maltreatment	100	15,273	49	100	88,025	19.8	103,298

Estimates- abor registered pop=309, 388; non-abor pop =4,757,845-309,388=4,448,457

Analyses are based upon a sample of 5,660 child maltreatment investigations with information about substantiation

Table 2b: Category of Substantiated Maltreatment in Canada in 2003 (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Physical Abuse	21	720	10	894	11	368	29	25,454	27,436
Sexual Abuse	(--)	(--)	2	178	(--)	(--)	3	2,944	3,202
Neglect	51	1,787	62	5,275	65	2,149	30	26,631	35,842
Emotional Maltreatment	27	944	17	1,423	26	860	24	20,808	24,035
Exposure to Domestic Violence	38	1,329	29	2,415	28	912	35	30,461	35,117
Total investigations involving substantiated maltreatment	51	3,478	51	8,496	55	3,299	47	88,025	103,298

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<.05$

Analysis is based upon a sample of 5,660 child maltreatment investigations with information about substantiation

Shake, Push, Grab Or Throw: include pulling or dragging a child as well as shaking an infant.

Hit With Hand: include slapping and spanking but not punching.

Punch, Kick, Or Bite: include as well any other hitting with other parts of the body (e.g.: elbow or head).

Hit With Object: includes hitting with a stick, a belt or other object, throwing an object at a child, but does not include stabbing with a knife.

Other Physical Abuse: Any other form of physical abuse including choking, strangling, stabbing, burning, shooting, poisoning, and the abusive use of restraints.

Table 3a describes the proportion of substantiated physical abuse cases indicating each of the five forms of physical abuse by Aboriginal status. As noted in the previous section, investigating workers could identify up to three types of maltreatment for each investigation from a list of twenty-five forms of maltreatment. Note that because a case could include more than one form of maltreatment the columns in **Tables 2a to 3f** add up to more than the total number of substantiated cases. Estimates are not presented when there are insufficient cases sampled to provide a reliable estimate. In such cases, two dashes (--) appear in the table cell.

Table 3a indicates that the proportion of substantiated investigations involving at least one form of physical abuse was highest for non-Aboriginal investigations (29%). The proportion of substantiated physical abuse cases that involved shaking, pushing, grabbing or throwing was highest for other Aboriginal (48%), compared to non-Aboriginal physical abuse investigations (23%). A higher percentage of substantiated physical abuse investigations for First Nations off reserve (57%) involved hitting with a hand compared to other Aboriginal and non-Aboriginal (47%), and First Nations on reserve (30%). First Nations off reserve indicated the highest proportion of substantiated physical abuse cases involving a punch, kick or bite, while non-Aboriginal substantiated physical abuse investigations involved a higher percentage involving hitting with an object. Other forms of physical abuse were noted most frequently in

Table 3a: Forms of Substantiated Physical Abuse (% of substantiated PA), (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Shake, Push, Grab Or Throw	44	314	33	296	48	175	23	5,947	6,732
Hit With Hand	30	218	57	506	47	173	47	11,878	12,775
Punch, Kick, Or Bite:	(--)	(--)	15	133	(--)	(--)	9	2,207	2,419
Hit With Object	(--)	(--)	16	143	(--)	(--)	22	5,615	5,930
Other Physical Abuse	21	152	18	161	(--)	(--)	13	3,305	3,631
At least One Form of Substantiated Physical Abuse*	21	720	10	894	11	368	29	25,454	27,436

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, p<.001

Analyses are based upon a sample of 1, 410 child maltreatment investigations with substantiated physical abuse

substantiated physical abuse investigations for First Nations on reserve.

Forms of Substantiated Sexual Abuse

It should be noted that the *CIS-2003* identified only cases reported to child welfare services; many cases of child sexual abuse that do not involve parents or relatives in the home are investigated only by the police, and child welfare services usually become involved in extra-familial sexual abuse cases only if there are concerns about the parents' ability to protect the child. The *CIS-2003* used eight forms to classify cases of sexual abuse:

Penetration: penile, digital or object penetration of vagina or anus.

Attempted Penetration: attempted penile, digital or object penetration of vagina or anus.

Oral Sex: oral contact with genitals by either perpetrator or by the child.

Fondling: touching or fondling of genitals for sexual purpose.

Sex Talk: verbal or written proposition, encouragement, or suggestion of a sexual nature (include face to face, phone, written and internet contact, as well as exposing the child to pornographic material).

Voyeurism: Included activities where the alleged perpetrator observes the child for the perpetrator's sexual gratification.

Exhibitionism: Included activities where the perpetrator is alleged to have exhibited himself/herself for his/her own sexual gratification.

Exploitation: Included situations where an adult sexually exploits a child for purposes of financial gain or other profit, including pornography and prostitution.

Table 3b describes the proportion of substantiated sexual abuse cases that involved each of the eight forms of sexual abuse by Aboriginal status. It is important to remember that estimates are not presented when there are insufficient cases sampled to provide a reliable estimate. In such cases, two dashes (--) appear in the table cell. The proportion of substantiated investigations involving at least

Table 3b: Forms of Substantiated Sexual Abuse (% of substantiated sexual abuse), (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Penetration	(--)	(--)	(--)	(--)	(--)	(--)	11	314	355
Attempted Penetration			(--)	(--)	(--)	(--)	4	130	144
Oral Sex			(--)	(--)			14	406	436
Fondling	(--)	(--)	86	153	(--)	(--)	66	1,958	2,177
Sex Talk			(--)	(--)	(--)	(--)	9	271	281
Voyeurism							(--)	(--)	24
Exhibitionism							8	251	251
Exploitation			(--)	(--)			8	236	269
At least One Form of Substantiated Sexual Abuse*	(--)	(--)	2	178	(--)	(--)	29	2,944	3,202

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<0.0$

Analyses are based upon a sample of 170 child maltreatment investigations with substantiated sexual abuse

one form of sexual abuse was highest for non-Aboriginal child investigations. Fondling was the form of sexual abuse indicated most frequently in substantiated sexual abuse investigations for all categories.

Forms of Substantiated Neglect

Child neglect includes situations in which children have suffered harm, or their safety or development has been endangered as a result of the caregiver's failure to provide for or protect them. Unlike abuse, which is usually incident-specific, neglect often involves chronic situations that are not as easily identified as specific incidents. Nevertheless, all provincial and territorial statutes include neglect or some type of reference to acts of omission, such as failure to supervise or protect, as grounds for investigating maltreatment. The *CIS-2003* examines eight forms of neglect:

Failure To Supervise - Physical Harm: The child suffered or was at substantial risk of suffering physical harm because of the caregiver's failure to supervise and protect the child adequately. Failure to supervise included situations in which a child was harmed or endangered as a result of a caregiver's actions (e.g. drunk driving with a child, or engaging in dangerous criminal activities with a child).

Failure To Supervise - Sexual Abuse: The child has been or was at substantial risk of being sexually molested or sexually exploited, and the caregiver knew or should have known of the possibility of sexual molestation and failed to protect the child adequately.

Permitting Criminal Behaviour: A child has committed a criminal offence (e.g. theft, vandalism or assault) with the encouragement of the child's caregiver, or because of the caregiver's failure or inability to supervise the child adequately.

Physical Neglect: The child has suffered or was at substantial risk of suffering physical harm caused by the caregiver(s)' failure to care and provide for the child adequately. This includes inadequate nutrition/clothing, and unhygienic dangerous living conditions. There must be evidence or suspicion that the caregiver is at least partially responsible for the situation.

Medical Neglect: The child required medical treatment to cure, prevent, or alleviate physical harm or suffering, and the child's caregiver did not provide, refused, or was unavailable or unable to consent to the treatment. This included dental services where funding was available.

Failure To Provide Psych. Treatment: The child was at substantial risk of suffering from emotional harm as demonstrated by severe anxiety, depression, withdrawal, self-destructive or aggressive behaviour, or a mental, emotional, or developmental condition that could seriously impair the child's development. The child's caregiver did not provide, or refused, or was unavailable or unable to consent to treatment to remedy or alleviate the harm. This category includes failing to provide treatment for school-related problems such as learning and behaviour problems, as well as treatment for infant development problems such as non-organic failure to thrive. Parents awaiting service were not included in this category.

Abandonment: The child's parent has died or was unable to exercise custodial rights and did not make adequate provisions for care and custody, or the child was in a placement and the caregiver refused or was unable to take custody.

Educational Neglect: Caregivers knowingly allowed chronic truancy (five or more days a month), or failed to enroll the child, or repeatedly kept the child at home. If the child had been experiencing mental, emotional, or developmental problems associated with school, and treatment had been offered but caregivers did not cooperate with treatment, the case was classified under failure to provide treatment as well.

Table 3c describes the proportion of substantiated neglect investigations that involved each of the eight forms of neglect by Aboriginal status. The proportion of substantiated investigations involving at least one form of neglect was higher for each of the three First Nations or other Aboriginal groups compared to non-Aboriginal. This ranged from 51% for First Nations on reserve, 62% for First Nations off reserve to 65% for other Aboriginal. Thirty percent of Non Aboriginal substantiated investigations involved at least one type of substantiated neglect.

Table 3c: Forms of Substantiated Neglect (% of substantiated neglect), (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Physical*	38	673	31	1,637	38	805	43	11,428	14,543
Sexual*	(--)	(--)	2	122	(--)	(--)	5	1,447	1,642
Physical Neglect*	45	811	36	1,882	53	1,142	35	9,263	13,098
Medical Neglect*	(--)	(--)	6	337	11	237	7	1,750	2,346
Failure to Provide Psych. Treatment			(--)	(--)	(--)	(--)	3	795	854
Behaviour*	(--)	(--)	6	303	(--)	(--)	2	574	1,000
Abandonment*	13	235	18	975	9	192	12	3,306	4,708
Educational Neglect*	8	139	11	585	30	636	7	1,829	3,189
At least One Form of Substantiated Neglect*	51	1,788	62	5,275	65	2,149	30	26,631	35,842

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<0.05$

Analyses are based upon a sample of 2,077 child maltreatment investigations with substantiated neglect

A higher proportion of non-Aboriginal investigations involving substantiated neglect indicated failure to supervise leading to physical harm or failure to supervise leading to sexual harm, compared to First Nations (on or off reserve) or other Aboriginal. In contrast, a higher proportion of substantiated neglect cases for First Nations (on or off reserve) and other Aboriginal indicated physical neglect or educational neglect.

Forms of Substantiated Emotional Maltreatment

Three forms of emotional maltreatment were designed to be tracked by the *CIS-2003*. A fourth form, exposure to non-intimate partner violence, was added after the start of the study to deal with the relatively large number of such investigations.

Emotional Abuse: The child has suffered or was at substantial risk of suffering from mental, emotional, or developmental problems caused by overtly hostile, punitive treatment, or habitual or extreme verbal abuse (threatening, belittling, etc.).[8]

Non-organic Failure To Thrive: A child under 3 has suffered a marked retardation or cessation of growth for which no organic reasons can be identified. Failure to thrive cases where inadequate nutrition was the identified cause were classified as physical neglect. Non-organic failure to thrive is generally considered to be a form of psychological maltreatment; it has been classified as a separate category because of its particular characteristics.

Emotional Neglect: The child has suffered or is at substantial risk of suffering from mental, emotional, or developmental problems caused by inadequate nurturance/affection. If treatment was offered but caregivers were not cooperation, cases were classified under failure to provide treatment as well.

Exposure To Violence Between Adults Other Than Caregivers: A child has been a witness to violence occurring between adults in the child's home environment (for example the child's father and an acquaintance), excluding exposure to domestic violence.

Table 3d presents the proportion of substantiated emotional maltreatment cases that involved each of the four forms of emotional maltreatment by Aboriginal status. The proportion of substantiated investigations involving at least one form of emotional maltreatment was fairly

similar for First Nations on reserve (27%), First Nations off reserve (17%), other Aboriginal (26%), and non-Aboriginal groups (24%). A higher percentage of substantiated emotional maltreatment investigations for non-Aboriginal children (74%) noted emotional abuse, while First Nations on reserve (60%) noted a higher proportion of emotional neglect.

Substantiated Exposure to Domestic Violence

Although exposure to domestic violence is often categorized as a form of emotional maltreatment, most Canadian jurisdictions have developed policies and practices specific to exposure to domestic violence. To facilitate the analysis of this rapidly expanding form of maltreatment it is described in this report as its own category.

Exposed To Domestic Violence: A child has been a witness to violence occurring between the caregivers (or a caregiver and his/her partner). This would include situations where the child indirectly witnessed the violence (e.g. saw the physical injuries on his/her caregiver the next day or overheard the violence).

Table 3e describes the proportion of all substantiated investigations that indicated exposure to domestic violence. The proportion of substantiated investigations involving at exposure to domestic violence was highest for First Nations on reserve (38%), followed by non-Aboriginal (35%), First Nations off reserve (29%) and other Aboriginal (28%).

Single and Multiple Forms of Substantiated Child Maltreatment

Table 3f presents the number of substantiated investigations involving single and multiple forms of maltreatment. Because most jurisdictions currently track single forms of maltreatment, it is likely that the investigating workers who completed ***CIS-2003*** forms were unaccustomed to classifying cases under more than one form, and that the ***CIS-2003*** may therefore underestimate the actual incidence of multiple maltreatment.

The proportion of substantiated maltreatment investigations indicating a single substantiated form was highest for First Nations off reserve (82%) followed by non-Aboriginal (81%), other

Table 3d: Forms of Substantiated Emotional Maltreatment (% of substantiated emotional maltreatment), (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Emotional Abuse	63	597	64	909	65	558	74	15,457	17,521
Non-organic Failure to Thrive							<1	124	124
Emotional Neglect*	60	567	42	594	32	273	22	4,660	6,094
Exposure to Non-intimate Violence*	(--)	(--)	(--)	(--)	(--)	(--)	7	1,542	1,617
At least One Form of Substantiated Emotional Maltreatment*	27	944	17	1,423	26	860	24	20,808	24,035

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<0.001$

Analyses are based upon a sample of 1, 385 child maltreatment investigations with substantiated neglect

Table 3e: Substantiated Exposure to Domestic Violence (% of substantiated maltreatment), (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Exposure to Domestic Violence*	38	1,329	29	2,415	28	912	35	30,461	35,117

Canadian Study of Reported Child Abuse and Neglect 2003 * X^2, p<.05

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

Table 3f: Single and Multiple Forms of Substantiated Child Maltreatment, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Single Forms of Substantiated Maltreatment									
Physical Abuse Only*	8	263	7	606	7	234	19	17,114	18,217
Sexual Abuse Only	(--)	(--)	2	153	(--)	(--)	3	2,298	2,517
Neglect Only*	29	1,001	48	4,088	44	1,468	22	18,977	25,554
Emotional Maltreatment Only*	6	205	7	555	5	167	12	10,568	11,495
Exposure to Domestic Violence Only*	24	825	19	1,597	19	616	26	22,617	25,655
One Substantiated Form*	67	2,335	82	6,998	76	2,510	81	71,594	83,437
Multiple Forms of Substantiated Maltreatment [1]									
Physical Abuse & Neglect	6	198	2	184	(--)	(--)	2	1,398	1,828
Physical Abuse & Emotional Abuse*	(--)	(--)	(--)	(--)	(--)	(--)	4	3,182	3,278
Physical Abuse & Exposure to Domestic Violence*	(--)	(--)			(--)	(--)	3	2,249	2,274
Neglect & Emotional Maltreatment*	10	366	5	421	12	382	3	2,774	3,943
Neglect & Exposure to Domestic Violence*	4	128	5	402	(--)	(--)	2	1,933	2,484
Emotional Maltreatment & Exposure to Domestic Violence	5	189	3	234	(--)	(--)	3	2,483	2,978
More than One Substantiated Form of Maltreatment*	33	1,143	18	1,497	24	789	19	16,432	19,861

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, p<.01

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

[1] *forms combined with sexual abuse not included since Ns very small*

Aboriginal (76%), and First Nations on reserve (67%). The percentage of substantiated child investigations involving substantiated physical abuse only, sexual abuse only and emotional maltreatment only was higher for non-Aboriginal child investigations than for First Nations or other Aboriginal child investigations. The proportion of substantiated cases involving neglect only was consistently higher for the three First Nations (on or off reserve) and other Aboriginal groups.

Multiple forms of substantiated maltreatment was noted in 33% of substantiated investigations for First Nations on reserve, 24% of other Aboriginal, 19% of non-Aboriginal, and 18% of First Nations off reserve. The percentage of substantiated cases involving multiple forms of maltreatment was fairly low for all groups.

Child Age in Substantiated Maltreatment Investigations

Table 4 presents child age categories in substantiated child maltreatment investigations by Aboriginal status. The proportion of substantiated investigations involving children less than one year of age was highest for other Aboriginal (18%). In contrast, only seven percent of substantiated investigations for the First Nations on reserve category involved children less than one year of age. Fifteen percent of substantiated investigations involving First Nations on reserve children concerned children 2-3 years of age, while 10 percent of substantiated investigations involving non-Aboriginal children concerned children 2-3 years of age.

Child Risk Factors For Substantiated Child Maltreatment Investigations

Child functioning was documented on the basis of a checklist of problems that child welfare workers were likely to be aware of as a result of their investigation. The child functioning checklist (see Maltreatment Assessment Form) was developed in consultation with child welfare workers and researchers to reflect the types of concerns that may be identified during an investigation. The checklist is not a validated measurement instrument for which population norms have been established.[9] The checklist documents only problems that child welfare workers became aware of during their investigation and therefore undercounts the occurrence of child functioning problems.[10] Nevertheless, it provides an important estimate of the types of concerns that are identified during child maltreatment investigations.

Table 4: Child Age in Substantiated Maltreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
0-1 Years	7	229	16	1,335	18	584	11	9,479	11,627
2-3 Years	15	529	14	1,193	12	388	10	9,072	11,182
4-7 Years	21	739	25	2,118	24	802	24	21,392	25,052
8-11 Years	32	1,099	25	2,171	25	827	29	25,423	29,520
12-15 Years	25	882	20	1,679	21	698	26	22,659	25,918
Total Substantiated Maltreatment Investigations	100	3,478	100	8,496	100	3,299	100	88,025	103,298

Canadian Study of Reported Child Abuse and Neglect 2003 $X^2=39.13$, $p<0.001$

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

Investigating workers were asked to indicate problems that had been confirmed by a formal diagnosis and/or directly observed, as well as issues that they suspected were problems but could not fully verify at the time of the investigation.[11] The six-month period before the investigation was used as a reference point where applicable. Child functioning classifications that reflect physical, emotional, cognitive, and behavioural issues were documented with a checklist that included the following categories:

Depression Or Anxiety: Feelings of depression or anxiety that persist for most of every day for two weeks or longer, and interfere with the child's ability to manage at home and at school.

ADD/ADHD: Attention Deficit Disorder/ Attention Deficit Hyperactivity Disorder included: distractibility; impulsivity; hyperactivity. These behaviours are very noticeable, occur over a long period of time in many situations, and are troublesome to others.

Negative Peer Involvement: Child has been involved in high-risk peer activities, such as gang activities, graffiti or vandalism.

Alcohol Abuse: problematic consumption of alcohol (consider age, frequency and severity).

Drug/solvent Abuse: included prescription drugs, illegal drugs and solvents.

Self-harming Behaviour: Child has engaged in high-risk or life-threatening behaviour such as suicide attempts, physical mutilation or cutting.

Violence Towards Others: Child has displayed aggression and violence toward other children or adults.

Running (One Incident): Child has run away from home (or other residence) on one occasion, for at least one overnight period.

Running (Multiple Incidents): Child has run away from home (or other residence) on more than one occasion for at least one overnight period.

Inappropriate Sexual Behaviour: Child has been involved in inappropriate sexual behaviour.

Other Emotional Or Behvaioural Problem: The child has significant emotional or behavioural problems other than those describes above.

Learning Disability: A child has identified learning deficits in one or more areas of mental functioning (e.g. language usage, numbers, speech, reading, word comprehension).

Specialized Education Services: Child has been involved in special education program for learning disability, special needs, or behaviour problems.

Irregular School Attendance: Child has shown irregular attendance and truancy (more than 5 days/month).

Developmental Delay: Child has delayed intellectual development. Typically it is diagnosed when a child does not reach his/her developmental milestones at expected times. It includes speech and language development, fine and gross motor skills and or personal and social skills.

Physical Disability: The child has a long-lasting condition that substantially limits one or more basic physical activities such as walking, climbing stairs, reaching, lifting or carrying. This includes sensory disability conditions such as blindness, deafness or a severe vision or hearing impairment that noticeably affects activities of daily living.

Substance Abuse Related Birth Defect: Child has a diagnosis or indication of birth defect(s) related to substance abuse by the biological parent (e.g. Fetal Alcohol Syndrome (FAS)/Fetal Alcohol Effect (FAE), cocaine addiction or solvent abuse).

Positive Toxicology At Birth: The child, at birth, tests positive for the presence of drugs or alcohol.

Other Health Condition: Child has ongoing physical health condition (e.g. chronic disease, and frequent hospitalization).

Psychiatric Disorder: Child has diagnosis of psychiatric disorder by a psychiatrist (e.g. conduct disorder, anxiety disorder).

Youth Criminal Justice Act Involvement: Child has been involved in charges, incarceration, or alternative measures with the youth justice system.

Other: Any other child or family focused referral

Table 5 presents child functioning characteristics that affect the physical, emotional, and cognitive health of children for substantiated child maltreatment investigations. Overall, for substantiated maltreatment investigations, First

Table 5: Child Risk Factors for Substantiated Child Maltreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal	
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations
Depression/Anxiety*	24	834	13	1,116	16	545	18	15,473
ADD/ADHD*	8	263	14	1,156	8	260	13	11,448
Negative Peer Involvement*	26	904	16	1,387	12	403	12	11,021
Alcohol Abuse*	11	376	8	656	6	189	3	2,811
Drug/Solvent Abuse*	11	378	11	919	6	208	3	3,116
Self-Harm Behaviour	5	170	4	332	6	185	4	3,852
Violence Toward Others	11	397	12	1,011	8	254	11	10,058
Running Away Once	(--)	(--)	2	173	(--)	(--)	4	3,403
Running Away Multiple Times*	7	244	5	426	6	213	3	2,748
Inappropriate Sexual Behaviour	4	149	6	491	4	126	5	4,235
Other Beh/Emot Problems*	42	1,461	26	2,181	18	582	27	23,538
Learning Disability	20	696	18	1,510	15	486	15	12,969
Special Education	13	436	10	853	11	378	12	10,415
Irregular School Attendance*	31	1,069	23	1,949	28	916	11	9,719
Developmental Delay*	17	584	13	1,120	12	408	9	8,290
Physical Disability	(--)	(--)	1	123	(--)	(--)	2	1,824
Substance Abuse Birth Defects*	9	312	8	696	6	197	2	1,671
Positive Toxicology at Birth*	(--)	(--)	2	189	5	163	1	743
Other Health Conditions	(--)	(--)	5	432	4	117	4	3,871
Psychiatric Disorder	4	140	3	263	(--)	(--)	4	3,464
YOA Involvement*	(--)	(--)	4	315	6	200	2	1,695

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<0.05$

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

Nations on reserve children, First Nations off reserve children and other Aboriginal children had higher rates of child functioning issues than substantiated investigations involving non-Aboriginal children.

Twenty-four percent of substantiated investigations involving First Nations on reserve children noted depression or anxiety, 18% of substantiated investigations involving non-Aboriginal children noted depression or anxiety, 16% of substantiated investigations of other Aboriginal children noted depression or anxiety and 13% of substantiated investigations involving First Nation off reserve children noted depression or anxiety.

Forty-two percent of substantiated investigations involving First Nations on reserve children noted other behavioural or emotional problems. In comparison, 18% of substantiated investigations for other Aboriginal children noted other behavioural or emotional problems. Irregular school attendance was noted in 31 % of substantiated investigations involving First Nations on reserve children, 28 % involving other Aboriginal children and 23 % involving First Nations off reserve children. In comparison, 11 % of substantiated investigations involving non-Aboriginal children noted irregular school attendance. Thirty-one percent of substantiated investigations involving First Nations on reserve children noted a developmental delay. Eleven percent of substantiated investigations involving non-Aboriginal children noted a developmental delay.

Nine percent of substantiated investigations involving First Nations on reserve children, 8 percent of First Nations off reserve children and 6 percent of other Aboriginal noted substance abuse related birth defects. In comparison, 2 percent of substantiated investigations involving non-aboriginal children noted substance abuse related birth defects. Five percent of substantiated investigations involving other Aboriginal children noted positive toxicology at birth compared to 2% First Nations off reserve children, and 1% non-Aboriginal children).

Physical and Emotional Harm in Substantiated Child Maltreatment Investigations

The ***CIS-2003*** tracked physical harm suspected or known to be caused by the investigated maltreatment. Information on physical harm was collected using two scales, one describing severity of harm as measured by medical treatment need and one describing the nature of harm.

Information on emotional harm was collected using a series of questions asking child welfare workers to describe emotional harm that had occurred after the maltreatment incidents. Workers were asked to include changes in the child's development (regression, withdrawal), self-regulation (sleep patterns, elimination), or emotions (child crying, clinging, or anxious) that they had observed or that had been described to them. These maltreatment-specific descriptions of emotional harm are not to be confused with the general child functioning ratings noted in **Table 5**.

Table 6 presents physical and emotional harm in substantiated child maltreatment investigations by Aboriginal group. At least one type of physical harm was noted in 10% of substantiated investigations involving non-Aboriginal children. For Aboriginal children, physical harm was note in 9 % of substantiated investigations involving First Nations off reserve children, 6 % involving First Nations on Reserve children and 5% involving other Aboriginal children.

First Nations on reserve children had the highest rates of noted emotional harm. Thirty-three percent of substantiated investigations involving First Nations on reserve children noted emotional harm during the course of the maltreatment investigations. Rates of emotional harm were lower for other groups. Twenty-one percent of substantiated investigations involving First Nations off reserve children noted emotional harm and 14% of substantiated investigations involving other Aboriginal children noted emotional harm. In 20% of substantiated investigations involving non-Aboriginal children emotional harm was noted.

Table 6: Physical and Emotional Harm in Substantiated Child Maltreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
At least one physical harm*	6	222	9	794	5	151	10	9,056	10,223
Any emotional harm*	33	1,141	21	1,797	14	447	20	17,574	20,959

Canadian Study of Reported Child Abuse and Neglect 2003 * X^2, $p<.05$

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

Family Risk Factors for Substantiated Child Maltreatment Investigations

Table 7 presents information on a number of family risk factors in substantiated child maltreatment investigations, including single parent status, housing accommodation, housing safety and overcrowding, source of income and recent family moves.

The *CIS-2003* gathered information on up to two of the child's parents or caregivers.[12] For each listed caregiver, investigating workers were asked to choose the category that best described the relationship between the caregiver and the children in the home. If a caregiver was a biological parent to one child and a step-parent to another child in the family, workers were asked to use "step-parent" to describe that caregiver.[13] If recent household changes had occurred, investigating workers were asked to describe the situation at the time the referral was made.

Investigating workers were asked to select the housing accommodation category that best described the investigated child's household living situation. The types of housing included:

Own Home: A purchased house, condominium, or townhouse.

Rental Accommodation: A private rental house, townhouse or apartment.

Public Housing: A rental unit in a public housing complex (i.e. rent-subsidized, government-owned housing), a house, townhouse or apartment on a military base, or band housing.

Shelter/Hotel: A homeless or family shelter, SRO hotel (single room occupancy), or motel accommodation.

Unknown: Housing accommodation was unknown.

Other: Any other form of shelter.

In addition to housing type, investigating workers were asked to indicate whether the investigated child lived in unsafe housing conditions where children were at risk of injury or impairment from their living situation (e.g. broken windows, insufficient heat, parents and children sharing single room). Workers also noted if the family had moves within the past year.

Investigating workers were requested to choose the income source that best described the primary source of the household income. Income source was designated by investigating workers in terms of five possible classifications:

Full Time Employment: A caregiver is employed in a permanent, full-time position.

Employment Insurance (EI)/Social Assistance/ Other Benefit: Family income is derived primarily from employment insurance, social assistance or other benefits (e.g. long-term disability, pension, or child support).

Table 7 indicates that substantiated investigations involving First Nations off reserve children noted the highest proportion of single parents (53%). Substantiated investigations involving First Nations on reserve children noted the lowest proportion of single parents (38%).

Aboriginal families had the lowest rates of home ownership. In 14% of substantiated investigations involving First Nations on reserve children workers indicated that the family owned their own home. Nine percent of substantiated investigations involving First Nations off reserve children noted home ownership and 7% of investigations involving other Aboriginal children noted home ownership. In comparison, 36% of substantiated investigations involving non-Aboriginal children noted home ownership.

Thirty-two percent of substantiated investigations involving other Aboriginal children noted unsafe housing conditions, compared to 20% of investigations involving First Nations on reserve children and 21% involving First Nations off reserve children. In comparison, 7% of substantiated investigations involving non-Aboriginal children noted unsafe housing conditions.

Overcrowding was noted as an issue in 24% of substantiated investigations involving First Nations on reserve children, in 25% of substantiated investigations involving other Aboriginal children and in 14% of substantiated investigations involving First Nations off reserve children. In comparison, 7% of substantiated investigations involving non-Aboriginal children noted overcrowding.

Aboriginal caregivers were less likely to have full time employment than non-Aboriginal caregivers. Twenty-six percent of substantiated investigations involving First Nations on reserve children noted full time employment, 27 percent of substantiated investigations involving First Nations off reserve children noted full time employment and 22 % of substantiated investigations involving other Aboriginal children noted full time-employment. In comparison, 62% of substantiated investigations involving non-Aboriginal caregiver noted full time employment.

Table 7: Family Risk Factors for Substantiated Child Maltreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Single Parent Status*	38	1,331	53	4,517	45	1,501	43	37,820	45,169
Housing Accomodations*									
Own Home	14	496	9	746	7	241	36	31,532	33,015
Public Housing	54	1,859	24	2,018	24	790	9	8,338	13,005
Unsafe Housing *	20	697	21	1,797	32	1,089	7	5,915	9,498
Over crowding *	24	843	14	1,176	25	825	7	5,907	8,751
Primary Source of Income *									
Full-time employment	26	914	27	2,315	22	720	62	54,789	58,738
Unemployment/ other benefits	30	1,043	53	4,534	48	1,596	20	17,731	24,904
> 1 move in prior year* (if known)	14	390	31	1,885	44	965	12	8,245	11,485

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<0.001$

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

Substantiated investigations involving other Aboriginal children had the highest proportion of moves within the past year (45%), followed by investigations involving First Nations off reserve children (31%).

Caregiver Risk Factors for Substantiated Child Maltreatment Investigations

Concerns related to caregiver functioning and family stressors were examined by investigating workers using a checklist of 10 items that were asked about each caregiver. Where applicable, the reference point for identifying concerns about caregiver functioning was the previous six months.[14] The checklist included

Alcohol Abuse: the use of alcohol poses a problem for the household.

Drug/solvent Abuse: at least one caregiver abuses prescription drugs, illegal drugs or solvents.

Criminal Activity: At least one caregiver is absent due to incarceration, or is involved in criminal activity (drug dealing, theft or prostitution). This did not include a criminal history for domestic violence.

Cognitive Impairment: The cognitive ability of at least one caregiver is known to or suspected to have an impact on the quality of care giving provided in the household.

Mental Health Issues: At least one caregiver is known or suspected to have mental health problems.

Physical Health Issues: At least one caregiver is known or suspected to have a chronic illness, frequent hospitalizations, or a physical disability.

Few Social Supports: At least one caregiver is known or suspected to be socially isolated or lacking in social supports.

Maltreated As A Child: Either caregiver is known or suspected to have suffered maltreatment as a child.

Victim Of Domestic Violence: during the past six months the caregiver was a victim of domestic violence including physical, sexual or verbal assault.

Other: Any other issue/concern describing caregiver functioning.

Table 8a and b represent the caregiver risk factors that the worker noted for the female and male caregiver respectively. The average number of female caregiver risk factors was highest for substantiated investigations involving First Nations off reserve children (3.4 average risk factors) and First Nations on and off reserve children for male caregivers (2.1 average risk factors). Substantiated investigations involving non- Aboriginal children were lowest for both female (1.8 average risk factors) and male caregivers (0.9 risk factors).

High rates of alcohol abuse for female caregivers were noted in substantiated investigations involving First Nations off reserve children (58%), First Nations on reserve (44%) and other Aboriginals (43%). High rates of alcohol abuse in male caregivers were noted in investigations involving First Nations children on reserve (42%), other Aboriginal (33%) and First Nations off reserve (31%).

Few social supports were noted as significant risk factors in both female and male caregivers. Sixty- one percent of female caregivers involving other Aboriginal children noted few social supports followed by First Nations off reserve (50%) and First Nations on reserve (49%). For male caregivers, few social supports were noted in investigations of First Nations children on reserve (23%), other Aboriginal (22%) and First Nations off reserve (19%).

Table 8a also indicates 64% of investigations involving female caregivers of First Nations children on reserve were victims of domestic violence, 59% of First Nations off reserve, 49% other Aboriginal and 47% for non- Aboriginal child investigations.

Recurrence and Duration of Maltreatment in Substantiated Child Maltreatment Investigations

Table 9 presents information on the recurrence and duration of maltreatment in substantiated

child maltreatment investigations by Aboriginal group. Eighty percent of substantiated investigations involving First Nations on reserve children noted that the family had been previously identified to child welfare services. Eight-four percent of substantiated investigations involving First Nations off reserve children noted a previous family opening and 75% of investigations involving other Aboriginal children noted a previous family opening. Fifty-nine percent of substantiated investigations involving non-Aboriginal children noted a previous child welfare opening.

Substantiated investigations involving First Nations on reserve children had the highest proportion of cases involving the duration of the maltreatment lasting more than 6 months (56%). Forty-one percent of substantiated investigations involving non-Aboriginal children noted maltreatment lasting more than 6 months.

Investigation Outcomes for Substantiated Child Maltreatment Investigations

Table 10 presents the short-term investigation outcomes related to whether the case remains open for ongoing services, an application is made to child welfare court, there was a police investigation and charges laid. Investigating workers were asked whether the investigated case would remain open for ongoing child welfare services after the initial investigation. Workers completed these questions on the basis of the information available at that time or upon completion of the intake investigation.

Application to child welfare court can be made for an order of supervision (child remaining in the home), temporary wardship (for a set time period), or permanent wardship. The ***CIS-2003*** tracked

Table 8a: Female Caregiver Risk Factors for Substantiated Child Maltreatment Investigations (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Alcohol Abuse *	44	1,529	58	4,948	43	1,406	11	9,849	17,732
Drug/Solvent Abuse *	27	931	35	2,954	40	1,310	10	8,377	13,572
Criminal Activity *	10	338	19	1,642	21	691	6	4,904	7,575
Cognitive Impairment *	20	714	15	1,283	36	1,194	8	6,806	9,997
Mental Health Issues	34	1,181	25	2,124	34	1,056	25	21,882	26,243
Physical Health Issues	10	332	15	1,264	8	263	10	8,440	10,299
Few Social Supports *	49	1,710	50	4,265	61	2,016	36	31,623	39,614
Maltreated as Child *	40	1,391	37	3,179	51	1,673	21	18,155	24,398
Victim of Domestic Violence*	64	2,233	59	5,005	49	1,626	47	41,622	50,486
Average # of Caregiver Risk Factors**		3.0		3.4		3.3		1.8	
Total Substantiated Investigations		3,478		8,496		3,299		88,025	103,298

Canadian Study of Reported Child Abuse and Neglect 2003 *X2, p<0.01 ** ANOVA: (3, 5656)=193.1, p<.001

Analyses are based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatme

Table 8b: Male Caregiver Risk Factors for Substantiated Child Maltreatment Investigations (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Alcohol Abuse *	42	1, 448	31	2,657	33	1,078	14	12,115	17,298
Drug/Solvent Abuse *	34	1,165	20	1,696	24	789	7	6,389	10,039
Criminal Activity *	21	745	17	1,445	23	759	7	6,460	9,409
Cognitive Impairment *	12	428	9	790	3	97	3	2,967	4,282
Mental Health Issues	13	441	9	784	14	461	10	8,844	10,530
Physical Health Issues	2	67	4	340	5	154	5	4,138	4,699
Few Social Supports *	23	790	19	1,609	22	721	18	16,163	19,283
Maltreated as Child *	17	602	14	1,185	13	430	9	8,086	10,303
Victim of Domestic Violence*	11	392	8	715	14	462	7	6,287	7,856
Average # of Caregiver Risk Factors**		2.1		2.1		2.0		0.9	
Total Substantiated Investigations		3,478		8,496		3,299		88,025	103,298

Canadian Study of Reported Child Abuse and Neglect 2003 *X2, p≤0.01 ** ANOVA: F(3, 5656)=128.3, p<.001

Analyses are based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatme

Table 9: Recurrence and Duration of Maltreatment in Substantiated Child Malreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Previous Family Opening* (if known)	80	2,676	84	6,872	75	2,419	59	51,622	63,629
Previous Subst Child Invest (if known)	47	1,564	40	3,290	33	746	29	24,629	30,229
Duration of Maltreatment* (if known)									
Single Incident	29	790	37	2,614	22	531	39	28,738	32,673
Multiple Incident < 6 months	15	412	19	1,356	45	1,075	20	14,950	17,793
Multiple Incident > 6 months	56	1,551	44	3,173	33	783	41	30,820	36,327

Canadian Study of Reported Child Abuse and Neglect 2003 $X^{2,}$ p<0.001

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

the number of applications made or being considered during the initial investigation, but did not track the types of applications. Workers were also asked to report on whether or not they had made a referral to a mediation or alternative response. Because applications may have been made at a point following the *CIS-2003* study period, the *CIS-2003* court involvement figures should be treated as underestimates of the true rate of court involvement. Court status was tracked in terms of three possible worker responses:

Application Made: An application to child welfare court was submitted.

Application Considered: The child welfare worker was considering whether or not to submit an application to child welfare court.

No Application Considered: Court involvement was not considered.

In many jurisdictions in Canada there are detailed protocols between child welfare and police services, resulting in rising levels of co-operation. This co-operation includes cases of physical and sexual abuse as well as cases of domestic violence. Most jurisdictions require police to report adult domestic violence cases to the child welfare authorities if children are living in the family. The CIS–2003 captured information about police involvement in adult domestic violence cases as well as in all other child maltreatment investigations.

As with the other interventions during investigations described in this chapter, the *CIS-2003* tracked only events that occurred during the initial child welfare investigation; it is therefore possible that police decided to lay charges or became involved in some cases after the *CIS-2003* information forms had been completed. It should be noted further that the police also investigate many non-familial child maltreatment cases that do not involve child welfare services.15

As illustrated in **Table 10**, 68% of substantiated investigations involving First Nations on reserve children received ongoing services at the conclusion of the child maltreatment investigation. In comparison, 41 percent of substantiated investigations involving non-Aboriginal children received ongoing services.

Substantiated investigations involving aboriginal families had the highest rates of child welfare court application. In thirteen percent of substantiated investigations involving both First Nations off reserve children and other Aboriginal children an application to child welfare court was made. In ten percent of substantiated investigations involving First Nations on reserve children an application to child welfare court was made and in 6 percent of investigations involving non-Aboriginal children an application to child welfare court was made.

Placement for Substantiated Child Maltreatment Investigations

Admissions to out-of-home care at any time during the investigation were tracked. If there were multiple placements, workers were asked to indicate the setting where the child had spent the most time. The following placement classifications were used:

No Placement Required: No placement was required following the investigation.

Placement Is Being Considered: At this point of the investigation, an out-of home placement is still being considered.

Informal Kinship Care: An informal placement has been arranged within the family support network (kinship care, extended family, traditional care), the child welfare authority does not have temporary custody.

Kinship Foster Care: A formal placement has been arranged within the family support network (kinship care, extended family, customary care), the child welfare authority has temporary or full custody and is paying for the placement.

Other Family Foster Care: Includes any family based care, including foster homes, specialized treatment foster homes, and assessment homes.

Group Home Placement: An out-of-home placement required in a structured group living setting.

Residential/Secure Treatment: Placement required in a therapeutic residential treatment centre to address the needs of the child.

Table 10: Physical and Emotional Harm in Substantiated Child Maltreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Case to stay open for ongoing services*	68	2,378	59	5,014	69	2,284	41	36,208	45,884
Child welfare court application*	10	333	13	1,068	13	429	6	5,430	7,260
Police Investigation	17	604	18	1,567	17	543	19	16,710	19,424
Charges Laid	4	125	4	356	(--)	(--)	5	4,448	4,963

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<0.001$

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

Table 11 presents information on the placement decisions that occurred at the end of the child protection investigation. Placement was considered in 8% of substantiated investigations involving First Nations on reserve children, compared to 3% of investigations involving First nations off reserve children, 3% of investigations involving other Aboriginal children and 4% of investigations involving non-Aboriginal children. Informal kinship care was noted in 17% of substantiated investigations involving First Nations on reserve children. Other Aboriginal children had the highest rate of informal kinship care (22% of substantiated investigations). In comparison, for substantiated investigations involving non-Aboriginal children, 4% resulted in informal kinship care. Seven percent of substantiated investigations involving First Nations on reserve children resulted in kinship care, compared to 4% involving First Nations off reserve children, 3% other Aboriginal children and 1% non-Aboriginal Children. Sixteen percent of substantiated investigations involving other Aboriginal children resulted in other family foster care compared to 4% for First Nations on reserve children, 7 percent First Nations off reserve children and 4% non-Aboriginal children.

Referral Sources for Substantiated Child Maltreatment Investigations

Each independent contact with the child welfare agency or office regarding a child/children or family was counted as a separate referral. The person who actually contacted the child welfare agency/office was identified as the referral source. For example, if a child disclosed an incident of abuse to a schoolteacher, who made a report to child welfare services, the school was counted as a referral source. However, if both the schoolteacher and the child's parent called, both would be counted as referral sources.

The Maltreatment Assessment Form included 18 pre-coded referral source categories and an open "other" category. Referral categories were collapsed into professionals, family, relatives or acquaintances and other sources of referral.

Non-Professional Referral Sources:

Parent: This includes parents involved as a caregiver to the reported child, as well as non-custodial parents.

Child: A self-referral by any child listed on the Intake Face Sheet of the ***CIS-2003*** Maltreatment Assessment Form.

Relative: Any relative of the child in question. Workers were asked to code "other" for situations in which a child was living with a foster parent and a relative of the foster parent reported maltreatment.

Neighbour/Friend: This category includes any neighbour or friend of the children or his/her family.

Table 11: Placement for Substantiated Child Maltreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Out-of-home Placement*									
No Placement Required	60	2,082	76	6,423	54	1,761	86	75,466	85,731
Placement Considered	8	295	3	272	(--)	(--)	4	3,323	3,983
Informal Kinship Care	17	587	5	432	22	732	4	3,498	5,249
Kinship Foster Care	7	248	4	345	(--)	(--)	1	593	1,275
Other Family Foster Care	4	152	7	586	16	529	4	3,709	4,976
Group Home	(--)	(--)	5	403	(--)	(--)	1	866	1,410
Residential/ Secure Treatment	(--)	(--)	(--)	(--)	(--)	(--)	1	497	602
Any Child Welfare Placement*	15	514	16	1,368		713	6	5,668	8,263

Canadian Study of Reported Child Abuse and Neglect 2003 *X^2, $p<0.001$

Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment

Other Referral Source: Any other source of referral.

Professional Referral Sources:

Community Agencies: This includes social assistance worker (involved with the household), crisis service/shelter worker (includes any shelter or crisis services worker) for domestic violence or homelessness, community recreation centre staff (refers to any person from a recreation or community activity programs), day care centre staff (refers to a childcare or day care provider), and community agency staff.

Health Professional: This includes hospital referrals that originate from a hospital made by either a doctor, nurse or social worker rather than a family physician's office, public health nurse (nurses involved in services such as family support, family visitation programs and community medical outreach), and physician (any family physician with a single or ongoing contact with the child and/or family).

School: Any school personnel (teacher, principal, teacher's aide etc.)

Mental Health Professional/agency: Includes family service agencies, mental health centres (other than hospital psychiatric wards), and private mental health practitioners (psychologists, social workers, other therapists) working outside of a school/hospital/child welfare/Youth Justice Act setting.

Other Child Welfare Services: Includes referrals from mandated Child Welfare service providers from other jurisdictions or provinces.

Police: Any member of a Police Force, including municipal, provincial/territorial or RCMP.

Table 12: Referral Sources for Substantiated Child Maltreatment Investigations, (Quebec Excluded)

	First Nations On Reserve		First Nations Off Reserve		Other Aboriginal		Non-Aboriginal		Total
	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	%	# of Child Investigations	
Professionals	54	1,879	59	4,978	75	2,474	73	64,542	73,873
Family, Relatives or Acquaintances	38	1,305	23	1,989	23	764	19	16,851	20,909
Other Referral	8	294	18	1,528	(--)	(--)	8	6,633	8,516
Total Substantiated Investigations	100	3,478	100	8,495	100	3,299	100	88,025	103,298
Canadian Study of Reported Child Abuse and Neglect 2003						X^2=115.2, p<0.001			
Analysis is based upon a sample of 5,660 child maltreatment investigations with substantiated maltreatment									

Table 12 presents information on the referral sources for substantiated child maltreatment investigations by Aboriginal group. Substantiated investigations for First Nations on reserve children had the lowest rate of referral by professionals (54%), compared to 59% for First Nations off reserve children, 75% for other Aboriginal children and 73% for non-Aboriginal children. Conversely, substantiated investigations for First Nations on reserve children had the highest rates of referrals from family, relatives or acquaintances, 38%, compared to 23% for First Nations off reserve children, 23% for other Aboriginal children and 19% for non-Aboriginal children.

Conclusions

A number of striking differences emerge from this preliminary comparative analysis of child welfare investigations of Aboriginal and non-Aboriginal children. From the very outset, Aboriginal children are more than twice as likely to be investigated compared to non-aboriginal children. Once investigated, cases involving Aboriginal children are more likely to be substantiated, more likely to require on-going child welfare services, more than twice as likely to be placed in out of home care, and more likely to be brought to child welfare court. The profiles of Aboriginal families differ dramatically from the profile of non-Aboriginal families. Aboriginal cases predominantly involve situations of neglect where poverty, inadequate housing and parent substance abuse are a toxic combination of risk factors. Surprisingly, fewer differences were noted at the level of the children themselves.

The most systematic pattern to emerge from this first analysis highlights the differences between Aboriginal and non-Aboriginal children. It would be helpful to discuss with Aboriginal service providers any on/off-reserve differences that have not been highlighted by this statistical analysis.

Multivariate analyses controlling for some of the differences between Aboriginal and non-Aboriginal families should be undertaken to better understand the factors underlying the differences in service response. Regardless of these possible explanations, it is apparent that one should expect the cost of providing services to Aboriginal children to be significantly higher given that these cases involve a significantly higher rate of intervention at every point of contact.

(Footnotes)

1 Québec is excluded from the estimates in this report because of differences in the way data were collected in Québec.

2 A list of 327 provincial and territorial child welfare service areas (CWSAs) was drawn up on the basis of information received from each province and territory. A similar search developed a list of Aboriginal agencies providing child protection services. Eight Aboriginal sites participated in the study. CWSAs varied greatly in size. For example, three agencies made up one CWSA for the City of Toronto, with a total of 11 offices.

3 Due to later recruitment 5 sites collected data from November 1, 2003 – January 31, 2004. Quebec used two different data collection periods to create the sample of three months.

4 Nico Trocmé, Barbara Fallon, Bruce MacLaurin, Joanne Daciuk, Caroline Felstiner, Tara Black, Cindy Blackstock, Ken Barter, Daniel Turcotte, Richard Cloutier, Canadian incidence study of reported child abuse and neglect, CIS-2003: Major Findings Report. Ottawa: Public Health Agency of Canada, Government of Canada, 2005.

5 Canada. Statistics Canada. Census of Canada, 2001: Aboriginal Identity Population, Registered Indian Status, Age Groups, Sex and Area of Resident for Population, for Canada, Provinces and Territories, 2001 Census – 20% Sample Data [computer file]. Ottawa: Ont.: Statistics Canada [producer and distributor], October 22, 2002 (97F0011XCB01005).

6a. Information was not collected on whether Aboriginal children resided on or off reserve. This information was collected for Aboriginal caregivers and thus, categories were derived from caregiver variables.

6b To avoid having weights inflate the Chi-squares, the weighted estimates were weighted down to the original sample size.

7 Some CIS reports only use the primary category, in this report primary and secondary categories are counted.

8 Instances in which children were displaying severe emotional problems requiring treatment and parents refused or did not cooperate with offered treatment were classified as neglect cases under failure to provide treatment.

9A Number of child functioning measures with established norms exist; however, these are not consistently used in child welfare settings and could not be feasibly used in the context of the CIS.

10 Although child welfare workers assess the safety of children, they do not routinely conduct a detailed assessment of child functioning. Items on the checklist included only issues that workers happened to become aware of during their investigation. A more systematic assessment would therefore likely lead to the identification of more issues than noted by workers during the CIS.

11 This report refers to both confirmed and suspected problems as "indicated".

12 The two-caregiver limit was required to accommodate the form length restrictions set for the Household Information Sheet. The caregiver information usually corresponded to the parents and/or step-parent living in the home; if there was only one caregiver living in the home and a second living outside the home, information was gathered on both of these, but is not reported here.

13 This compromise was needed because the Household Information Sheet served as a common information source for all the children in the family. A much more extensive set of questions would have been required had the CIS-2003 gathered child-specific caregiver information, leading to a significantly longer form. Child-specific information on the caregiver-child relationship is available for caregivers who were investigated as alleged perpetrators (see chapter 4).

14 Most items were rated on a 4-point scale differentiating "confirmed", "suspected", "no" and "unknown" caregiver functioning issues. A caregiver functioning or family stressor was classified as confirmed if a problem had been diagnosed, observed by the investigating

worker or another worker, or disclosed by the caregiver. An issue was classified as suspected if investigating workers` suspicions were sufficient to include the concern in their written assessment of the family or in transfer summary to a colleague. For the purposes of the present report, the categories of confirmed and suspected have been collapsed. A comparison of the ratings will be completed in subsequent analyses.

15 See for example Trocmé N, Brison R. Homicide and injuries due to assault and to abuse and neglect. In: Beaulne G (ed) For the safety of Canadian children and youth: from data to prevention measures. Ottawa: Public Health Agency of Canada, 1998.

Jordan's Principle: A Child First Approach to Jurisdictional Issues

CHAPTER 3

Prepared on behalf of:
First Nations Child & Family Caring Society Canada

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I. INTRODUCTION

As the federal and provincial/territorial governments sort out their respective jurisdictional and funding responsibilities, the urgent needs of children and families are falling through government jurisdictional cracks. This is particularly the case for families that move on and off reserve, who and [sic] experience dramatic changes in the range and access to culturally based services. Funding formulas and jurisdictional arrangements must put the needs of children and families first. [1]

This research paper was contracted by the First Nations Child and Family Caring Society of Canada, to examine:

a) The implications of laws pertinent to child welfare and law relevant to jurisdictional disputes between federal government departments and between provinces and the federal government for the development of policy/procedure to manage jurisdictional disputes in First Nations Child Welfare.

b) The legal considerations in developing processes to resolve jurisdictional disputes (with a particular focus on whether or not the current approach of having no uniform process for resolving such disputes is acceptable).

A comprehensive review of literature and case law was completed. As well, approximately 20 key informants were interviewed, in order to assess the current state of First Nations child and family service delivery with regards to jurisdiction. Please note that the names of key informants are not noted in order to ensure confidentiality.

This paper is organised beginning with an overview of jurisdictional issues – including (Section II) an examination of federal/provincial/territorial and inter-ministerial (federal) jurisdictional issues. A case law review and analysis is provided, with a synopsis of the international rights of children. In addition, a discussion of the Social Union Framework Agreement is included.

Section III provides a discussion of dispute mechanisms and Section IV sets out recommendations culled from the literature and developed for the purposes of this paper.

The issues surrounding jurisdictional responsibilities and funding for First Nations Child and Family Services have been long-standing. This paper contributes to the work of the First Nations Child and Family Caring Society of Canada (FNCFCS) in seeking some positive resolution to these issues. The FNCFCS is committed to working with other stakeholder groups in order to ensure that First Nations children receive the care that they require and that they are entitled to. Developing mechanisms to resolve the "adult"/government issues that affect First Nations children, and in many cases disadvantage them, are of an urgent and pressing concern. Our children are our future.

II. JURISDICTIONAL OVERVIEW

…special status of Indian people has been used as a justification for providing them with services inferior to those available to Whites who established residence in this country, which was once theirs.[2]

As identified by Hawthorne (above) almost 40 years ago, the "jurisdictional dispute" between the federal and provincial/territorial governments, regarding who has the ultimate legislative, constitutional, fiscal, and moral responsibility for First Nations people (children) has had an impact on the availability of services and programs for First Nations children.

Despite the breadth of research and literature concerning the impact of this "dispute" on services for Aboriginal children and despite the federal government's own expressions of commitment to this issue, the jurisdictional debate continues. The literature canvassed highlights the impact of this dispute, not only on child and family services but also on the delivery of other social services such as health. Moreover, the discussion has expanded to include concerns and problems/issues with inter-ministerial jurisdictional disputes.

An *ad hoc* coalition comprised of: the Atlantic Policy Congress of First Nations Chiefs, the Commission on Peace and Justice (Canadian Council of Churches), First Nations Child and Family Caring Society of Canada, KAIROS (Canadian Ecumenical Justice Initiative) and the Southern Chiefs Organisation (Manitoba) – expressed concern, in their NGO submission to the United Nations, in relation to the impact of jurisdictional disputes:

> …Canada is not, based on its second report to the UN sufficiently aware of the deficiencies inherent in existing initiatives and funding practices. Too often, current programs targeted at Aboriginal peoples respond to immediate needs, without focusing on the undercurrents that shaped them. Child maltreatment is one example.[3]

This continual jurisdictional wrangling results in program fragmentation, problems with co-ordinating programs and reporting mechanisms, gaps in service delivery - thereby leaving First Nations children to fall through the cracks. In short, neither the federal or provincial/territorial governments have effectively addressed the community needs of First Nations despite awareness of the impact of "policies of avoidance". Proper consultation with First Nations and co-operation on initiatives such as the National Policy Review and this project will hopefully assist in alleviating some of these problems.

Clearly something needs to be done to resolve this situation and to bring the standards of care for First Nations children up to internationally acceptable levels. The reality is that:

> The average Canadian gets services from federal, provincial and municipal governments at an amount that is almost two-and-a-half times greater than that received by First Nations citizens. [4]

> Adding additional resources and providing flexibility in funding to ensure our most vulnerable are provided with the services they require should not be barred due to fiscal concerns. As pointed out by British Columbia's former Children's Commissioner:

> The federal and provincial governments and bands do not yet share a clear vision of how best to meet the needs of Aboriginal children on and off reserve…. in the meantime funding formulas and lack of clarity about roles and responsibilities, continue to place Aboriginal children at risk on reserves. **Only when communities are given adequate resources for health, education and child welfare supports will we see healthier and safer Aboriginal children… This must be top priority of all governments and child serving agencies in the years to come.** [5] [*emphasis added*]

1. Federal/Provincial Jurisdiction

> *Compared with other jurisdictions, services and infrastructure provided on reserve are substandard by almost every measurable outcome. No government appears to want to be accountable for this. At present, reserves are so under-financed that virtually every dollar received must be used to meet pressing social needs.*[6]

The federal/provincial/territorial "dispute" can be summarised as follows. The federal government's position is that the provincial government has constitutional authority, pursuant to section 92 of the *Constitution Act, 1867*[7] for the delivery of child and family services under the headings "property and civil rights" and "all matters of a local or private nature". The federal government funds on-reserve child and family service agencies pursuant to a policy directive (20.1) – not, according to them, as a result of a fiduciary obligation but as a matter of administration. Steadfast in their claims, the federal Government asserts that their provision of programs and services to First Nations, whether on or off reserve, is discretionary.[8] Specifically the Department of Indian and Northern Affairs (DIAND) has stated that:

> DIAND's perspective is that provinces delegate authority to agencies and are thus responsible to ensure that the agency operates pursuant to the established standards. Where deficiencies are observed it is the role of the province, as the substantive legislative

> authority for Child and Family Services, to work with the agency to address the needed improvements. The department's role is limited to funding the provision of services delivered by agencies authorised by the province. [9]

The provincial government contends that the federal government is responsible for "Indians" on reserve pursuant to section 91(24) of the *Constitution Act*, which they argue includes the delivery of child welfare services to ""Indians"". The provincial and territorial governments have expressed concern regarding the federal off-loading of responsibility for Aboriginal peoples and argue:

> …that the federal government has a constitutional, historical, fiduciary and Treaty responsibility for/and to Aboriginal peoples, both on reserve and off. [10]

The lack of services, opportunities and deplorable living conditions characterizing many of Canada's reserves has led to mass urbanization of Aboriginal peoples. The provinces claim that federally imposed limitations on the provision of services on reserve has led to urbanization and has transferred the "economic and social costs of inadequate on-reserve conditions to other levels of government".[11] Some provincial governments point out that as far back as the *Penner Report*[12] it was recognized that the federal government remains responsible for Aboriginal peoples living off-reserve and rights to special federal programs must be accorded to those living both on and off reserve. However, 22 years later there continues to be a lack of clarity and, as articulated in a Provincial/Territorial options paper:

- Aboriginal peoples and the provincial and territorial governments regard the federal government as responsible.
- Aboriginal peoples suffer from the lack of clear and consistent federal responsibility and accountability.
- The federal government's practice of withdrawing funding has meant reductions in services for Aboriginal peoples and increasing costs for provincial and territorial governments.[13]

The position of First Nations is set out clearly in the following guiding principle, endorsed by resolution, by the Chiefs in Assembly:

> The federal government must maintain its trust responsibility and fiduciary obligation to First Nations including, child, family and community services.[14]

Chiefs have drawn a link between the federal government's fiduciary responsibility to ""Indians"" and their financial responsibility:

> An issue clearly linked to funding is the fiduciary responsibilities of the federal government toward the First Nations.[15]

The responsibility of the Federal government has been argued at various times from a constitutional, treaty and fiduciary standpoint. [16] Similar to the argument put forth by the provinces, First Nations have asserted that the federal government's obligation to provide adequate funding for child welfare arises from ss. 91(24) and 35 of the *Constitution*; and that the federal government's fiduciary responsibility extends to child welfare and obliges the federal government to ensure the well-being and health of First Nations children.

With regard to s.35, the federal government argues that the right to funding for child welfare services is not an aboriginal right protected under s.35 and therefore the fiduciary relationship is not engaged. The possibility of a fiduciary obligation will be discussed further in relation to case law. Treaty arguments have likewise been rejected by the federal government. Unfortunately treaties have not been clear as to specific obligations in the area of social programs and services and therefore the dispute is left to differences of interpretation.[17] Although First Nations maintain that child welfare is a treaty right this ambiguity would make litigation, on this basis, difficult.

a) Funding

First Nations have made a direct connection between the state of children's health and the colonization and attempted assimilation of Aboriginal peoples:

- The legacy of dependency, cultural and language impotence, dispossession and helplessness created by residential schools and **poorly thought out federal policies** continue to have a lasting effect.
- Substandard infrastructure and **services have been made worse by federal-provincial disagreements over responsibility.**[18] [*emphasis added*]

The most profound impact of the lack of clarity relating to jurisdiction results in what many commentators have suggested are gaps in services and funding –resulting in the suffering of First Nations children. As articulated by McDonald and Ladd in their comprehensive Joint Policy Review (prepared for the Assembly of First Nations and DIAND):

> First Nations agencies are expected through their delegation of authority from the provinces, the expectation of their communities, and by DIAND, to provide a comparable range of services on reserve with the funding they receive through Directive 20.1. The formula, however, provides the same level of funding to agencies regardless of how broad, intense or costly, the range of services is. [19]

This is further underscored in the recent Manitoba Aboriginal Justice Implementation Commission, which summarised a number of problems inherent with the delivery of First Nations child and family service delivery, notably [from the relevant literature]:

> Aboriginal agencies have had to operate with inadequate financial resources even when compared to non-Aboriginal agencies. They have had to do more with less money. This has meant that essential services have consumed the bulk of available resources and that other areas such as prevention and public education have received a low priority. In addition some Aboriginal agencies have experienced serious backlogs in key program areas such as foster and adoption placements.[20]

The federal funding formula provides for two categories of funding; operations and maintenance. Agencies receive operations funds based on the number of children within the agency's jurisdiction. Alternatively, maintenance funds are intended to cover the cost of maintenance for each child. These funds, however, are only provided for **children in care**. Small agencies, therefore, have difficulty finding funding for family assistance or prevention services. The result is that children have been placed in care simply to receive funding. [21]

A comment that was consistently repeated by First Nations Child and Family Service [FNCFS] providers and highlighted by the National Policy Review is the lack of focus, within the current funding formula, on the diverse needs of FNCFS agencies. An example of where this creates great difficulty is with FNCFS agencies located in rural locations. Service providers in these agencies are required to do a great deal of travelling, however, travel costs are only provided for **children in care**. Therefore, small agencies receiving minimal operational funds are hard pressed to cover travel costs needed to visit families who require assistance to ensure the continued health and safety of their children.

These comments are directly related to the most common issue that has been raised in regard to the funding of FNCFS agencies, the lack of funding for preventative services. Despite the fact that preventative services are provided for in most provincial child and family statutes, under which mandated FNCFS agencies operate, they are not funded adequately by Indian and Northern Affairs Canada [INAC]. For example, a FN agency key informant, noted that ss.5 and 14 of the *Child and Family Services Act* [22] provide for family services to enable agencies to assist families and keep children with their parents. However, FNCFS agencies in Saskatchewan are unable to provide these legislatively mandated services due to the removal of funding for preventative care.

These difficulties are felt in most provinces, however, the unfortunate result of having to place children in care in order to receive funding is further complicated in some provinces where the funded care options are limited. For example, B.C.'s *Child, Family and Community Services Act*[23] provides for numerous out of care options such as kith and kin agreements, assisted adoption and transfer of custody. These options, however, are not funded under directive 20-1 and therefore Aboriginal children may be denied options which are provided to other non-Aboriginal children or off-reserve. As pointed out by a First Nations agency director:

> Flexible funding does provide for agencies to meet the criteria to fund children in these types of placements [out of care]. However, the formula is still based on numbers of children in care and the fear is that at the end of the 5 year block there could be significant cuts to funding if children have been placed through an out of care option. [24]

The result is that agencies are forced to effectively ignore the best interests of the child in order to ensure continued funding.

A similar situation exists in Saskatchewan where recent amendments to *The Child and Family Services Act* [25] have been introduced to ensure that the first placement option is with the child's extended family or friends. The funding formula, however, does not allow FNCFS to fully implement these options in First Nations communities. [26] Therefore, children under the care of a FNCFS agency are not given the same level of service as children under provincial jurisdiction.

The difficult decisions made by agencies in order to ensure continued funding are further exacerbated by the fact that agencies must maintain both provincial and their own Nation's standards. An informant commented on the absurdity of criteria put in place by INAC.[27] For instance, one Aboriginal child and family service agency reports that INAC advised them that they would only be funded for one hour of service per child. The agency currently employs two social workers, each of whom carry approximately 65 files, more than doubling the provincial standard of 24. These social workers frequently travel long distances to visit clients, making it impossible to maintain a one hour per child standard.

Moreover, the informant pointed out that the agencies not only have to meet provincial standards to ensure continued operation, but also the standards of their own communities. She stated that often these community standards are far stricter than those of the provinces or the federal government and require a level of attention to the best interests of the child physically, spiritually and culturally that is often not possible due to the funding limitations. This issue was also raised by a review panel, established to inquire into services provided to an Aboriginal infant in Saskatchewan.[28] In their report, the panel noted that:

> …FNCFS agencies are expected to provide services according to Provincial legislation and program standards with funding criteria that does not recognize all of the provisions in the *The Child and Family Services Act* or its accompanying program standards. [29]

In addition, in her report on the funding of FNCFS agencies, Elsie Flette notes that:

> The requirement to use provincial/territorial child welfare statutes poses a significant challenge for First Nation agencies which must try to adapt to expectations of First Nation governments whose services reflect the holistic, interdependent and communal rights framework of the cultural communities they serve with the individual rights based child welfare statutes. [30]

A final issue that was repeated by service providers is the lack of funding for legal services. Approximately two years ago the federal government halted payment of legal fees under maintenance funding.[31] Therefore, small agencies with limited operational funds are again forced to either deny service or transfer cases to other jurisdictions. In either scenario, costs are likely to be offloaded to the province and children are moved from agency to agency and social worker to social worker with their best interests lost in fiscal conservatism.

The issues raised by FNCFS providers demonstrate the tangible effects of funding limitations on the ability of agencies to address the needs of children. Without funding for provision of preventative services many children are not given the service they require or are unnecessarily removed from their homes and families. In some provinces the option of removal is even more drastic as children are not funded if placed in the care of family members. The limitations placed on agencies quite clearly jeopardize the well-being of their clients, Aboriginal children and families. As a society we have become increasingly aware of the social devastation of First Nations communities and have discussed at length the importance of healing and cultural revitalization. Despite this knowledge, however, we maintain policies which perpetuate the suffering of First Nations communities and greatly disadvantage the ability of the next generation to effect the necessary change.

2. Case Law Review

There is a paucity of case law specifically on the issue of jurisdiction and child and family services, and very little on jurisdiction generally, *vis-a-vis* social service delivery. No case law was found challenging various inter-ministerial (federal departments) jurisdictional responsibilities.

A review of the case law is set out below beginning with a discussion of federal/provincial jurisdictional issues and fiduciary responsibility. In addition a review of section 35 of the *Constitution*, section 15 and 7 of the *Charter* and international law is provided.

In summary the state of the law is uncertain. Although there are strong arguments to be made, no decisions have yet been rendered on the obligations of the Crown to provide adequate and equal funding for child welfare, as either a constitutional or fiduciary obligation.

a) Federal/Provincial

In a 1997 decision the Manitoba Queens Bench cast doubt on the argument that Canada's decision to unilaterally discontinue discretionary funding for preventative services was a breach of their fiduciary obligation. In his judgement, MacInnes J. stated that:

> In my view, there is nothing that obligates Canada to provide services to family funding. There is no aboriginal or treaty right which so provides. While clearly there is a fiduciary relationship between Canada and aboriginal people which creates certain obligations upon Canada with respect to Indian children and families, this fiduciary relationship does not obligate Canada to pay any specific amount of funding for any specific purposes. [32]

MacInnes J.'s decision in *Southeast* suggests that although there is a general fiduciary relationship between the federal government and Aboriginal peoples [children] it is unlikely that this relationship equates to a fiduciary duty to provide funding for child welfare services. The scope of the Crown's fiduciary obligation in relation to its dealings with First Nations is a relatively new area of law and therefore it is difficult to assess the probability of success with this type of argument. However, the following provides a brief discussion of recent case law with regard to the Crown's fiduciary duty.

In *Wewaykum Indian Band v. Canada*[33], Binnie J., for the court, held that the fiduciary duty is not a general concept and doesn't cover all aspects of the fiduciary relationship[34]. Therefore, not all dealings between parties to a fiduciary relationship will give rise to a fiduciary obligation.

> It is necessary then to focus on the particular obligation or interest that is the subject matter of the particular dispute and whether or not the Crown had assumed discretionary control in relation thereto, sufficient to ground a fiduciary obligation. [35]

The courts have repeatedly stated that a fiduciary duty will not generally attach to a public law duty. In *Squamish Indian Band v. Canada* [36] the court held that in matters of public law the Crown is not acting with the benefit of one party in mind, therefore, Crown discretion and vulnerability of those to whom the Crown maintains a fiduciary relationship can exist "without triggering a

fiduciary standard"[37]. Similarly in *Guerin v. Canada*[38] Dickson C.J. stated that:

> Public law duties, the performance of which requires the exercise of discretion, do not typically give rise to a fiduciary relationship. The Crown is not normally viewed as a fiduciary in the exercise of its legislative or administrative function.[39]

However, it was further noted by Binnie J. in *Wewaykum* that a public law duty does not necessarily negate the possibility of a fiduciary relationship.

> The latter depends on identification of a cognizable Indian interest and the Crown's undertaking of discretionary control in relation thereto in a way that invokes responsibility "in the nature of a private law duty." [40]

Moreover, Binnie J. held that the fiduciary duty:

> …where it exists, is called into existence to facilitate supervision of the high degree of discretionary control gradually assumed by the Crown over the lives of Aboriginal peoples. [41]

Finally, in *R. v. Adams*[42], Lamer C.J. for the majority, warned against the implementation of "unstructured discretionary administrative regimes" [43] and stated:

> In light of the Crown's fiduciary obligations towards Aboriginal peoples Parliament may not simply adopt an unstructured discretionary administrative regime which risks infringing aboriginal rights in a substantial number of applications in the absence of some explicit guidance.[44]

Therefore, the existence of a fiduciary duty seems to hinge on the type of interest in question and whether due to the sui generis nature of the relationship between the Crown and Aboriginal peoples, a traditional public law duty will be subject to a fiduciary duty. An example of where a fiduciary obligation was found to exist in what would generally be deemed a public law area is provided by the Ontario Court of Appeal in *Bonaparte v. Canada (Attorney General)*.[45] The court held that the federal government, in implementing residential school policy, "assumed a duty to act in a fiduciary capacity with respect to the education of Aboriginal peoples." [46]

The appellants in *Bonaparte* were the descendants of residential school survivors and claimed that they had been denied transmission of their culture and "the opportunity to achieve a full and normal family, social and economic life" [47] due to the imposition of the residential school system. Unfortunately, the issue of whether the fiduciary duty had been breached was not decided at either the trial or appeal level. The claim was struck out at the trial level on the grounds that descendants of victims are not owed a fiduciary duty and although the court of appeal ruled that this was an error, the primary issue of breach was not decided.

Nonetheless, the fact that a fiduciary obligation was found to exist in relation to the administration of education significantly strengthens the argument that the same obligation should be extended to other social services, such as child welfare.

With regard to the obligation of the provincial government to step in and provide services, where federal funding is lacking, a Manitoba Provincial Court Judge held that the province has a legal obligation to ensure that First Nations have comparable services to those off-reserve:

> … irrespective of any views, that the provincial government may have as to the historical, political, financial or moral responsibility of the federal government to provincial health and social care, it is now absolutely clear that it is the legal responsibility and duty of the province to supply child welfare services in accordance with the *Child Welfare Act* [48]

In some cases provinces have provided piece-meal funding. For instance in B.C. the Squamish First Nation was provided with funding for a cultural worker. This was done after the Nation brought a complaint to the former Children's Tribunal alleging that Squamish children were being denied their right to receive guidance and encouragement to maintain their cultural heritage pursuant to section 70 of the *British Columbia Child, Family and*

Community Services Act. They argued, successfully, that the federal funding, pursuant to Directive 20.1, was inadequate to comply with the changes to the provincial legislation (specifically s. 70 – rights of children in care).

Unfortunately, the law remains unclear. The *Director of Manitoba v. B* was decided by a lower court, never appealed, and is now almost 25 years old. Much has changed since then (and much has stayed the same). Moreover, there has yet to be a clear decision on whether the Crown could be held to a fiduciary obligation to provide child welfare services. *Southeast* was unsuccessful on appeal and the primary issue, regarding the existence of a fiduciary obligation to provide funding for preventative services, has yet to be argued. Therefore in the absence of any further judicial inquiries, the state of the law is as set out in *Southeast* – in short, the jurisdictional conundrum continues.

b) Section 35

Aboriginal peoples have been recognised in *Constitution Act, 1982,*[49] pursuant to section 35, which reads as follows:

> *s. 35 (1) The existing aboriginal and treaty rights of the aboriginal peoples of Canada are hereby recognised and affirmed.*

Case law to date has not recognised the governance of child and family services as an Aboriginal right. For example, a lower court in British Columbia found that section 35 did not include the right to govern child and family services, in *Re Child and Family Services Act of B.C.:*

> Within any society there can be only one source of ultimate power or authority. Within modern democracies that is the properly constituted government. The right to determine if children are abandoned, or neglected or abused to the extent of being in need of protection, and the power to implement the appropriate remedies is an authority vested in every viable society. It is not something exclusive to aboriginal in general or to aboriginal of Canada in particular. Being a feature common to all

> viable societies, I am satisfied it is not an aboriginal right as referred to in section 35 of *Constitution Act*, 1982[50]

In contrast, the B.C. Court of Appeal held in *Casimel,*[51] that customary adoption is a right protected by section 35 of the *Constitution.* Thus embracing the notion that the traditional practices of caring for children by extended family and other community members is an inherent right. By analogy, and logical extension, section 35 should apply to First Nations child and family services. If accepted as a right under s.35, the case law would suggest that a fiduciary duty argument would be significantly strengthened and it could be argued that the federal government has a fiduciary responsibility to ensure that the right is not extinguished by provincial laws of general application.

c) Charter

The Canadian *Charter of Rights and Freedoms* outlines, in section 15, that:

> *Every individual is equal before and under the law and has the right to the equal protection and benefit of the law without discrimination and, in particular, without discrimination based on race, national or ethnic origin, colour, religion, sex, age or mental or physical disability.*

The provincial and federal government's jurisdictional debate could be characterised as a shirking of responsibilities that amounts to inequitable treatment of First Nations and is therefore in violation of section 15 of the *Charter.* Arguably child protection laws are applied differently on reserve (due to lack of adequate

funding) than off which constitutes inequitable treatment based on race and residence. On its face, this amounts to a denial of equality before the law (equality of application) and equal benefit (unequal provision of generally available services). The Supreme Court of Canada held in *Eldridge v. British Columbia* [52] that once a state provides a benefit, it must do so in a non-discriminatory manner, and must take special measures to ensure that disadvantaged groups are able to benefit equally from government services.

In *Corbiere*[53], the Supreme Court of Canada unanimously held that "Aboriginality-residence" is an analogous ground of discrimination under s.15[54]. McLachlin and Bastarache JJ., for the majority, held that distinctions based on reserve residency touch on personal, immutable characteristics and are therefore automatically suspect of being discriminatory. The reasoning of the court was based on the fact that living on or off reserve may not involve choice for many, and for others is a very personal decision.

> The ordinary "residence" decisions faced by the average Canadians should not be confused with the profound decisions Aboriginal band members make to live on or off their reserves, assuming choice is possible. The reality of their situation is unique and complex.

An alternative argument is that the inequalities in child welfare funding are based on race. This argument is bolstered by the fact that services are not only unavailable on reserve but may also be denied off reserve due to jurisdictional disputes. Therefore, a government argument based on the proposition that the inequality arises out of the difficulty of providing and funding services in remote communities [on-reserve] would be unconvincing. The lack of services off-reserve or the unwillingness of the federal government to provide for services off-reserve, lends credibility to the argument that the inequality is based on race (as well as residence).

It may also be argued that the lack of adequate funding and resources on reserve constitutes a breach of s.7 of the *Charter*. s. 7 provides that:

> *Everyone has the right to life, liberty and security of the person and the right not to be deprived thereof except in accordance with the principles of fundamental justice.*

The lack of adequate funding and resources on-reserve has led to the placement of children in care and removal of children from reserves. It could be asserted that this is a clear infringement of children's right to liberty in relation to the ability to remain in their homes and communities. In *Godbout v. Longueuil*, La Forest J. held that:

> …the autonomy protected by the s. 7 right to liberty encompasses only those matters that can properly be characterized as fundamentally or inherently personal such that, by their very nature, they implicate basic choices going to the core of what it means to enjoy individual dignity and independence… choosing where to establish one's home is, likewise, a quintessentially private decision going to the very heart of personal or individual autonomy. [57]

Although the liberty to choose where one resides is clearly not an inalienable right, it may be considered a strong argument that children should only be forced to leave their family homes in the most extreme circumstances. This is not the case here as Aboriginal children are removed from their homes in far greater numbers than non-Aboriginal children for the purposes of receiving services.

Alternatively, it may be argued that placement of children in care, due to lack of services, amounts to an infringement of the parent's right to security of the person, under s.7. According to the Supreme Court of Canada in *New Brunswick v. G.(J.)* [58] the right to security of the person encompasses psychological integrity and may be infringed by state action which causes significant emotional distress. Moreover, it was held that the loss of a child constitutes the kind of psychological harm which may found a claim for breach of s.7. Lamer J., for the majority, held:

> I have little doubt that state removal of a child from parental custody pursuant to the state's parens patriae jurisdiction constitutes a serious interference with the psychological

> integrity of the parent…As an individual's status as a parent is often fundamental to personal identity, the stigma and distress resulting from a loss of parental status is a particularly serious consequence of the state's conduct.[59]

The court went on to state that there are circumstances where loss of a child will not found a prima facie breach of s.7, including when a child is sent to prison or conscripted into the army. [60] Clearly, these circumstances can be distinguished from the removal of a child from his/her home due to the government's failure to provide adequate funding and services.

The federal funding formula, directive 20-1, impacts a very vulnerable segment of our society, Aboriginal children. The protection of these children from state action, infringing on their most fundamental rights and freedoms, is clearly in line with the spirit of ss.7 and 15 of the Charter. Research conducted on the issue of child welfare plainly shows differentiation in the quality of services provided on and off reserve and to aboriginal and non-aboriginal children. This type of differentiation is unacceptable in a society that prides itself on protection of the vulnerable.

d) International

In 1990, Canada signed on, as a signatory, to the United Nations *Convention on the Rights of the Child* [61]. The Convention sets out the rights of children and the corresponding responsibilities of state governments. In particular, the *Convention* includes:

> Article 23 – Right of a child with a disability to special care and assistance – ***which may be violated due to lack of funding as a result of jurisdictional issues.***
>
> Article 24 – Right to highest attainable standard of health – ***which may be violated due to lack of funding as a result of jurisdictional issues.***

As a means to honour the *Convention*, Canada has set out an "Action Plan" in response to the 2002 United Nations Special Session on Children. Canada's Action Plan commits to the following:

> No. 44: The Government of Canada is working together with Aboriginal communities, leaders and Elders, as well as provincial and territorial governments **to improve the health and well-being of Aboriginal children and their families**.
>
> No. 83: **Canadians believe that children with disabilities should have equality of access to programs and services** that allow them to reach their full potential and participate as they wish in society… [*emphasis added*]

Arguably, in light of the continued "jurisdictional disputes" Canada is in breach of their international obligations, pursuant to the *Covenant*, in particular Articles 23 and 24. Canada's commitments in their Action Plan (especially 44 and 83) are compromised by the continued failure of all governments to effect adequate dispute mechanisms that would place First Nations children at the centre of the 'dispute', as opposed to "falling through the cracks" because of gaps in services created by the continuing lack of clarity. Although the Convention does not contain any specific remedies for a breach of the Convention – International attention regarding continued violation of the convention would not be looked favourably upon by the international community.

3. Inter-Jurisdictional

> *Despite persistent pleas from Aboriginal people that their interdependent needs be served by holistic services, the service environment continues to be fragmented between federal and provincial levels of government, between departments and ministries, and among service agencies in community.* [63]

The vision document *A National Children's Agenda: Developing a Shared Vision* sets out four goals for a National Children's Agenda:

- Healthy physically and emotionally,
- Safe and secure,
- Successful at learning, and
- Socially engaged and responsible.[64]

Aboriginal children fair poorly in meeting any of the goals presented in the National Children's Agenda (or Canada's Action Plan). As discussed previously (above) and reiterated in a report on *The National Child Benefit*[65] many Aboriginal children live in poverty and suffer because of the lack of clarity around jurisdictional roles and responsibilities not only of the of the Federal/Provincial/Territorial governments, but also between ministries/departments (inter-jurisdictional):

> Another barrier to the provision of holistic services is the lack of integration between government departments, programs and agencies. Communities that are trying to develop new strategies are overwhelmed and frustrated by having to deal with far too many different government departments. Others indicated that there was more rhetoric than reality about partnership building. [66]

The Aboriginal Nurses Association of Canada poignantly illustrate how this impacts on their work with Aboriginal people:

> Aboriginal nurses see the jurisdictional problems between the federal, provincial/territorial, and First Nations governments and agencies from a clients perspective. They spend many hours attempting to explain the complexity and the relevant policies and procedures to clients and their family members that require access to the wide array of programs and services offered at the various levels of government and non-government agencies.

Following is a specific example of problems that arise for children with special needs/disabilities.

a) Children with Disabilities/Special Needs

> Aboriginal people receive health services through a unique combination of federal, provincial and Aboriginal-run services, as well as other programs and services. Responsibility for delivery of health care to Aboriginal people in Canada has been the subject of considerable debate regarding jurisdictional responsibility. For many years, the lack of co-ordination between various levels of government and Aboriginal community agencies has resulted in fragmented services or a lack of services for Aboriginal people… Historically the federal government of Canada has recognised that a special relationship exists between it and Status "Indians" with respect to the provision of health care. However this responsibility is largely defined as a matter of policy and goodwill and is not considered by the courts to be a legal obligation.[68]

The Assembly of First Nations, in a recent newsletter, highlighted the circumstances of the case of four year old Jordan, a First Nations boy in Winnipeg as a poignant and sad example of how First Nations children fall through the cracks as a result of federal/provincial/territorial and inter-ministerial jurisdictional squabbles.[69] Jordan was removed from his home at birth and placed in hospital under the care of a FNCFS agency. The agency developed a plan to place the child in a foster home with the necessary support for his medical condition. However, implementation of the plan has been impossible, as INAC, Health Canada and the provincial government are not willing to take responsibility for the costs involved in moving the child from hospital. The newsletter states:

> *This is unnecessary. This situation is unacceptable and it is a violation of this child's basic human rights. Every child has the right to be raised in a family, to have their needs met and to receive quality care. And sadly, this young boy is only one example.*[70]

As the article points out, Jordan's experience is but one example. According to statistics:

> Almost one-third of Aboriginal Canadians age 15 and over reported having a disability in 1991 – more than double the national rate (15%). The difference was particularly pronounced among younger age groups, where Aboriginal people were three times as likely to have a disability. [71]

A key informant offered numerous examples of children with complex medical needs, suffering on-reserve due to the lack of resources. However, she/he quickly noted that those who are transferred

off reserve, for provision of services, do not have a much brighter future. Children who are removed from their homes are primarily transferred to hospitals and institutions where it is cheaper to meet their needs. Therefore, due to jurisdictional disputes, Aboriginal children with special medical needs are not only taken out of their own homes but are rarely ever offered the chance to once again live in a family environment.[72]

She/he also noted that INAC recently discontinued the funding of travel costs for parents to visit their children in hospital. Although INAC still covers the cost of travel for a child to return home for a visit, due their unique medical needs, these children are generally not able to travel. [73] Therefore, in light of the poverty suffered by many of the families involved with child welfare system, INAC's policy essentially keeps these families from maintaining contact.

Inadequate funding and poor inter-jurisdictional cooperation has resulted in a situation where children with complex medical needs are either left to suffer on reserve, without the proper resources, or alternatively are institutionalized with little likelihood of ever having the opportunity to live in a home environment. Surely neither of these options can be seen to be in the best interests of the child.

Great concern has also arisen in relation to children who have special medical and emotional needs but do not require the type of equipment and resources as those who are institutionalized, for example, children with FAS/FAE. Unfortunately, these concerns have largely been brought to public attention through extensive inquests into the circumstances of the deaths of children in care.

Two recent inquests out of Manitoba underscore the impact of inadequate funding and the lack of cooperation and communication between the different levels of government and agencies.[74] Both children, Patrick Norman Redhead and Susan Redhead (unrelated), committed suicide by hanging after being bounced from home to home and institution to institution. Both children had emotional and behavioural issues that were left unaddressed and likely suffered from FAS/FAE although neither was ever officially diagnosed.

The inquest into the death of Patrick Norman Redhead was held by Provincial Court Justice Geisbrecht and lasted over thirty days. A number of recommendations were produced in regard to the care of children with special needs. Giesbrecht J. particularly noted that jurisdictional issues have resulted in children being "moved or pushed from one agency to another for purely economic reasons"[75] resulting in a disconnect between the needs of the child and what occurs due to fiscal restraints. Moreover, Geisbrecht J. focused a great deal on the impact of the virtual absence of funding for preventative programming:

> It is self-evident in my view that at this time existing resources cannot be diverted from the high-needs children who are currently in the system. . . At the same time if funding at the front end of the system is not increased, if we do not become proactive rather than reactive than we are simply creating greater and ultimately much more expensive problems down the road.[76]

In her testimony before the Inquest, Janet Mirwaldt, Manitoba Child Advocate, discussed the possibility of a multi-disciplinary approach to provide adequate services for high-needs children. In commenting on the policies of avoidance, practiced by both the federal and provincial governments, she stated:

> Even in a world of limited resources the narrow approach should be avoided…More resources might be found, not by creating new resources but by sharing existing resources…Resources can be developed interdepartmentally within those limited resources.[77]

The recommendations set out by Geisbrecht J. in relation to resource and funding issues are reproduced in Section IV, of this report.

The inquests of both Patrick Redhead and Susan Redhead paid additional attention to the lack of training for service and foster care providers regarding the needs of children with FAS/FAE. Again this was linked to a lack of funding for preventative services and programs.

Recommendations for improvement in training are also reproduced later in this report.

This, therefore, raises a systemic issue that arguably has not, but must be, addressed:

> Lack of disability-related services available on-reserve often forces Aboriginal peoples to abandon their communities in search of supports. Once off-reserve, Aboriginal peoples face jurisdictional barriers in accessing these supports and services. This sub-committee also heard that many Aboriginal children with disabilities are placed in child welfare services in order to access supports which are not available to their biological families.[78]

A similar refrain was articulated, on March 30, 2001, by the Social Services Ministers, who released *In Unison 2000: Persons with Disabilities in Canada*[79]. This paper included input from Aboriginal peoples and provided a profile of Aboriginal Canadians with disabilities. One of the main concerns raised regarding Aboriginal peoples, was the jurisdictional debate/conundrum that enters almost any discussion about Aboriginal peoples (children) and social policy:

> The lack of disability-related services available on reserve often forces Aboriginal peoples to abandon their communities in search of these supports; however, once off-reserve, Aboriginal peoples with disabilities face jurisdictional barriers in accessing these supports and services. [80]

The report outlined actions to be taken which included the establishment of an Aboriginal Technical Committee on Social Policy.

Finally, Commissioner Roy Romanow, in his *Interim Report* on health care in Canada, underscored that the responsibility for Aboriginal health and health care programs demands resolution.

> … is an area surrounded by uncertainties that have had serious consequences to the health and health care of Aboriginal peoples. [read children] [81]

This issue is currently under review by both Health Canada and INAC. According to an informant from the First Nations and Inuit Health Branch, the two federal departments are in discussions regarding who will fund the necessary services for Aboriginal children with complex medical needs. She/he acknowledged that there was significant concern in regard to the gaps in service for these children and the consequences of ongoing jurisdictional disputes.

Another informant agreed that the present situation is intolerable. However, she/he stated that the current situation is due primarily to Health Canada's refusal to cover the medical costs of children in care under non-insured health benefits. She/he stated that Health Canada has signed numerous agreements with various FNCFS agencies promising to provide funding for children with special medical needs. She/he stated that these agreements have rarely been upheld and Health Canada has cited interpretational misunderstandings as the reason to pull out of agreements. The existence of these agreements was not confirmed by Health Canada.

While the discussions are ongoing between federal departments some provinces are taking independent action. For example, Alberta has recently enacted new legislation, *The Family Support for Children With Disabilities Act*[82], which extends services to children with disabilities on reserve. Unfortunately, it seems that most First Nations children will be unable to take advantage of this program. As pointed out by an informant, the new legislation consists of a reimbursement program and the majority of First Nations families on reserve will be unable to pay for services upfront[83]. Therefore, the same situation arises where families are forced to put their children into care in order to ensure funding.

4. SUFA

The Social Union Framework Agreement (SUFA) was entered into, in 1999, between the Federal/Provincial/Territorial governments. SUFA sets out some broad principles for a new era of social policy and co-operation in the areas of health, children, post-secondary education and other social programs. In particular the agreement

is aimed at enabling the Federal/Provincial/Territorial governments to work together:

> … and with Canadians, to strengthen our health care system, eliminate barriers to mobility for Canadians, involve Canadians in the development of social programs, and strengthen partnership among governments.[84]

The general principles outlined in the agreement, to guide social programs for Canadians, were identified as:

- Equality of opportunity;
- Access to all Canadians to comparable programs;
- Medicare principles;
- Help for those in need.[85]

The government of Quebec did not sign the agreement, nor were Aboriginal peoples included as signatories to the agreement. National Chief of the Assembly of First Nations, Chief Phil Fontaine, prior to the signing of SUFA, recommended the inclusion of First Nations as full and equal partners in the Social Union process and urged the Prime Minister to "enfold the First Peoples of Canada in this historic process of nation-building" [86]. Yet leaders from National Aboriginal Organisations (NAO's) were not direct parties to the negotiations.[87] Fontaine underscored the importance of Aboriginal involvement in light of the unique relationship of First Nations with the federal government and the fact that:

> Social Union reform directly affects the **jurisdictions** of First Nations' governments, the current and future relationships between First Nations and the federal and provincial/territorial governments **and the nature and quality of social programs** available to First Nations citizens. [88] *[emphasis added]*

SUFA does, however, include a provision which states that:

> Governments will work with the Aboriginal peoples of Canada to find practical solutions to address their pressing needs.[89]

Although the SUFA agreement acknowledges Aboriginal peoples it does not, by implication, recognise them as contemporaries to the other signatories. One commentator has suggested that the exclusion of Aboriginal peoples as signatories would suggest:

> … that they are analogous to municipal governments, which are also bystanders to the SUFA process. This could be seen as a further retreat from the 1992 high-water mark of Aboriginal influence, when the text of the Charlottetown Accord wove a significant Aboriginal presence into virtually every institutional warp and woof of the Canadian federal state.[90]

Unfortunately, the rationale provided to justify Aboriginal exclusion was, as identified by Prince, a Professor at the University of Victoria, because the agreement dealt with "administrative matters":

> The reasons given for the exclusion of Aboriginal national leaders were that the talks involved administrative arrangements, not constitutional proposals, and that the delivery of social programs continues to be a provincial responsibility.[91]

First Nations are, unfortunately, all too aware of the fact that because of jurisdictional issues, and other matters of pressing urgency, SUFA represented not merely the negotiation of "administrative arrangements" but enfolded discussions regarding matters that relate to their very survival – access to social programs i.e. especially with regards children and youth.

Furthermore, Professor Margot Young argues that the text of SUFA seems to support a notion of formal rather than substantive equality. [92]As illustrated by Young, substantive equality takes into account individual or group differences in recognition of the fact that "same treatment is not always equal treatment"[93]. This is of special concern for Aboriginal people [read children] who are historically disadvantaged because of their race and often times due to their place of residence. As Young points out, the difference between models of substantive and formal equality can be very important:

> Without consideration of individual's real social and economic conditions and absent program design that addresses systemic

> inequalities, state action will do little to effect substantive amelioration of the pre-existing conditions of deprivation and disadvantage that currently deny social citizenship to large groups of Canadians.[94]

One of the areas highlighted in the SUFA agreement is "Funding Predictability". This section is meant to provide direction for the funding relationship between the Federal/Provincial/Territorial governments - but has obvious far-reaching implications for Aboriginal peoples. Jurisdictional "issues", have yet to be reconciled and clearly affects "funding predictability". Aboriginal peoples survive, in many cases, on piece-meal or inadequate funding for necessary social services. SUFA does nothing to address this far-reaching problem in particular with Aboriginal peoples. One of the goals of SUFA should be funding predictability for Aboriginal peoples, Aboriginal Nations, governments, and National Aboriginal representative groups.

In a Treasury Board, SUFA analysis of the First Nations Child and Family Services programs they note that there are no "residency-based barriers in this program"[95]. Furthermore, the Social Union web-site notes that:

> There was a broad consensus between the signatory governments that the first priorities should be children in poverty and persons with disabilities[96].

Clearly there are residence-based barriers and clearly if the first priority of the SUFA signatories is children living in poverty and people with disabilities – issues affecting access to services for First Nations children with special needs/disabilities must be given the greatest priority.

5. Summary

Jurisdictional issues remain the subject of lively debate. Case law does not provide much guidance in clarifying the issue. Complicating the "debate" are the jurisdictional issues that manifest inter-ministerially, in addition to the federal/provincial/territorial conundrum.

One avenue that could have ameliorated and potentially have assisted stakeholders would have been the inclusion of First Nations as full and equal partners in the negotiation, signing, and discussions of SUFA.

In the interim, as a result of the lack of clarity in the law and policy it is important that dispute mechanisms be designed to ensure that First Nations children are provided with the services that best meet their needs and that Canada has committed to providing in order to meet their international obligations pursuant to the *Convention on the Rights of the Child*.

Following is an examination of dispute mechanisms.

III. DISPUTE MECHANISMS

> *No. 18: Under Canada's Constitution, federal, provincial and territorial governments are responsible for many areas that touch on the lives of children. It is clear that if children are to benefit co-operation among jurisdictions is essential. Federal, provincial and territorial co-operation with respect to children has been significantly enhanced over the past decade…*[97]

McDonald and Ladd, in their comprehensive policy review of First Nations Child and Family Services provide an overview of Dispute Mechanisms as of March 31, 2000, which set out arrangements to resolve differences in interpretation and legislation and standards between provinces, DIAND, and First Nations Child and Family Services (FNCFS). As McDonald and Ladd point out, in nearly all cases there are no formal mechanisms in place resulting in informal methods being deployed to address various contentious issues. This was identified in 1995 by INAC, despite the fact that Directive 20.1 requires the establishment of tri-partite panels/committees:

All regions have created tripartite mechanisms, though not always a formal panel or committee. These mechanisms have been useful, but their effectiveness tends to depend on the relationship developed between the parties and their intended purpose.

McDonald and Ladd proposed the following recommendation:

> Recommendation 5: **A national framework is needed** that includes fundamental principles of supporting FNCFS agencies, that is sensitive to provincial/territorial variances, and has mechanisms to ensure communications, accountability and dispute resolution mechanisms. This will include evaluation of the roles and capacities of all parties. [100] *[emphasis added]*

As well they recommended:

> **A regional table process** is needed to discuss this issue and come up with an action plan. [101] *[emphasis added]*

It seems clear, from the previous discussion in this paper that the development of dispute mechanisms are of paramount importance to ensure that everyone keeps their commitments to protect and provide services to the most vulnerable of our population – First Nations children and youth.

The inability of FNCFS agencies to utilize the processes put in place was noted by the Saskatchewan review panel in the *Baby Andy Report*. According to the panel, agreements between FNCFS agencies and INAC provide for a forum to discuss and analyse mutual program and policy concerns. However, the capacity of agencies to further this agenda is/limited by experience, financial resources and systematic supports. [102]

The panel suggested a starting point for cooperation:

> In order to proceed to the next level of FNCFS agency development, a focused and systematic framework for joint service improvement and accountability is required. This level of development requires a comprehensive plan that includes FNCFS agencies, the Department and INAC.[103]

The Nova Scotia government provides one example of a "dispute resolution" mechanism designed to enhance services to children, however, it is not clear whether First Nations are involved in this process. The province has set up a Child and Youth Action Committee that works as an inter-departmental working group of senior officials for co-ordination of cross-jurisdictional initiatives affecting children and youth.[104]

The Provincial/Territorial governments put forward a number of options to attempt to address this problem. One of the approaches enunciated in a 1997 paper, was described as the "comprehensive approach" which would be a cross-sector action plan to identify strategic ways of improving the social, economic and environmental conditions for Aboriginal peoples. [105] That was 7 years ago?

In the 2001 *Progress Report to Premiers No. 6* a number of recommendations are set out, including:

- Premiers called on the federal government to recognise its treaty, fiduciary, and constitutional responsibilities for the health, education, and well-being of Aboriginal Canadians and to work with provinces, territories and Aboriginal peoples on more effective delivery and financing of health, education and social services for Aboriginal peoples;
- Premiers stressed the importance of continued Aboriginal involvement to ensure that the needs of Aboriginal children are a priority as work on the National Children's Agenda proceeds.
- Premiers encouraged continued co-operation between governments and Aboriginal organisations toward addressing the education, skills development and labour market needs of Aboriginal people. [106]

Where dispute resolution processes are unavailable or ineffective decisions are being made without any recourse or involvement - negative feelings and backlash can occur between the parties involved. Arguably, this is the current situation between First Nations agencies and INAC. Service providers stressed the difficulty in achieving direct communication with INAC. Communication between the two parties generally occurs through letters; a number of agencies reported having made numerous attempts to set up meetings, with no success. [107] Anecdotally, it could be argued that agencies generally feel that INAC is

in a defensive position and that communication is strained.

Current communications between the provincial and federal governments, inter-departmentally and with the agencies seem to be grounded in a power or rights-based approach as opposed to an interests-based approach. In their study of dispute resolution systems, the Institute on Governance notes that:

> Benefits for reducing the reliance on power and rights based approaches include reduced costs; better quality decisions; greater satisfaction levels among disputants and the preservation of long-term relationships. There appears to be considerable convergence in the literature on Aboriginal justice to move in a similar direction, that is, to place greater reliance on interest-based approaches, often referred to as alternative dispute resolution (ADR).[108]

The federal and provincial governments' present approach of jurisdictional finger-pointing and avoidance has cost a great deal for all involved – especially children. The current state of First Nations Child and Family services is creating a myriad of related problems in the health and well-being of Aboriginal peoples [read children] which clearly affects all areas of social policy. Therefore, it is obviously in the interest of both the federal and provincial governments to work together with First Nations agencies to create an effective funding arrangement.

In their report, the Institute on Governance discussed possible models for a successful dispute resolution process as a component of a new inter-governmental fiscal relationship between the Federation of Saskatchewan Indian Nations, the Government of Canada and the Government of Saskatchewan. The report notes that the central issue facing First Nations, in fiscal negotiations with government, is how to avoid a sovereignty based approach on the part of government. The report notes that governments are reluctant to allow a third party to act in the role of mediator, as this negates their ability to determine budget allocation. Although a third party mediator may not be necessary, it is crucial that the government is aware of the fiscal consequences of inaction and the importance of cooperation between the levels of government, the agencies and inter-departmentally.

FNCFS providers expressed great frustration at the lack of processes in place for the resolution of issues. Suggestions made by providers as to effective processes for the future, were as diverse as the issues they face. However, a common thread throughout the responses was the concept of putting a small cross-sectional group in place to deal with the issues of FNCFS agencies. A key informant suggested that a standing committee be established, comprised of representatives of the province, INAC, FNCFS agencies and AFN. She/he noted that "in B.C. with the number of agencies and their varied size it is difficult to meet effectively as a larger group to conduct business. This was reiterated by another informant, who further stated that the process undertaken by any specified body should reflect cultural values. She noted that:

> The process may be a circle as it embodies the cyclical nature of life and has become an acceptable means of resolving disputes in this province. Regardless of the actual resolution process chosen, the critical elements of the process are respect for treaty, respect for differences and inclusiveness. [109]

This sentiment was reiterated by MacDonald and Sayers:

> The understanding of culture in the development of dispute resolution process is key to successful outcomes. Any examination of First Nations issues in Canada has to respect the cultural diversity that exists within First Nations.[110]

Moreover, a standing committee, apprised of the current issues facing FNCFS agencies and comprised of representatives from the various Stakeholders, may circumvent the government's reluctance regarding the use of a third party mediation process and yet achieve the same results. Any process, however, must be grounded in the idea that:

> …no one jurisdiction – let alone one federal department – can control decisions, resources and activities. Success depends on developing and sustaining a common vision of outcomes, objectives and lines of accountability.[111]

IV. RECOMMENDATIONS

A myriad of recommendations can be found in the literature. The 17 recommendations found in the Joint Policy Review are the most contemporary and provide a call for clarifying the jurisdictional issues:

> Recommendation 4: DIAND, Health Canada, the provinces/territories and First Nation agencies must give priority to clarifying jurisdiction and resourcing issues related to responsibility for programming and funding for children with complex needs, such as handicapped children and children with emotional and/or medical needs. Services provided to these children must incorporate the importance of cultural heritage and identity.[112]

The Ad Hoc Coalition in their submission to the United Nations recommended that:

> Recommendation 10: In the short term, implement recommendations of the Joint Policy Review on First Nations Child and Family Services, and launch a review of off-reserve funding methodologies, to ensure equitable access to sustained and culturally –based targeted prevention services.113

In order to achieve Canada's commitment, as articulated in their *Action Plan*, to honour the international rights of children – jurisdictional issues need to be remedied and/or dispute mechanisms need to be developed in order to make the following a reality:

> No. 82: Together we will strive to build supportive environments to improve the healthy development of Aboriginal children through safe, affordable housing, access to quality and culturally specific health services, child care and schools, as well as improved supports for parents, families and communities… Continued efforts should be directed at toward the development of partnerships and co-ordination among all sectors to promote and support indigenous, holistic responses. [114]

Geisbrecht J., in the inquiry into the death of Patrick Norman Redhead, provided the following recommendations in relation to funding and resource provision:

- **It is recommended that the parties** to the AJI-CWI [Aboriginal Justice Inquiry-Child Welfare Initiative] ensure that adequate funding and resources are provided in the restructured child and family services system for early intervention and preventive programming.
- It is recommended that in providing funding to child and family services agencies the provincial and federal governments specifically allocate separate funds for prevention programs and initiatives.
- It is recommended that adequate funding for professional training and development be built into the funding formulas of family services agencies.
- It is recommended that funding formulas for family services agencies not be based on population but on a model that reflects the needs and capacities of particular communities.
- It is recommended that additional specialized group homes and foster homes be developed in the province to ensure that all children who require such level 4 and level 5 resources need not wait for months for an appropriate placement.
- It is recommended that agencies be encouraged to develop specialized foster placements and residential care facilities in communities in northern Manitoba

> so that children from those areas need not be removed from their home communities in order to have their needs addressed.[115]

Further recommendations were provided in the inquest into the death of Susan Redhead, in relation to the lack of funding for adequate training of service and foster care providers:

- Based on the above recommendations, it is of critical importance that adequate funding for professional training and development be built into the funding provided to a child care agency.
- There should not only be funding provided to the Agency for training itself, but there should be provision to access provincial programs which have the expertise and are already in place to provide the kind of training required.
- There must be a rationalization of the method of funding to the Agency in order to allow for services to families and prevention programs.[116]

In summary, it is of the utmost importance that all stakeholders, provincial, federal, and First Nations governments/departments/ministries must find some way to resolve the long-standing jurisdictional disputes that have caused and continue to cause such unnecessary harm to First Nations children and youth.

V. CONCLUSION

> *It seems inconsistent with a modern Western industrial democracy that the welfare of hundreds of thousands of people is a matter of intergovernmental avoidance.* [117]

The impact of ongoing jurisdictional disputes on Aboriginal children has been well documented. Both the federal and provincial governments are aware of the effects of policies of avoidance and yet cooperation has yet to occur, and the current situation persists.

The federal government persistently contends that the provision of social services is within provincial jurisdiction and therefore any federal services and programmes are merely provided on a humanitarian basis.

> The federal approach is a defensive one, predicated on the notion that Parliament cannot be compelled to legislatively take responsibility, even if not doing so causes Indians harm. [118]

Alternatively, the provincial government and First Nations assert that the federal government has a constitutional, treaty and fiduciary obligation to provide adequate social services, including child welfare, to Aboriginal peoples in Canada.

Clarification of jurisdictional authority may be attempted through litigation. This, however, would be a long and costly process during which the pressing needs of Aboriginal children would continue to be unmet. The needs of these children cannot be placed on a shelf while the various levels of government and departments argue over budgetary constraints and differences in the interpretation of existing agreements.

There are no legal jurisdictional issues that bar governments from working together to improve the services and programs provided to First Nations children. The only bar appears to be that governments are more willing to dig in their heels, as a means of protecting their budgets, than to recognize and move forward in finding a solution to the appalling state of First Nations children.

Lack of will to find solutions is exacerbated by the lack of processes to discuss, analyze and resolve the issues. FNCFS agencies are faced daily with the effects of inadequate funding and resources and are deprived of a forum for expressing their frustrations. Effective and accessible dispute resolution processes are critical to the resolution of issues in First Nations child welfare. Any changes to the current funding formula will undoubtedly raise new issues and concerns for FNCFS agencies and the ability to express these concerns and find solutions will be crucial to the success of a new fiscal relationship.

The success of any dispute resolution process hinges on the recognition, by all parties involved, of the commonality of interests. Governments, ministries and FNCFS agencies must realize that improving/enhancing the health and well-being of First Nations children is in the interest of every Canadian. Further, it must be recognized that neither the simple addition of funds nor a simple change of policy will resolve the issues faced by FNCFS agencies. What we do know to be true is that this debate has gone on for too long and as a result First Nations children have and continue to suffer. It is of paramount importance that dispute mechanisms be implemented as soon as possible. Our children are our future.

In keeping with the United Nations Convention on the Rights of the Child, we recommend that a child first principle be adopted in the resolution of inter-governmental jurisdictional disputes. Under this procedure the government (provincial or federal) that first receives a request to pay for services for a Status Indian child where that service is available to other children, the government will pay for the service without delay or disruption. The paying party then has the option to refer the matter to a jurisdictional dispute resolution table. In this way the rights of the child come first whilst still allowing for the resolution of jurisdictional issues. In honor and memory of Jordan we recommend the child first principle to resolving jurisdictional disputes be termed Jordan's principle and be implemented without delay.

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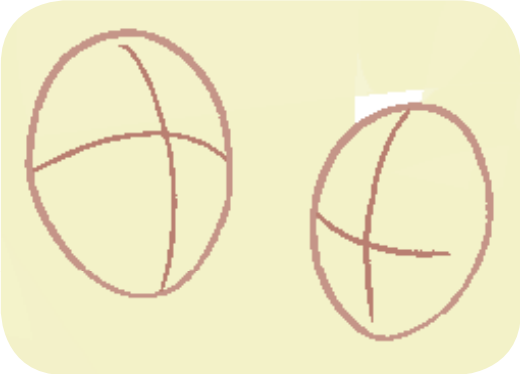
Promoting Community & Family Wellness

Least Disruptive Measures and Prevention



CHAPTER 4

Prepared on behalf of:
First Nations Child & Family Caring Society Canada

Written by:
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THE COST OF DOING NOTHING

Recent economic analyses on the costs of child abuse offer much evidence that the fiscal and societal outcomes of child maltreatment are staggering. Bowlus et al. (2002) calculate that $15.7 billion in societal costs can be avoided by preventing abuse and by allowing children to reach their full potential as contributors to society (p.104). The relationship between child abuse and later involvement with the justice system has also been captured by Hepworth (2001) in ***Jack's Troubled Career: The Costs to Society of a Young Person in Trouble***. The analyst has estimated the intergenerational effects of child abuse on the criminal justice system and other social services at roughly $511,500 per child. Other analysis has been conducted in the area of the health outcomes related to child abuse. A Saskatoon study found that adult female survivors of sexual abuse used 4.1 times more costly health services than the average population (Burgess et al. 2003). These are only a few of the fiscal and social consequences that make the rationale for prevention evident.

Analysts argue that the solution to mediating the incidence of child maltreatment lies partly in tackling the dire economic state of First Nations communities. Socio-economic factors, such as poverty, create many stressors in daily life that lead to family violence, addictions and youth detachments from formal schooling. The Royal Commission on Aboriginal Peoples (RCAP 1996) estimated that the lost productivity to aboriginal people in terms of unemployment and forgone earnings, in part from lack of education, as well as lower wages relative to other Canadians, totaled $2.9 billion in 1996 dollars. Another $4.6 billion was lost to the government from forgone tax revenues and other direct fiscal expenditures[1] above the average for the general population. Analysts calculated that "the cost of the status quo will rise from $7.5 billion in 1996 to $11.0 billion in 2016" (cited in McCallum 1999:124), a 47% increase.

These studies illustrate that the case for setting priorities in prevention is convincing, as it is not only fiscally prudent, but it is a humanitarian approach to averting child maltreatment. There is plenty of evidence that the fiscal commitment towards direct child protection will continue to rise in future if policymakers and society in general choose not to address these issues. In this chapter we present further compelling evidence, which illustrates that the costs of preventive interventions are minimal in comparison with the limitless costs of the alternative – doing nothing.

To begin with, the present funding formula provides more incentives for taking children into care than it provides support for preventive, early intervention and least intrusive measures. The 1998 Canadian Incidence Study of Reported Child Maltreatment (CIS-98) has documented an overrepresentation of Aboriginal children in foster care placements and other institutional settings compared to non-Aboriginal children. Socio-economic hardships, such as poverty and substandard housing, intergenerational child maltreatment, as well as addictions are key contributors to this phenomenon (Trocme, Knoke and Blackstock 2004). However, funding arrangements may also create perverse incentive effects that work against family-based approaches, which may be in the best interests of a child's well-being. Flette (2004) argues:

> "Current funding of FNCFS provides money for children only when they are in foster care or group care. No money is available for services to neglected and/or abused children in their own home. Services/funding to work with families to return children home have come under attack and are no longer available. In the mid 90's, DIAND eliminated completely the funding to agencies in Manitoba for Services to Families. This remains a service that agencies are required to provide in legislation, and the Province provides funding for this service to its agencies, separate and apart from Operations. DIAND policies result in on reserve children who are suffering from abuse and neglect not having access to comparable services in their own homes" (p.3).

In addition, though Aboriginal youth represent a high proportion of Canadian children in care,

the funding that is committed to this group is disproportionately lower than what is allocated to non-Aboriginal children (Flette 2004). It is estimated that, of the Canadian children living in out-of-home placements, 30-40% is Aboriginal children (Blackstock et al. 2004), while only 5.6% of children in the Canadian population are Aboriginal (Statistics Canada: Census 2001) [2]. Over the period 1995-2001, out-of-home placements for registered Indian children on reserve increased by 71.5% at a national level (McKenzie 2002), yet the latter's population (below age 15 and between 1996-2001) fell by 1% (Statistics Canada 2001, cited in Blackstock et al. 2004: 157). It is also known that welfare costs are rising at a rate of 6% per annum, while additional funding directed to Aboriginal children is not forthcoming[3]. Moreover, DIAND's financial support to First Nations child and family services agencies is roughly 22% lower than the average provincial funding (based on 1999 dollars) (National Policy Review June 2000, cited in Blackstock et al. 2004; Flette 2004).

The purpose of this chapter is to identify what is best practice in this area, for the information of agencies, but also in order to document the case for a change in the national funding formula. We also want to determine how a more preventive family well-being model should be included in the funding formula, as well as what the net cost implications would be. The latter involves not only estimating the costs of preventive measures, but also the savings that might accrue through limiting or reducing the number of out-of-home placements, as a result of alternative measures being undertaken. An estimate can be derived by examining the experience of agencies that have made the transition to emphasizing more preventive measures, such as the West Region Child and Family Services agency.

This chapter summarizes how a strengthened prevention agenda can be used to generate social and economic change in First Nations communities. The structure of information gathering for this project involved addressing three key components, including:

1. A review of the relevant literature and participants' feedback from a workshop on prevention informed the question of what is best practice as it pertains to preventive and least disruptive measures in primary, secondary and tertiary prevention.
2. An economic cost-benefit analysis addressed the question of what are the realistic fiscal savings that could be expected by reducing the numbers of children in care.
3. Gaps in the current national funding formula are identified. Recommendations are put forth on new areas of required programming and different possible approaches to funding them. We address the question of how a funding formula might incorporate this range of services, but at this stage, cost implications are dealt with only in a very preliminary fashion.

LITERATURE REVIEW

To begin with, the review of a significant child welfare literature informed the process by identifying what is deemed to be the best practices in primary, secondary and tertiary prevention work, including least disruptive measures (see Appendix 1). There is general consensus that the traditional practice of placing greater emphasis on child protection through the removal of children from their home or the cultural environment of a kinship system is immobilizing, in terms of building healthy First Nations communities. Many authors point out that such practices often result in a revolving door between foster care placements and returning home. Not only does this process endanger the child's sense of well-being, but it is more costly from a fiscal viewpoint, as the child's needs become even more complex. Indeed, the risks of child maltreatment are not necessarily reduced from a placement strategy outside the child's cultural setting[4]. The traditional approach to custodial care often defeats the intended purpose of a child well-being model of service delivery.

In contrast, a family-centered and family-preserving approach within a community-building framework and with much cultural content is perceived as a high-need area in the efforts related to child protection. Many analysts propose that a

prevention agenda, which keeps children in their home or, in more complex cases, within the kinship system is seen as integral to the child protection function. Family functioning itself needs mending with cultural healing strategies, in contrast to a heavy reliance on external custodial care. There is general consensus that incorporating a more proactive family-centered component to a child well-being model requires more appropriate levels of financial resources to carry out this work. But the current measures lean heavily toward a reactive level of tertiary intervention only. The major work that needs to be done in First Nations communities is in the area of primary and secondary level strategies in order to reduce the enormity of crisis-related interventions that emerge from a lack of services to begin with.

From this viewpoint, analysts in the field suggest that the solution is partly in a diversity of primary and secondary prevention services, which would redress some of the systemic or socio-economic issues in these communities. A comprehensive inventory of such services is listed in the appended literature review. The current situation is that these services, if offered at all, are often fragmented and poorly funded. They do not always serve the complexities of a family's dynamics very well. Thus, a general lack of proactive and multi-faceted preventive programs can be endangering to child and family outcomes.

Though the analysis in the literature review conceptualizes prevention in terms of primary, secondary and tertiary classifications, to some extent, this is incongruent with the notion of holism in Aboriginal terms. Program strategies often entail a continuum of overlapping and interlocking child welfare services that comprise all three levels of prevention. As described in the literature, preventive actions are often effective on several levels. The demarcation into separate levels of prevention stems from a public health model of prevention, in which such categorizations are distinguished by the level of risk exposure for the child or family. In some ways, this is in contrast to the meaning of prevention within a social work context.

Nevertheless, a regimented distinction between the different categorizations of preventive activities does permit the conduct of a review of the multi-level range of potential preventive services compared to the current services under the existing funding arrangements. It also allows us to identify the new financial commitments, which would appropriately serve families in First Nations communities. In other words, through such distinctions, the financial needs can be tied to specific preventive services. Consequently, the demarcation into various levels of prevention is not intended to create fragmented and inflexible services where it concerns program development and delivery.

To sum, the current reality is that many First Nations Child and Family Services agencies deal with high-risk families in which services typically fall into the category of tertiary intervention or, at a minimum, secondary prevention in terms of risk intensity. But current funding levels need to be reworked in order to make funding resources available so that agencies can address the issues of family dysfunction long before high-risk conflict situations surface. Funding is also needed to begin the process of strengthening social capital in these communities, which has potential for improving the chances of fostering First Nations independence. An appropriate response requires a multi-faceted approach in contrast to the current situation in which programs often deal with a narrow range of child protection issues only.

CONSULTATIONS WITH SERVICE PROVIDERS

The range of preventive programs identified in the literature review were also confirmed via a consultation process with analysts and service providers in the area of child welfare who were brought together in a one-day workshop on April 29 2005, at the Fort Garry Hotel in Winnipeg. Participants came to share their thoughts and experiences on child welfare issues and outcomes. Presentations by the workshop participants illuminated a variety of perspectives on the meaning of prevention in child and family

services. From the discussions, we assembled a list of challenges and program needs that were identified during the workshop. The meeting also drew on notes on an earlier consultation with representatives of the West Region Child and Family Services agency and a consultant with extensive experience in this area.

There was general consensus that the current funding arrangement works against having a comprehensive preventive agenda in First Nations Child and Family Services agencies. Heavy emphasis must be directed at a traditional or cultural component to family healing. More sustained funding is required in order to maintain the few existing preventive programs, in contrast to the current practice of relying heavily on grant dollars. Presenters spoke about the fact that there is room to do alternative programming given the current child welfare legislation, but the problem is with freeing up the funding in order to do this programming appropriately.

During the workshop, seven major highlights were identified by the presenters:

1. **Prevention is an investment in people upfront.** Legislation and the consequent funding arrangements must be prevention-oriented. There is critical need in the area of prevention, as only this type of approach permits the incorporation of Aboriginal values of holism. How much the government invests in families upfront, via primary and secondary prevention, is a good indicator of how many families and children will end up at a tertiary or reactive intervention level. The damaging effects from many children's past negative experiences in foster care placements provides evidence that agencies must be involved with families long before crisis ensues.

The current problem is one of access to a 'seamless continuum of care' in preventive services in order to decrease the number of children from entering formal care situations. Prevention involves plenty of focus on parenting capacity and other services that are likely to lead to purposive changes, but a key theme is that agencies can not always fit people into preventive models. Conversely, programming models have to fit to people's needs. Therefore, multifaceted and flexible interventions are needed in First Nations communities.

2. **A multidisciplinary and collaborating model of intervention is needed.** Service provision to children and their families should reflect a coordinated approach to better deal with many co-existing risk factors. For instance, the child and family services team must have the ability to collaborate with schools and other organizations, such as Child Find, on personal safety issues. Agencies need to partner with employers in the area and the leadership in the community via community task forces. For example, task forces could deal with issues of violence, sports and recreation for young people, as well as parental involvement in behavioral issues. Agencies need to work collaboratively with the health sector, other community-based organizations, and the kinship system.

A multidisciplinary service approach is critically important to prevention in child welfare outcomes, since there is evidence that the physical and mental health issues of Aboriginal children can be very complex. Child welfare agencies can not be self-sustaining, and they must use the human resource base of the community.

3. **Environmental issues – poverty, substandard housing and sanitation, and low educational and employment status –** matters very much where it concerns addictions, abuse and intergenerational family dysfunction. Current strategies are equally lacking the necessary preventive work from a community economic development approach. Indeed, the experience of daily living with these socio-economic issues and all of their consequent problems has left a legacy of developmental disarray in First Nations communities. For example, the literature review indicated that First Nations communities are beset by high suicide rates among youth, as well as disturbing levels of drug and alcohol misuse. Such phenomena are symptomatic of the multitude of stressors that young people encounter on a daily basis, and which are rooted in a very alarming rate of developmental erosion. There are enormous risks associated with the

expansion of child welfare services without allocating financial resources to some of the bigger developmental issues.

4. **Flexibility in funding to do multi-dimensional or multi-faceted programming** is viewed as being a best practice in preventive work. Curriculum-based programming has proven effective in many initiatives (e.g. Vision Seekers in the Skownan First Nation), but this is not necessarily the experience of all participants. Not all individuals can fit into a particular curriculum. For instance, two people may be affected differently by the same parental training program, with one individual needing a more intense intervention. Programs must bend in many directions to serve the needs of particular individuals and family healing strategies. Home visitation programs may involve lower caseloads for social workers and other agency service providers. Indeed, the challenge is for funding levels to adequately meet the enormity of this task.

A human development perspective to meeting the needs of children means that specific community problems are approached with a customized service delivery model from a variety of overlapping perspectives. Multi-generational family dysfunction means that multifaceted interventions are needed. These issues are not solvable with single dimensional program provision. It requires a different way of thinking around programming, such as restoring the relationship between child and community. The workshop participants pointed out that programming can always be done differently, that is, with flexibility as a key component. One size fits all types of services are not always proven effective.

5. **Service infrastructures are lacking in remote communities.** There is a need to secure adequate levels of funding, which will allow remote communities to build up their physical infrastructures, as well as the capacity of human expertise internally. This would permit more services to be offered within isolated communities as opposed to sending people outside the community, in particular, as it relates to youth with disabilities or special needs. There is a lack of physical resources and respite services needed to keep special needs children at home in such communities. This is a big issue in the North. Agencies can not continue to rely on outside expertise brought into the community, as it creates discontinuity in service provision from the comings and goings of professional staff. There needs to be a base of case workers with internal obligations or connections to these communities so that they can establish trusting relationships and continuity with families.

Funders also have to recognize that it may be less expensive to pay a psychiatric nurse to go into the home and to spend time there than to take the family out of the community to receive services in a larger center. Developing the human resource base of professionally trained people is important in terms of staff understanding the internal dynamics of a community, that is, how the community perceives and internalizes the healing process, as opposed to imposing it from the outside.

6. **Building a human resource base and community volunteer capacity** in First Nations communities must be a priority. Agency staff must be trained to take a broader community development perspective. The issues extend well beyond simply training professionals via a university degree. A trait of flexibility in prevention workers is an essential component of the work. Approaches that help to build social capital include:

   - A holistic outlook to community roles and responsibilities by building a volunteer base of peer support. Community volunteerism must be the new way of thinking. For example, a community mentoring program could place individuals who have successes as parents in a mentoring role to other families with parenting challenges;
   - Intensive training for foster parents; - A supervisor training program within agencies in order to foster a preventive mindset;
   - Training specialized staff to work in rural areas through the Bachelor of Social Work (BSW) training program;
   - Developing agency staff's skill set in order

to expand their comfort level with adult education, teaching and group facilitation.

7. **Capital investments are lacking in First Nations communities.** In most First Nations communities, there is also a need for a comprehensive plan relating to the capital requirements that would build up the physical infrastructure. Funding needs to address the ability of agencies to secure buildings and facilities and to have control over them. For example, internally-managed therapeutic foster care treatment units are crucial capital investments that will ensure stability and consistency for long-term placements, such as high needs/high medical needs children in foster care. Maintaining residential programs is essential to ensuring an Aboriginal content to programming.

From the presentations and the literature review, we devise specific recommendations for a revised funding formula. But first, we summarize the results of our investigation into the potential cost savings from a variety of alternative preventive strategies.

COST-BENEFIT ANALYSIS

In the current analysis, we were also asked to focus on answering a further question, as follows: **What are the realistic savings that can be expected by reducing the numbers of children in care?**

A brief economic cost-benefit study of a handful of the West Region Child and Family Services agency's programs, in the Province of Manitoba, informs the analysis with plenty of tangible evidence that the monetary cost savings and cost avoidance from prevention are substantial. Though this agency could rely on a substantive human resource base and an operational infrastructure in place, which allowed the staff to implement such programs, most agencies do not have the capacity to carry out such preventive initiatives within their existing funding levels. Nevertheless, the calculations demonstrate a critical need to re-direct policy costs in favor of primary and secondary

preventive services as a principal component of the casework model, while still adequately reacting to more complex cases of high-risk family conflicts. The highlights of the cost-benefit calculations for only a few programs offered by one community-based child and family services agency are summarized in the following:

- The fiscal savings from the Vision Seekers program, which has been operating in the Skownan First Nation Community in Manitoba for around five years, totals in excess **$25 million**. The program takes a human development approach to its residents' needs on the matter of education and employment. It offers life skills workshops, adult education, a community-centered therapy program, a career-trek program for young adolescents and their parents, all from a holistic Aboriginal family and community healing perspective. This is a fine example of preventive work that fully engages a community at all levels – children, adolescents, youth, parents and Elders. It appears to return $6.2 in savings in present value terms to the WRCFS for every $1 spent. When savings to other agencies are include, notably social assistance savings, a benefit to cost ratio of 16.5 appears to be returned, which is huge.
- The Gaa Gii Kweng (GGK) therapeutic foster care program has also demonstrated substantial economic cost savings for twenty-five special needs children in the federal children in care program. The net present value of the cost savings in custodial care for these 25 children (in 2005 dollars) from internally-managing

a therapeutic foster care service totals **$2.0 million**. At times, for more complex and high-needs child welfare cases, out-of-home 24-hour care is absolutely required. However, this comparative review with other residential care facilities located within the mainstream system has illustrated that First Nations Child and Family Services agencies need to ensure that therapeutic support services are provided within their own communities so that they can guarantee an appropriate cultural component.

- The Reclaiming Our Voices Project involves a three-day retreat for individuals who have significant issues with addictions and maintaining sobriety. Roughly 900 participants over a six-year period have received services from this initiative. Over this period of time, the savings in foster care from preventing children from entering formal care, as well as returning some children home, have exceeded **$14 million**. Furthermore, another **$63 million** in savings is expected to materialize in future from the prevention of FAS/E afflicted children, due to their mothers' maintaining sobriety during a pregnancy. The intergenerational outcomes and costs savings, though difficult to measure, are expected to be substantial. In short, this program appears to return $60 in present value terms to WRCFS for every dollar spent by the agency.
- The Treatment Support Unit, which involves intensive family preservation and reunification services, has prevented roughly 212 medium-to-high risk children from entering formal care. The net savings in foster care over a nine-month period exceed **$2.9 million or $3.9 million over a full year.** Keeping children in their homes, or at the very least within their kinship system in the community, is not only a preferred alternative which is best practice from a least disruptive approach, but the cost avoidance effects prove it to be cost efficient and effective, as well. Theis project appears to yield $12.8 in benefits to WRCFS (in present value terms) for every dollar expended.

While one should be cautious in using these ratios of benefit to cost, the bottom line is that returns to spending on prevention are huge and hence spending more on prevention makes sound fiscal sense.

Another way of approaching the issue is to take an aggregate view of the dollars saved by WRCFS by investing in prevention, in terms of NOT putting children into care. Estimates are over $1.5 million per annum after allowing for the cost of prevention programs. The case for paying more attention to prevention is, therefore, an extremely strong one, not just in human terms (which, after all, is really what counts), but also in fiscal terms.

No one questions that there is a need to sustain the existing reactive or tertiary system, which addresses high-risk family environments in which children face a high probability of abusive situations. The cost-benefit analysis illustrates, however, that a shift in focus must be directed to family preservation and reunification whenever possible. A key component in this is that agencies may be able to better provide their own therapeutic foster care residential facilities. Further, community capacity building efforts, such as the Vision Seekers and Reclaiming Our Voices projects, demonstrate that there are substantial fiscal benefits to providing First Nations agencies the adequate resources so that they can offer a continuum of high-quality primary and secondary preventive services. There is a high probability that such services will consistently meet the challenge of optimizing the government's investment dollars in fiscally sound ways.

THE UNDERFUNDING OF PREVENTION AND MAINTENANCE IN THE CURRENT FEDERAL FUNDING FORMULA

The final question is posed: **How should a funding formula incorporate this range of services and at what cost?** Put differently, what amount of funding would adequately equip First Nations communities with the vital financial resources needed to carry out the prevention task in order to respond to their needs of their residents? The starting point is that the current

INAC funding formula for Operations makes inadequate provision for prevention services.

Since the early 1990s, the INAC formula has been based on child population figures (0-18 years). Analysts and service providers in the field generally agree that most First Nations Child and Family Services agencies are precluded from implementing prevention programs due to a lack of funding within the current formula. More dollars would reduce the current heavy workload situation, and it would release some staff time so that they can focus on a preventive agenda. In this section, we identify gaps in the current federal formula based on the general philosophy of care in First Nations communities, which involves an ecological or holistic approach. In this general overview, we also include a discussion of the treatment of prevention in the current funding formula.

The existing Operations Funding Formula of INAC is discussed at length elsewhere in this report. In essence, operations funding is driven by two main variables and a few other less important variables. The main variables are the number of children in the 0-18 age group and a fixed amount per child, $727. These account for by far the greatest proportion of funding. In addition, there is a fixed amount per agency, which also depends upon number of children in the population being served, and which can reach a maximum of $143,000 and a fixed amount per band of $10,700. The three fixed amounts (per child, per agency and per band) are then adjusted by the INAC remoteness factor. These are the only variables determining funding.

In notes accompanying the formula, INAC explains that the fixed amount per agency is intended to cover the cost of a Director's salary, benefits and travel; a secretary, a financial officer, audit, evaluation, legal costs, ongoing organizational development and training of placement resources.

The fixed amount per band is intended to cover the costs of boards of directors, and of local and elders' committees, including travel and training.

The amount per child is intended to cover the costs of direct protection, resource development and prevention services, professional supervision, special services purchases, off-hours services, staff salaries, benefits and travel and overheads (rent, telephone, office supplies and utilities).

The formula is said to be based on the following assumptions: 20% of families need services; 6% of children are in care; the need for core positions in all agencies; supervisors at a rate of 1 to 5 staff; child care workers and family support workers at a ratio of 1:20 children: support staff workers at a ratio of 1:5 workers: wages based on average salary scales in Manitoba and Ontario.

The basic problem with the formula is that there is no periodic reconciliation between the amount of money calculated under the formula and the cost of the services those funds are supposed to purchase. It is not clear, therefore, that agencies can actually purchase the services they are supposed to. In fact, there is very good reason to suppose that in many cases, they cannot. Thus, there has been no adjustment for salary increases or other increases in the cost of purchasing services since the formula was introduced some 15 years ago. Any increase in funding has come, therefore, from increases in the number of children. In the circumstances, **either** the quality of services must have declined if child and family needs grew proportionately with population **or,** increases in costs of services can have been covered, if at all, only from a reduction in the proportion of children or families receiving services.

The consensus among First Nation agencies is that the funding formula makes inadequate provision not only for inflation but also for travel, legal costs, insurance, front-line workers, staff benefits, program evaluation, accounting and janitorial staff, staff meetings, Health and Safety Committee meetings, security systems, human resource staff for large agencies, quality assurance specialists and management information systems. Funding has not reflected the significant technology changes in computer hardware and software. Liability insurance premiums have increased substancially over the past decade. Agencies are expected to allocate these costs to

the operational funding category ($143,000), which has not kept pace with inflation since the mid 1990s. Regional Tables were formed across Canada in response to the National Policy Review in 2002. The Manitoba Regional Table (MRST 2002) participants have argued, "If agencies are unable to purchase liability insurance, they are in breach of their legislative responsibility" (p.6). And if they do find the money for the liability insurance, from which other operating item will it come?

There are also a number of expenditures currently charged to the Operating Budget which might be better charged to the Maintenance Budget. The Manitoba Regional Table (MRST 2002) has identified a number of concerns relating to expenditure categories, which INAC considers as falling within the operating budget, when in fact these costs are directed associated with child protection activities [5]. These include:

- The operational budget base of $143,000 is inadequate to cover the high legal costs for bringing children into care, such as attending court proceedings and preparing case plans for the courts. These and other extraordinary or unavoidable expenditures, such as the costs of inquests and medical examiner's recommendations, can easily consume a large portion of the operational budget in any given year. Frequently, these items are directly associated with having the child in care.
- Psychological assessments, subsidized adoptions, repatriation and unification costs (in-home support services when a child has been reunited with their family), and homemaker services are all related to providing for the needs of a child. There is also government funding disputes with respect to mental health therapies for children, which can be disruptive to a child's emotional well-being. Operational funds should not have to accommodate these costs.
- Some travel costs should also be billable under the maintenance budget, for example, if a worker has to escort a child to a major centre to receive services. From a service perspective, it is less traumatizing to a child if a worker who is familiar with the child accompanies him/her to a major centre in the situation where psychological or treatment services are not accessible in a community. However, travel costs that are not recoverable through FNIHB should be billable under maintenance, since they are directly associated with having the child in care.

These are only some of the purchased services that are directly related to the child care function. But agencies are mandated to offer such services under provincial legislative statutes. Hence, all these costs should be billable under maintenance budgets. They do not belong in an operations formula, since the expenditures are directly associated with child protection activities.

Often the issue is one of disallowed expenditures, which surfaces during the periodic compliance reviews. Consequently, maintenance billings are disqualified due to mismatched policy interpretations. For example, INAC is known to disqualify emergency services on reserve (INAC 2003). Flette (2004) argues "DIAND maintains that money for services to abused and neglected children in their own homes is found in agency operations budgets while at the same time they acknowledge that these are unfunded items in the operations budget" (p.3). Thus, there are plenty of inconsistencies in approved funding, which do not reflect the agencies' legal obligations under provincial legislative statutes. At other times, expenditures are disqualified due to jurisdictional payment disputes, as INAC argues that it is not the "first payer" for certain costs. An example involves government jurisdictional disputes with respect to providing services to children with complex medical needs.

More importantly, for the purposes of the issue under discussion, the formula provides insufficiently for prevention services. This shortfall has a number of dimensions. Firstly, if overall funding is inadequate, direct front-line services to children and families will receive priority and preventive services will be neglected, simply because of the urgency factor. Secondly, while the $727 per child notionally includes funding for two prevention workers per agency, provision for one prevention worker per band might be more reasonable. Moreover, remote communities may need more prevention workers. West Region

Child and Family Services agency in Manitoba would argue that the number of child care workers and the number of Family Support/Protection workers should both be increased from 1 to every 20 children in care to 1 to every 15. The $727 also provides for one resource worker per agency, but again, WRCFS argues this should be increased to 1 for every 20 foster homes. If all these adjustments were to be made, WRCFS would need an additional 17 staff to undertake prevention work appropriately, at a cost of approximately $1 million, or of about 45% of its existing INAC budget. The main drivers here are the additional prevention staff per band and the additional Resource Workers.

Access to prevention funding is also undermined by jurisdictional payment disputes. For instance, INAC does not pay for day care services to foster children on reserve, which is known to promote healthy child development in the early formative years (MRST 2002). The CFS Act requires First Nations child welfare agencies to provide such services. To date, HRDC has been providing minimal funding for day cares on reserve and, consequently, there are a limited number of spaces available.

Much of what WRCFS has achieved in the area of prevention has been funded not through the Operations Budget, but through the Maintenance Budget, via the block funding or Flexible Funding Option for Maintenance (FFOM) approach (previously known as block funding). Though FFOM does provide a solution that has achieved some successes in various agencies, the workshop participants pointed out that there are many reservations associated with block funding, including:

- Such a funding arrangement may not be suitable for all agencies, since it requires a level of management maturity and sophistication.
- The West Region Child and Family Services agency currently runs a deficit under the flexible funding option for the reasons that were discussed earlier (funding levels not keeping pace with inflation, etc.). While there is much emphasis on WRCFS as a model of flexibility in the use of funded dollars, this detracts from the key problem that there are too few dollars being allocated to agencies. It is imperative that the initial funding level for a FFOM be appropriate and that cost of living increases for prevention programs be included in the adjustment factors.
- Furthermore, a flexible funding option must be truly flexible on the programming side if services are to be tailored to specific community needs. Agencies should not have restrictions placed on the type of child welfare delivery model that they can offer in their respective communities.
- A flexible funding agreement must allow for unforeseen circumstances since certain crises or emergencies may cause maintenance costs to increase substantially. This would force an agency to reallocate basic maintenance dollars that were initially targeted to prevention initiatives. There is an exceptional circumstance review process within the existing policy; however, it has many gaps.

The consensus was that too much uncertainty is generated when an agency has to rely on their block maintenance budget to do preventive work. The effects can be devastating if things go wrong. Cash flow problems are immediate if an agency has one high medical needs child that comes into care unexpectedly. So there is a need to investigate other solutions to the funding of prevention programs.

Finally, it is also noted that the issue of compulsory services under provincial statutes versus discretionary programming needs to be addressed further. Although direct child protection expenditures are mandated under provincial legislation, there are several other categories of discretionary costs that should be provided by law in order to maintain consistency with Aboriginal values. For example, many preventive community development expenditures do not fall under the statutory legislative standards, even though these items contribute to family healing strategies, which should be funded.

As a further example, in all provinces, child welfare agencies are required to remove children from the home only after initial attempts are made

toward family preservation with least disruptive measures (i.e. keeping the child at home) [6]. But according to the Joint National Policy Review, this legislative standard is not funded consistently from one province to the next (Blackstock et al. 2004: 167-8). The fact that the groups of services which constitute the different levels of prevention/ least disruptive measures are not always clearly defined in the CFS legislation, and thus they are not necessarily funded, also undermines the ability of FNCFS agencies to provide appropriate programming (Shangreaux 2004). There needs to be more discussion about the levels of prevention – primary, secondary and tertiary – that could be legislated consistently across jurisdictions, as well as funded universally, in order to ensure that programs are based on a more holistic community development social planning process.

Blackstock et al. (2004) have argued a "disconnect between the funding and the jurisdiction as resulting in inequity of services to Status Indian children in Canada" (p.160). The Auditor General of Canada (1998) has stated:

> "14.76 Arrangements [funding arrangements] vary by province, and in some provinces Indians are not entitled to a whole range of services that may be available to Indians in another province. In Saskatchewan, for example, no preventive services, which Indians view as the most valuable, are available to Indians because they are not part of that province's service package. This is a direct result of federal recognition of provincial jurisdiction and of adhering to provincial standards for child welfare. In addition, because child welfare agreements with individual bands within a province vary, all bands in that province may not be entitled to the same range of services or the same level of funding" (Auditor General of Canada, 1998: Section 14.76 cited in Blackstock et al. 2004).

To conclude this discussion, there is little uniformity between the federal policies versus provincial standards around child maintenance funds, which is discriminatory. For instance, the Manitoba provincial legislation provides for three additional years of extended care to permanent wards beyond their 18th birthday, particularly, if the youth is participating in an education and training program. The same policy is not applied to federal children in care, as it is assumed that they will be covered under adult services. However, adult services are generally absent on reserve. Flette (2004) argues that the current practice of the treasury board authorities is to flag these funding disputes as "anomalies" to "bring agencies in line with Dir 20-1, rather than moving ahead to implement the NPR [National Policy Review] recommendations" (p.4) [7]. It has the effect of "creating a discriminatory two tier system for First Nation children and families, when compared to provincial systems" (ibid, p.4). Funding gaps lead to a lower standard of service in First Nations communities.

FUNDING RECOMMENDATIONS

This final section presents broad funding recommendations, which characterize a shift of emphasis to preventive and intensive family work. The workshop participants identified three broad funding options. Ongoing cost of living adjustment would be incorporated into all three approaches. In addition, as an interim measure, funding formulas could be adjusted to the current levels in terms of salary and benefits adjustments. This option would suffice as a temporary solution.

The goal of all three options is to eventually have a lower proportion of funding allocated to maintenance costs for children in care, and a much higher percentage of the funding formula being given to preventive programs and community development or family healing initiatives. In other words, the shift in emphasis is from out-of-home child protection to intensive family services, as well as primary and secondary prevention.

Option #1 A Multidisciplinary Team Approach to Funding.

For instance, for every 'X' number of statutory workers, the team must include 'X' funded prevention or community development worker

positions. Staffing can be broken down into various groupings. This is a multidisciplinary team approach. The prevention worker must be offered a similar salary scale to other professional staff on the team. Finally, a funding formula has to consider that a multidisciplinary team approach takes up more staff time to get the job done, due to ongoing collaboration.

This approach would include the following budget categories:

(1) **A maintenance line.** This would not differ substantially from the current practice, though its funding levels should recognize provincial legislative differences in programming, as opposed to trying create national uniformity in its funding practices. The problems identified above with respect to billable direct child protection expenditures should be addressed (legal, travel, homemakers, psychological, counseling, etc.). Presumably, as a shift takes place towards fewer out-of-home placements from the traditional child protection function, the required funding in this budget category should decline over time.

(2) **An operating line,** which could depend on the number of staff, as opposed to a population formula. Nevertheless, this line should include the appropriate adjustments for salaries (with inflation adjustments) and benefits (an increase to 15%), adjustments for high insurance costs and other identified gaps and inequities in the earlier discussion. The resource worker who recruits and support placement resources (foster care component) is included under this budget line.

(3) **A prevention line** tied into the number of staff or some notion of children in care/ family files opened. These would be specific positions, such as prevention and community development workers (1 per band suggested earlier to focus on primary and secondary level strategies), child care workers at the rate of one for every 15 children in care in order to provide intensive family support (tertiary level intervention), family support/protection workers (i.e. in home visitation) also at the rate of one for every 15 multi-problem families (tertiary level intervention). In addition, there also has to be specific positions to do outreach, advocacy and funding proposals (1 position for each agency).

Operating costs and staffing must also increase as the maintenance and prevention budget lines increase (i.e. accounting staff, administrative support). Moreover, for every five supervisors or administrative office staff, there should be one additional manager added to oversee their activities.

Teams would have to work with communities to design prevention programs appropriate to the ability of the agency to implement them and according to the absorptive capacity of the community being served.

Option #2 – Link Prevention Funding to Children in Care and/or Families Receiving Services.

The idea is that funding for prevention should be based explicitly on in-care days, families receiving services or some notion of the caseload. Prevention would be built into the caseload formula. This would borrow some of the features of those Provincial Funding Formulae which are driven by service rather than by number of children in the community. There would be a separate budget line for prevention, arrived at by applying a formula, perhaps along the lines suggested earlier; viz, 1 prevention worker per band above a certain size, depending also on remoteness; 1 Family Support/ Protection worker and 1 child care worker to every 15 children in care; and 1 resource worker for every 20 foster homes. This budget would be separate from and in addition to the Operating Budget.

A variation on this would be would be to base the provision for prevention only on the number of families receiving services, on the grounds that working with families is the way to prevent having to take children into care.

In either case, the proposal deals only with a way of determining funding. Staff and the communities

concerned would need to determine how that funding is used, although the successful practical experiences outlined earlier might act as a guide..

Option #3 – Link Prevention to an Accreditation System

This funding arrangement is based on an incentive system. It also integrates a system of accountability and transparency at different stages of capacity or levels of funding. Concerning the base funding to agencies, INAC's current funding formula would be applied in principle at all levels of capacity, but it would be enhanced (or replaced) to account for some of the concerns expressed in the earlier section and elsewhere on existing gaps in current financing. However, the government would also invest developmental dollars for preventive programming, but they would only be required to sustain the funding if tangible (and intangible) outcomes were achieved. The formula is expected to be more complex, but it permits the development of an array of diversified and flexible services that are tailored to the specific needs of child and family services agencies across Canada.. Funding would be tied to four levels in terms of "capacity to implement". There would be national overview of the program, but it would be managed by existing local authorities that set their own standards.

Under this program, First Nations Child and Welfare Services agencies are given funding options, as follows:

Level One: Agencies have the opportunity to apply for special developmental funds in order to complete a needs assessment in their communities, and to prepare a strategic plan and budget around the different levels of preventive programming. Staff at the local managing authority would assist in giving advice during the planning process, as well as providing some training of the workforce in order to implement a preventive agenda. Non-participating agencies remain at Level One, but they would be encouraged to raise their capacity level. Scale of operations is also a significant concern. Even with the financial incentive of developmental funds, some agencies with smaller scale operations will have difficulty in moving forward to the next capacity level of implementing preventive programs. These agencies will likely require extra funding, which is specifically dedicated to improving their scale capacity.

Level Two: Following the use of a developmental grant, the agency receives additional pilot funding, which makes possible the implementation of the preventive services and programs that were outlined in the strategic plan. Agencies would not be required to implement programs all at once. Pilot funding could be allocated incrementally based on a priority list of service needs, as outlined in the strategic plan. This recognizes that agencies have diverse needs in terms of programming, as well as priorities in execution. Implementation would have to be successfully achieved before receiving sustained program funding. For instance, is the agency doing what it said it would do? A quick evaluation by staff at the managing authority could determine whether the agency has earned the next stage of sustained funding for the implemented programs. Subsequently, formal evaluations would take place every 3-5 years, as is the current practice.

Level Three: The agency receives a sustained increase in their funding level based on preventive programming initiatives that were implemented in Level Two and as proposed in the strategic plan. The preventive services are funded over and above the minimum statutory services in the funding formula. Presumably, the maintenance budget should be declining for agencies that operate at Level Three. In addition, there is an option to access further developmental funding for any innovative projects that the agency wishes to explore. This would be done through a similar proposal process and pilot funding.

Level Four: An exceptional amount of programs/services are provided in First Nations communities, based on a five-year plan. A type of award system, with financial compensation or non-pecuniary rewards to management and staff would be implemented for those agencies who achieve a Level Four capacity to implement.

While this option is less easily translated into a dollar figure for prevention, the idea is that different bundles of prevention programs would be accessed by agencies at different development

levels. If there were interest in this approach, the bundles could be more clearly specified and dollar amounts attached.

CONCLUDING REMARKS

Drawing on the above, we can make the following statements;

1. **There is a strong case for putting resources into prevention**
2. **There is a significant literature on the types of preventive measures that have been attempted and there is knowledge of what might or might not work in different circumstances.**
3. **The returns to successful prevention programs are huge, both in terms of savings in agency costs but also in terms of broader societal savings.**
4. **The current INAC approach to funding does not adequately provide for prevention and, may even systematically discourage it by underfunding basic operational activities.**
5. **Some First Nations agencies have, nonetheless, managed to implement a variety of preventive programs with remarkable success. Sometimes this has been accomplished through the diversion of Maintenance dollars under a block funding arrangement.**
6. **The use of maintenance dollars for this purpose is subject to uncertainty, and block funding is, as well, not for all agencies.**
7. **Separate provision should be made for prevention funding.**
8. **This could be based on a team building approach, linked to children in care and/or families receiving treatment, or it could be based on a progressive accreditation process using the services of the First Nations Child and Family Caring Society or some other First Nation central agency set up for this purpose.**
9. **Whatever the funding approach, prevention activities must be encouraged and there is much successful First Nation experience to draw upon.**

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(Footnotes)

[1] The determinants of these expenditures include social assistance, the justice system, health and other social services, such as family services and substance abuse programs (RCAP1996).

[2] Available online at: www12.statcan.ca/English/census01/products/analytic/companion/abor/Canada.cfm.

[3] Flette (2004) has reported that, in Manitoba, 2004-5 funding cuts to FNCFS are roughly 8%, which amounts to a loss of one month's worth of funding, even though the number of children entering formal care is on the rise. The analyst proposes that the occurrence of reduced funding to First Nations agencies is a countrywide phenomenon (p.4).

[4] Placements are generally made based on mainstream rules and requirements as determined by provincial legislation.

[5] Many of these issues were also raised in the minutes of the meeting (entitled "Parking Lot Issues") of Executive Directors at First Nations Child and Family Services agencies in Manitoba, in September 2002. Flette (2004) also identified several of these funding challenges, which are often based on narrow interpretations of the treasury board authorities, as to which costs are considered "anomalies" from the approved expenditures in the policy manual. A further source is the "Overview of Social Anomalies", which is prepared by the treasury board authorities of Indian and Northern Affairs Canada (INAC 2003).

[6] See Shangreaux (2004) for a comprehensive discussion of least disruptive measures statements that are found in Provincial and Territorial Legislation. The analyst states, "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". However, the types of services constituting least disruptive measures are not always clearly identified in the various provincial legislations.

[7] The treasury board authorities keep track of expenditure variances between the national policy manual and actual agency practices, but to date such anomalies have not been funded.

APPENDIX A: DEFINITIONS OF COST-BENEFIT TERMS

Cost-benefit analysis (CBA) has been a widely utilized evaluative tool for a variety of public projects. In Canada, the first cost-benefit guide was developed for the government in 1961[1]. Later, a revised Treasury Board publication outlined the principles of CBA in the following:

"Benefit-cost analysis is a method of evaluating the relative merits of alternative public investment projects in order to achieve efficient allocation of resources. It is a way of identifying, portraying and assessing the factors which need to be considered in making rational economic choices. It is not a new technique. In principle, it entails little more than adjusting conventional business profit-and-loss calculations to reflect social instead of private objectives, criteria and constraints in evaluating investment projects" (Canada, Treasury Board, Benefit-Cost Analysis Guide, March 1976).

There have been several approaches to CBA in recent decades, from both program evaluation and countrywide societal perspectives. One of the major differences in the many published cost-benefit studies is how they vary in their points of view for placing money values on society's resources. Some studies estimate exclusively the fiscal impact to the government or, alternatively, the private costs to individuals. Other studies examine costs to the whole of society, including those costs that are imposed on the community. The current analysis considers the impact of a variety of program alternatives on fiscal expenditures. Therefore, it takes a program evaluation perspective.

The underlying principle in cost-benefit analysis is the notion of economic costs as opportunity costs. All of society's resources may be used in other most highly valued alternative ways. When society makes a choice about the uses of its scarce resources or its delivery of services, it also sacrifices the positive benefits or opportunities obtained by using the resources in some other way. For example, society's expenditures on police investigations and law enforcement, including human efforts in these activities, pulls resources away from preventive activities, such public education about drinking and driving or speeding. The latter alternatives may have resulted in other valuable and gainful societal outcomes. This notion of giving up one thing to get something else underlies economic cost analysis and, in economic terms, it is defined as an 'opportunity cost' (Levin and McEwan 2001).

Inflation, Net Present Value and the Discount Rate

Inflation factor: this is an adjusting factor to economic cost analysis because the value of money fluctuates over time due to increases (and sometimes decreases) in the general price level of goods and services in the economy, as well as wages in the labour force. These periodic adjustments to the value of money are referred to as nominal dollar changes (i.e. costs unadjusted for inflation). An inflation adjustment removes the price level effects by converting economic values into real dollar units, in other words, constant purchasing power over time. The costs of all future years are adjusted to the price level of a specific base year. The most widely used measure of inflation is the Consumer Price Index (CPI) (Levin and McEwan 2001).

Net Present Value (NPV): when comparing costs versus benefits over a period of time, a dollar's worth of expenditures today is worth more than the value of a dollar at some future date. This is because an invested dollar today will earn interest income. Put differently, any deferred program costs to future years involves lower real resource costs to society. If the costs and benefits extend over a number of years, the time value of money is adjusted together with the inflation factor (constant purchasing power). A present value calculation accomplishes this task by using a discount rate. It converts the value of program benefits and costs in the future to a present value, in order to compare them to the current or present costs (Levin and McEwan 2001; Nas 1996).

Discount rate: this is a type of interest rate that is used for the net present value calculation, and its value depends on the viewpoint under examination. For private outcomes, a standard

approach is to use the market interest rate because it reflects a return to private savings or a bank loan, in other words, the consumer's opportunity costs of consumption versus savings. From the state's narrow viewpoint, the cost of government borrowing is an appropriate discount rate. Broader societal effects are adjusted using a social discount rate which, in Canada, has been specified by the government's Treasury Board to be approximately 10%, a rate that reflects private firms' opportunity costs of investment (Levin and McEwan 2001; Canada: Treasury Board of Canada 1998).

(Footnotes)

[1] Published in 1965 as Sewell, W.R.D, John Davis, A.D. Scott, and D.W.Ross, Guide to Benefit-Cost Analysis, Queen's Printer, Ottawa.

APPENDIX 1

Best Practices In Primary, Secondary And Tertiary Prevention Work (Including Least Disruptive Measures)

Introduction

This paper reviews the literature on best practices in primary, secondary and tertiary prevention work, including least disruptive measures in preventing a child from coming into formal care. Much of the existing body of Canadian research in the area of child welfare proposes that First Nations Child and Family Services agencies are increasingly aware of a need for alternative ways of conceptualizing the delivery of services to families in their communities. For instance, more holistic, family-centered and family-preserving approaches within a community-building framework and which protect the integrity of cultural traditions are seen as integral to the provision of child welfare services (McKenzie and Flette 2003; Blackstock 2003).

Despite these common understandings, First Nations communities encounter significant challenges in supporting family-centered approaches, as well as targeting proactive preventive initiatives, in the face of substantial inequities in access to the critical financial resources which would redress a multitude of issues in service delivery needs (Blackstock 2003; Shangreaux 2004). The relevance of inadequate funding is that programming practices in child welfare are often informed by reactive policy responses to an enormity of crises-related interventions and, thus, reflect incongruency with the key goals of redressing some of the systemic issues. This includes the need for early intervention and preventive measures, the lack of which thwarts capacity building and family wellness in First Nations communities (Kufeldt 2003; McKenzie 2002; Shangreaux 2004). Consequently, most of the research included in this review identifies glaring gaps in proactive preventive service provision within the majority of First Nations communities.

Primary, Secondary and Tertiary Prevention

Analysts generally concede that the notion of prevention implies a continuum of child welfare services that promote healthy community living and, ultimately, fewer children from coming into formal care. However, the continuum of care is formally defined as falling into the three broad classifications of prevention: primary, secondary and tertiary. Preventive measures can include participation from the community (Elders), institutional (medical or educational systems) or social strategies involving family and individual, or any blend of these approaches. For example, a program aimed at decreasing the risk of FAS/E for the children of pregnant adolescents who smoke, drink or engage in substance misuse might combine medical services, health education in a school program, elder counseling, and participation in a support group (Health Canada 1997).

Prevention actions are often effective on several levels. For instance, consider the case of family training in behavioural management techniques for a special needs child in the home. The tools acquired by parents will likely apply to other children in the family. There may be intergenerational effects, as older adolescent children learn how to deal with the behavioural and learning issues of younger siblings, thus providing them general parenting tools to deal with their own children in future. In this way, a secondary prevention effort that is dealing with a specific risk factor overlaps with a primary prevention effort aimed at future generations.

Though there is interplay of the various types of prevention and the members of the population who benefit from such strategies, the current review is framed in terms of delineating into separate classifications the primary, secondary and tertiary prevention initiatives that are given attention in the literature.

There is also much discussion in the research regarding a "resource gap" in the area of prevention (McKenzie 2002). However, it is also proposed that none of the three levels of prevention can achieve maximum effectiveness unless key social issues are addressed through development-enhancing programming and funding directed at strengthening the physical and social infrastructures of the First Nations Child and Family Services agencies and their communities (Shangreaux 2004). Only through adequate financial resources and a community-building approach can general developmental strategies dealing with poverty, inadequate housing, addictions and violence be redressed.

The current literature review is structured to provide discussion of the range of prevention services that are considered necessary by service providers and other analysts in the social work field, in terms of best practices from a least disruptive measures approach. Tables 1-4 summarize an array of program categories that are aspired to in the current research within four broad classifications – primary, secondary and tertiary prevention initiatives, as well as general developmental strategies. Several of the programs listed in these tables, which range from an emphasis on wellness at one end to intervention measures for existing child maltreatment at the other end, have been proven effective in some First Nations communities and, thus, constitute best practices in child welfare service delivery (McKenzie and Flette 2003; MacLeod and Nelson 2003).

Primary Prevention

Primary prevention, sometimes referred to as "universal prevention", is delivered to the general population as opposed to an identified high risk group. As a proactive measure, it is focused on lessening the incidence of child abuse in a society by preventing risk factors which bring about family violence to begin with (MacLeod and Nelson 2003; Shangreaux 2004). Progress in primary prevention initiatives would include the substantial reduction or the eradication of the significant factors that lead to child maltreatment.

A program that is directed at preventing prenatal alcohol consumption is an example of primary prevention and it substantially reduces or eliminates any risk of birth effects, such as FAS/E. As further example of primary prevention from a culturally-based perspective, previous research has observed that what is considered necessary in

family wellness initiatives is a focus on teaching traditional parenting styles within a culturally-appropriate framework (which may also vary by band/tribe) (Cross 1986; Coleman et al 2001), in particular, as it pertains to the engagement of Elders in the process, the oral tradition and the use of the medicine wheel. Parents who are offered such services would learn what their culture tells them about how to be an effective parent. Examples may include a non-coercive styles and little emphasis on developmental timing. Traditional practices often avoid physical punishment and domineering or "take charge" parenting styles, which are superceded by hugging, praising and being emotionally available to the children (Coleman et al. 2001; Cross 1986).

Table 1 lists a review of various literature sources in the child welfare research, which identify recurring themes in what are best practices in primary prevention, as well as some of the existing innovative initiatives in community-based strategies.

**All of the literature emphasizes that such programming, which supplements the child welfare system, must integrate cultural practices and collaborative working relationships with the communities.*

Table 1: Literature Review of Best Practices in Primary Prevention

Type of Primary Prevention Program* *(proactive support, education and resources directed at the general population)*	**Literature Sources or Existing Programs** *(which are considered effective as best practices)*
Building parenting capacity: Public education campaigns that promote effective parenting, healthy pregnancies (avoiding alcohol, etc.); use media interventions, speaking engagements; **Resource materials development related to parenting:** Newsletters promoting Aboriginal spirituality and an oral tradition in child-rearing practices;	Blackstock (2003); Cross (1986); Kufeldt (2003); MacLeod and Nelson (2003); McKenzie and Flette (2003): medicine wheel framework; Resource example: *Parents* magazine; Shangreaux (2004);
Outreach and prevention services related to parenting capacity: Parent education programs and support groups; family planning programs; referral services; prenatal classes and home visits; Developing parenting training methods on the basis of traditional practices and using Elders in these processes of "self-conscious traditionalism";	Blackstock (2003); Brown et al. (2002); Cross (1986); Fairholm (1997): Canadian Red Cross workshop -- "Walking the Prevention Circle"; McKenzie (2002); MacLeod and Nelson (2003) – emphasis on multi-component programming; Shangreaux (2004); WRCFS 2005-6 Service Plan: Welcome Baby Programs;
Males and parenting: Programs that engage males in the parenting process e.g. group therapy interventions that incorporate traditional Aboriginal practices, ceremonies and, in particular, child-rearing values; Elder involvement;	Dion Stout (1997); Dion Stout and Kipling (1999); McTimoney (1993);
Public awareness campaigns – FAS prevention: Fetal Alcohol Effects/Syndrome (FAE/FAS) prevention using an integrated approach which also addresses some of the social issues in the communities;	Bennett (2002); Dion Stout (1997); Health Canada (1997); McKenzie (2002); WRCFS 2005-6 Service Plan: Addictions Education Workshops;

Table 1: Literature Review of Best Practices in Primary Prevention

Public awareness campaigns – How to report suspected child abuse/neglect; Public awareness re: domestic violence; Awareness around risk factors re: child offending behaviors; Child abuse and neglect awareness;	Dion (1999); Health Canada and Assembly of First Nations (2003); Longclaws et al. (1994); Shangreaux (2004); WRCFS 2005-6 Service Plan: Family Violence Education Workshops; Child Abuse and Neglect Awareness Week activities;
Public awareness: Community meetings; workshops on community needs (this overlaps with a developmental strategy);	McKenzie (2002);
Resource materials development: Relating to suicide prevention; Culturally sensitive resources re: FAS/E	Royal Commission on Aboriginal Peoples (1995); Health Canada and Assembly of First Nations (2003): suicide prevention; Health Canada (1997) – FAS/E;
Family Support Initiatives: Family resource centers intended to strengthen the ability of families to access existing supports and resources; life skills (budgeting, taking care of a home, self-care, etc.); marriage preparation workshops; family activity nights; family camps;	Shangreaux (2004); WRCFS: 2005-6 Service Plan;
Family Support Initiatives - **Education:** School-based prevention efforts around child maltreatment; Availability of pre-school programs and resources; **Parents:** Engaging parents in the education system and prevention issues early in the formative years (e.g. parent volunteer initiatives) re: substance/alcohol use; **Children:** Prevention/intervention in the primary school years (the formative years) re: substance abuse, sexual abuse, self-esteem/confidence building, etc.; Babysitting training courses for adolescents;	Budgell and Robertson (2003): Aboriginal Head Start Program; First Nations Education Steering Committee (2001): "A Handbook for Parents" resource; Gfellner (1991); MacLeod and Nelson (2003); Pancer et al. (2003): Highfield Community Enrichment Program in Ontario (includes a home visiting program) – annual per child cost $1,300; Resolve and CS/Resors (2004): Ndaawin coloring and activity book as a resource for the prevention of sexual abuse;
Nutrition programs in which traditional foods are included; **Smoking Cessation** programs;	Wright et al (2005)
Building youth capacity through prevention efforts targeting children and adolescents (healthy activities): Recreation programs, summer programs, sports, camps, etc. for children, including those with special needs; "Back to the Land" outings; Culture and language programs; life skills;	First Nations Center (2004); Durst et al.(1995); Trocme et al. (1998); Shangreaux (2004); Wright et al. (2005); WRCFS: 2005-6 Service Plan: Summer Program for Youth (workshop and activity-based);
Culture: programs related to the development of cultural identity, also taking account of the diversity in Aboriginal culture; youth awareness of traditional values;	Wright et al. (2005);

Secondary Prevention

Secondary prevention, often referred to as "selective prevention", is also a proactive strategy which more selectively targets an existing risk factor or high-risk families, and it takes measures to lessen the threats of child maltreatment with early intervention. Such initiatives are focused on bringing under control any harm or distress that may have been done before the secondary intervention started, thus, the onset of any negative effects may be reduced rather than being completely prevented (MacLeod and Nelson 2003; Shangreaux 2004).

For instance, a child who at risk for neglect or abuse can go to a neighborhood drop-in center and have access to an individualized support network of youth workers, in particular, given her dysfunctional home circumstances. Aside from being a safe place to go, the idea behind the prevention agenda (i.e. the drop-in center) is to change the youth's reference group, to provide positive role modeling and to deal with the social circumstances that make the youth more apt to eventually engage in drug and alcohol misuse or to become an offender (Resolve and CS/Resors 2004).

Other proactive secondary level strategies that have been proven effective include home visitation, which begins in the prenatal period or at birth. In their study, McLeod and Nelson (2003) found encouraging results from this type of early intervention, the positive effects of which superseded other crisis-focused intensive home-based programs that intervene in existing child

Table 2: Literature Review of Best Practices in Secondary Prevention

Type of Secondary Prevention Program* (resources, support and education directed at high-risk families and youth*)	Literature Sources or Existing Programs (which are considered effective as best practices)
Building parenting capacity: parent education programs/ workshops and support groups for at-risk groups: e.g. adolescent lone-parent mothers in high schools or in addictions treatment programs; **Programs for parents with special needs children;** **Smoking cessation programs;** **Family strengthening** programs that deal with challenges of parenting: parent education workshops to develop skills around the needs of their children; **Household management** workshops;	Bopp (1985); Public Health Agency of Canada -- Nobody's Perfect Program & Resource Kit; Shangreaux (2004); Wright et al. (2005); WRCFS 2005-6 Service Plan: Teen Parenting courses; Early Identification, intervention and support for pregnant women who are affected by alcohol or family violence; Parenting Training programs (Positive Indian Parenting; How to Talk So Kids Will Listen); Child Development Training Workshops; Household Management Skills Training;
Family support: Day Care, Parent aide, respite services to families at risk (lone-parents, multiple children, etc.); Support groups for men and women (co-ed adult groups);	WRCFS 2005-6 Service Plan: Healing and Sharing Circles; Women's Circles: Survivors of Sexual Abuse;
Family support: Resource centers where information is disseminated: families can access books, pamphlets, videos on family issues, etc.; **Community drop-in centers** for families where they can engage in healthy family activities; **Ongoing seminars/workshops** on issues, such as child abuse, sexual abuse, historical grief; colonization and residential schools, family violence;	Shangreaux (2004); WRCFS: 2005-6 Service Plan: 12-week healing program for women who were child victims;

* *All of the literature emphasizes that such programming, which supplements the child welfare system, must integrate cultural practices and collaborative working relationships with the communities.*

Table 2: Literature Review of Best Practices in Secondary Prevention

Type of Secondary Prevention Program* (resources, support and education directed at high-risk families and youth*)	Literature Sources or Existing Programs (which are considered effective as best practices)
Home visiting programs for families with children at risk: Support and assistance to women in the pre-and-postnatal periods; prenatal nutrition; in-home support for children and other family members;	MacLeod and Nelson (2003); Shangreaux (2004); WRCFS: 2005-6 Service Plan;
FASD prevention for at risk women/teens	Health Canada (1997); WRCFS: 2005-6 Service Plan: Reclaiming our Voices Project and Annual Conference (Health Canada);
FASD intervention: Early diagnosis and intervention services as it pertains to child developmental issues (special needs; FAE, etc.)	Bennett (2002); Health Canada (1997); Wright et al. (2005); WRCFS: 2005-6 Service Plan;
Support for children with special needs (FASD intervention): **Respite and other child care services**, as well as better financial support for families, including foster families with special needs children (recreation, lessons); (E.g. behavioral and learning disabilities; FAS); **Community-based therapeutic services** (child development counselors, etc.) **Specialized resources for youth with greater needs;** training sessions for teachers and other community helpers;	Dion Stout (1997); Health Canada (1997); McKenzie (2002); Shangreaux (2004); WRCFS: 2005-6 Service Plan: Training sessions for teachers with FAS/E children in the classroom; training for community helpers; Wright et al. (2005);
Intervention services for youth with disabilities (special needs) or complex needs when they reach adulthood;	Health Canada (1997); Wright et al. (2005);
Building youth capacity: Neighborhood drop-in centers where children can go when home circumstances are difficult; children's groups; **Pre-school programs** for at risk children; training teachers in schools;	Budgell and Robertson (2003): Aboriginal Head Start Initiative; Second Step Program (training for teachers and parents); Resolve and CS/Resors (2004) – Ndaawin Program, Winnipeg; WRCFS: 2005-6 Service Plan: Children's Group;
Support to girls who have been sexually abused; Suicide prevention;	Health Canada and Assembly of First Nations (2003); Royal Commission on Aboriginal Peoples (1995); WRCFS: 2005-6 Service Plan: 13-week adolescent girls – survivors of sexual abuse group; Suicide Prevention Workshops for Teens;
Youth employment and life skills programs	WRCFS: 2005-6 Service Plan: Vision Seekers (for youth – ages 19-25);
Anger management workshops for youth	WRCFS: 2005-6 Service Plan: Anger Management Training for Teens;
Risk assessment tools development re: suicide prevention for youth;	Health Canada and Assembly of First Nations (2003); Royal Commission on Aboriginal Peoples (1995);

* *All of the literature emphasizes that such programming, which supplements the child welfare system, must integrate cultural practices and collaborative working relationships with the communities.*

maltreatment cases (i.e. tertiary prevention). Their results suggested that, while tertiary prevention is a crucial service, "the earlier the intervention the better" as it pertains to positive child outcomes (p.141).

A further secondary prevention example of family support and parenting education measures for at-risk families is the Nobody's Perfect Program, a Health Canada developed and funded parenting program (usually 5-6 weeks long) and resource series for parents of children from birth to five years of age. The program is also offered on an individualized basis. The resource kit of five user friendly books -- Safety, Parents, Behavior, Body, Mind -- covers family violence and abuse related topics, such as children's behavioral issues, parent's self-care and injury prevention. This resource is distributed through an array of other community-based programs, such as the Aboriginal Head Start Programs. This strategy's effectiveness as a best practice in prevention is evident in evaluation and impact studies, as well as the continuing high demand for the program and its resources since its inception in 1987 (Public Health Agency of Canada: Online. Available at: www.phac-aspc.gc.ca).

Tertiary Prevention

Tertiary services in a least disruptive framework, often referred to as "indicated prevention", encompass family support and family preservation or rehabilitative services that enable at risk children to remain at home (Trocme et al. 1998; Shangreaux 2004). Tertiary prevention is implemented when the conditions of child maltreatment already exist (i.e. there is demonstrated evidence), therefore, such interventions are viewed as reactive measures (MacLeod and Nelson 2003; Shangreaux 2004). The idea is to minimize the adverse conditions of serious harm to the child while stressing the preservation of the family. Heavy emphasis is placed on tertiary prevention services in most of the literature. For example, tertiary intervention in the case of a maltreated special needs child would entail a range of overlapping services to help minimize the adverse effects of these circumstances. Programs may include medical procedures, social supports for the child and guardians, as well as educational efforts.

The most cited example of family-centered tertiary services is the Homebuilders' Model,

Table 3: Literature Review of Best Practices in Tertiary Prevention –

In the context of family-centered preservation and stabilizing services, such as the Homebuilders (HB) and Wrap-Around Models (WA)

Type of Tertiary Prevention Program* *(this often involves rehabilitative services directed at families where maltreatment has occurred: case management, counseling, education, etc.)*	**Literature Sources or Existing Programs** *(which are considered effective as best practices)*
HB: Home-based intensive support services: Shorter term intensive family preservation and stabilization protective services with 24-hour availability of trained mental health staff; crisis counseling services; Multidisciplinary case planning/assessments with the family, including regular visitation programs; **A coordinated team approach** to service provision through integrated services, including after hour services, in more complex cases when the removal of a child is possible – a network of services: social workers, foster parents, health professionals, teachers, kinship system, etc.;	Blackstock (2003); MacLeod and Nelson (2003); McKenzie (2002); Shangreaux (2004); Trocme et al. (1998); WRCFS: 2005-6 Service Plan: Homemaker and Parent Aide Services; case planning with families; McKenzie and Flette (2003); Kufeldt (2003): the idea of "corporate parenting" – *Looking After Children* was designed in this way.
HB: Rehabilitative services that build parenting capacity: More highly intensive parental support – in-home, groups and training that focuses on alternative techniques from current negative practices for effective parenting; child management skills, etc.	Blackstock (2003); Coleman et al. (2001); MacLeod and Nelson (2003); Shangreaux (2004); Trocme et al. (1998);
HB: Rehabilitative services: Parent mentor programs, e.g. non-abusive families could act as role models and provide support (community helpers social support system); family violence treatment programs;	Flette (1999); Green (1996); MacLeod and Nelson (2003); McTimoney (1993); Shangreaux (2004);

Table 3: Literature Review of Best Practices in Tertiary Prevention –

In the context of family-centered preservation and stabilizing services, such as the Homebuilders (HB) and Wrap-Around Models (WA)

HB: Rehabilitative services: Family supervision services; mental health intervention services for children who have been abused, instilling cultural and spiritual practices;	Blackstock (2003); Shangreaux (2004); Trocme et al. (1998); Wright et al. (2005); New Directions, Winnipeg: Families Affected by Sexual Assault Program (FASA);
Respite services (child care) to reduce family stress; emergency care; recreational support;	Shangreaux (2004); Wright et al. (2005); WRCFS: 2005-6 Service Plan;
WA: Family reunification services: Strengthen the wider family network (grandparents, non-relative community helpers, etc.); keep children in their own communities and culture approach; support to children who are reuniting with extended family; Preventing discontinuity in placements and workers assigned to cases; Intensive and long-term support to families/children that are reuniting after children have been placed in care;	Blackstock (2003); Brown et al. (2002); Fox-Decent (1993); Jones (2003); Kufeldt (2003) – notion of a "seamless continuum and continuity of care"; McKenzie (1999); Shangreaux (2004); Trocme et al. (1998); WRCFS: 2005-6 Service Plan: comprehensive transition case planning (team approach), in-home family/ individual counseling; one-to-one parental skill development, etc. Elder services to youth returning to their kinship systems;
Family Support: Services that help remove an abusing parent from the home (and support them in other ways, e.g. addictions services), not the child, in particular, if there is a non-abusing parent in the home; Drug and alcohol treatment referral; Treatment Support Services: individual, family, group counseling and family conferencing; life skills training; (wo)men's/co-ed groups dealing with family stressors; post-treatment support; Programs in dealing with sexual abuse (holistic healing models); women's support groups;	Blackstock (2003): Hollow Water First Nation; McKenzie (2002): Miikanaa Centre for male sexual offenders; Daily (1987): Awareness Wheel approach for victims and perpetrators of sexual abuse; Green (1996) ; McKenzie and Flette (2003); WRCFS: 2005-6 Service Plan: Men's Group to deal with issues of family violence (26-week program for men who batter); Anger Management workshops; Men's Healing Circle; Women's Sharing Circle; Survivors of Sexual Abuse/Domestic Violence groups;
Culturally specific addictions recovery programs for parents, including residential treatment and post treatment support (e.g. treatment for men who batter);	Wright et al. (2005); WRCFS: 2005-6 Service Plan: Women and Addictions recovery circles; Mandatory treatment for men who batter;
Youth Services	
Treatment centers or special schooling programs for children with behavioural issues, also located in the local communities;	Health Canada (1997); Wright et al. (2005);
School partnerships: in-school counseling support for at risk children; Programs dealing with child sexual abuse; anger management; treatment for adolescent boys who are at risk for sexually offending;	WRCFS: 2005-6 Service Plan: 13-week adolescent girls – survivors of sexual abuse group; Anger Management Training for Teens; Miikaana program (sexually offenders);
Services relating to out-of-home placements: wrap around perspective involving extended family, elders, leaders and other community members; loss and grief counseling; access to trained counselors for child and foster families;	Brown et al. (2002); Carrier-Laboucan (1997); Cross (1986); McKenzie (2002); WRCFS: 2005-6 Service Plan;

Table 3: Literature Review of Best Practices in Tertiary Prevention –

In the context of family-centered preservation and stabilizing services, such as the Homebuilders (HB) and Wrap-Around Models (WA)

Therapeutic Foster Home Program	WRCFS: 2005-6 Service Plan: GGK program;
Residential prenatal and postnatal programs for adolescent mothers; adolescent pregnancy supports; short-term emergency receiving services on reserve (placement beds, etc);	Ma Mawi Wi Chi Itata Centre (Winnipeg): residential program for teens; McKenzie (2002) & WRCFS: 2005-6 Service Plan: Oshki-ikwe facility; Piikaanijii home;
Independent living programs for youth leaving care (> age 18), i.e. transition services related to life skills; employment counseling; training; support to prevent youth from becoming offenders; healthy recreation opportunities;	Biehal et al. (1995) study in England of treatment and control groups showed mixed results in terms of differences in the outcomes for the youth (cited in Davies 2003); Kufeldt (2003); McKenzie (1999);
Programs dealing with youth addictions	WRCFS: 2005-6 Service Plan: Youth Addictions – Co-ed Gym nights;

* *All of the literature emphasizes that such programming must integrate cultural practices and collaborative working relationships with the communities and kinship systems.*

which is the main family preservation approach, as it pertains to mainstream approaches. Such a model targets families in which the children are at risk of being placed in formal care arrangements, and it tailors home-based services to their specific needs. Traditionally, in this model, social workers and family support workers have smaller but more intensive caseloads (Shangreaux 2004; MacLeod and Nelson 2003). However, this model is not without criticisms in the literature (Kufeldt 2003: 276-7), and Coleman et al. (2001) propose that Aboriginal ways of helping can remedy several of the issues that result in the diminished effectiveness of these programs as it pertains to evaluative outcomes.

For instance, the concept of a normal and healthy family in Aboriginal culture, which includes a support network of extended family and community members, is inherently incompatible with the mainstream paradigm of the nuclear family structure (Blackstock 2003; Cross 1986). Coleman et al. (2001) argue that, in Aboriginal culture, the notion of an in-law may be nonexistent and elders or neighbors might be considered a part of one's family (p.55). Likewise, a child whose biological parents die is not perceived as an orphan (Cross 1986). Thus, family-centered services when seeking options in child placements entail working with relatives who have had successes as parents (i.e. aunties or grandparents) and who parent from a cultural appropriate perspective (Coleman et al. 2001).

There are also many tensions resulting from the fast-moving pace of Homebuilders programming as it pertains to expectations of results from the intervention. Brown et al. (2002) refers to this as a "drive-through" approach (p.143). One suggested remedy is that funding has to be adapted to looser time constraints, in other words, slowed down and focused on building relationships from a client-directed perspective. In their meta-analysis of child welfare programs, MacLeod and Nelson (2003) argue that "program intensity and longer program duration" are key success factors in home visitation programs (p.141).

Hence, from this viewpoint, agency workers should not be expected to enter a home and resolve the family's issues in any meaningful way within one month's time. Services must be slower-paced, client-directed and flexible to building relationships, as well as not interfering in a huge way in order to ensure congruency with the family's culture and belief system (MacLeod and Nelson 2003). One cited example of family empowerment in the literature is that culture may determine how a family resolves its disagreements;

hence, respect must be given to these traditions (Coleman et al. 2001).

Since children are viewed as a gift to the community, as opposed to individuals or couples, the literature emphasizes the notion of forming a circle around the family in case planning, which includes relatives in foster care placements, Elders and other community members (Blackstock 2003; Coleman et al. 2001; Cross 1986). One example of a natural helping system which must be reflected in programming initiatives is the Wrap Around model, in which a multidisciplinary team approach to problem-solving combines formal and informal services, including collaborative "community-based services; individualized services; cultural respect; families are partners; flexibility in funding…" (Shangreaux 2004: 18). Coleman et al. (2001) argues that the "helping process involves multiple layers" of working relationships (p.65), with a key objective being to enhance the capacity of a natural helping mechanism or network. There is much emphasis in the community-based research that a continuum of services, as opposed to a single-worker approach, is considered necessary to carry out a family centered services approach with a least disruptive measures perspective (Coleman et al. 2001; Shangreaux 2004), Coleman et al. (2001) also propose that programs offered must involve spirituality interventions, such as sweats, smudges and pipe ceremonies, as a few examples.

In sum, there is general consensus in the research that family preservation services can only really work effectively as a collaborative effort between formal services and community partners: Aboriginal healers, Elders, other community-based services and extended family. The single-worker approach within rigid time frames simply does not work (Brown et al. 2002).

Developmental Programming

Best practices in developmental programming would support the design and service delivery (and evaluation) of community-based healing strategies, also tailored to the specific needs and cultural heterogeneity or identity of each community (McKenzie and Flette 2003; Shangreaux 2004; Durst et al. 1995). The basis for this model of practice is the notion that residents in the communities are in the best position to actively participate in dialogue on which solutions are in the best interests of their own communities (Brown et al. 2002; Fox-Decent 1993: 72).

Moreover, analysts argue that many underlying social issues in Aboriginal communities must be addressed on several levels if any type of prevention initiative relating children coming into care is expected to be effective (Shangreaux 2004; Kufeldt 2003; MacLeod and Nelson 2003). The underlying principle in developmental programming is to reinstate natural systems by developing culturally relevant practices in seeking to protect children with a further goal of strengthening the infrastructure of First Nations communities (Blackstock 2003; Cross 1986). Cross (1986) argues that formal child welfare services, including tertiary prevention services, have become the primary model of practice only because "natural systems became less able to protect children" over time (p.286). Development strategies would also improve income and social status by taking account of the wider systemic issues in the community at large.

The types of developmental strategies listed Table 4 are fuelled by deeper and more complex social issues – poverty, unemployment, racism, violence, sexual abuse, addictions and the growing prevalence of fetal alcohol birth effects. Combating

Table 4: Developmental programming directed at strengthening the infrastructure of the First Nations Child and Family Services agencies and their communities (i.e. a community-building approach)	**Literature Sources or Existing Programs**
Socio-economic issues around income and employment and the future of the youth: Community economic development projects to combat poverty; Life-skills training for at-risk children; vocational assessments; Create part-time jobs and job placement training for at-risk adolescents in order to nurture connections to the labour market/schooling; Work towards a long-term goal of training youth in various professions, such as psychology, speech therapy, family violence support workers, social work, etc.	Chapman (1991): family violence worker training program at the Vancouver Native Education Centre; Early labour market connections programming, such as the Urban Green Team, in Winnipeg (which is a culturally-based strategy); Charter et al. (1994): Career counseling for Aboriginal youth pilot program; Durst et al.(1995); McKenzie and Flette (2003): Vision Seekers Program; the Mino-Bimaadizi Project; McLeod and Nelson (2003); Wright et al. (2005);
An ecological approach, which considers other socio-economic issues that create stressors in family functioning – lack of housing and overcrowding in existing housing; lack of food banks; addictions; Unsafe drinking water and sewage treatment; Lack of women's shelters, culturally-based domestic violence counseling and victim/perpetrator support programs; need for better policies re: domestic violence that acknowledge the issues and integrate men in proactive initiatives;	Aboriginal Justice Implementation Commission (2001); Chapman (1991); Dion Stout and Kipling (1999); Dion Stout (1997); Health Canada (1997); Durst et al.(1995); Kufeldt (2003); Longclaws et al. (1994); McTimoney (1993); Canadian Incidence Study on Reported Child Abuse and Neglect (Trocme et al. 1998, p.41); Wright et al. (2005);
Cost-of-living recovery on expenditures which targets the problem that some goods and services may be more expensive to transport into remote communities	Blackstock (2003); Wright et al. (2005);
Developmental approach/resources to address the need for better service infrastructures and relevant programming in First Nations communities/remote areas: Create advisory committees, which would form community-based linkages in terms of the voluntary sector; emphasizing a collaborative service provision focus that builds local capacity and support networks – working with health services, band controlled programs, local schools, etc. (idea is to keep youth in the community); Special focus on the problems of isolation of reserve communities from outside community-based services and coordinating/networking of service provision;	Blackstock (2003); Coleman et al. (2001); Irvine (2004); McKenzie and Flette (2003); McKenzie (2002); Nadjiwan and Blackstock (2003); Wright et al. (2005);
Developmental approach/resources for youth capacity building: Create advisory committees of Elders and young members of the community, which would develop strategies to involve youth in working on solutions to broader social issues in their communities – adolescent drug and alcohol misuse, community-driven approaches to suicide prevention; ways of implementing traditional teachings, healing, ceremonies, drumming, etc.; mentoring programs; healthy recreation activities; Coordinated community responses to child maltreatment issues;	Bennett (2002); Bopp (1985); Coleman et al. (2001); Durst (2000); Durst et al.(1995); Health Canada and the Assembly of First Nations (2003): suicide prevention; Royal Commission on Aboriginal Peoples (1995): suicide prevention; Shangreaux (2004); WRCFS: 2005-6 Service Plan;

Developmental approach/resources to build volunteer capacity in communities: Ongoing work on expanding a community-based volunteer sector within reserve communities, perhaps even promoting youth and parents' participation in local capacity building, community helpers volunteer initiatives, etc., also taking account of geographic isolation;	McKenzie (2002);
Developmental approach/resources for internal agency infrastructure: User-friendly training manuals; ongoing funds for staff training and professional development so that an adequate human resource base of culturally-sensitive staff can be realized/maintained; Ongoing re-evaluation of casework techniques and case loads, i.e. planning/assessments/ consultation; Training of more specialized social workers (emphasizing a collaborative approach) and focused training for families/foster families in childhood cognitive learning disabilities and behavioral issues (FAS/E issues);	Caring for First Nations Children Society (2002); Cross (1986); Green (1996); McKenzie (2002, 1999); McKenzie and Flette (2003): Children with Special Needs Coordinator position developed a parent support network, educational resources, etc.; WRCFS: 2005-6 Service Plan; Wright et al. (2005);
Adequate resources allocated to the supervision and ongoing support of front-line staff: Parent aides, child support workers, community helpers, teaching homemakers, etc. **Bureaucratic systems:** findings ways to reduce the front-line staff's paperwork needed to fulfill the obligations under the Child and Family Services Act, which create times pressures with regards to casework;	Coleman et al. (2001); WRCFS: 2005-6 Service Plan: sharing circles for community helpers; specialized training for caregivers; Caring for Caregiver Training; Training community helpers to facilitate groups; Training support and respite workers; volunteer recognition activities; McKenzie (1999);
Physical infrastructure issues: wheelchair accessibility; Equipment and supplies for children with disabilities;	Wright et al. (2005); WRCFS: 2005-6 Service Plan;
Targeted funds for the management and administrative structures to support primary, secondary and tertiary prevention initiatives, e.g. MIS systems to reduce staff workloads and expedite information sharing; agency governance issues, such as strategic planning of priorities and regular service plans that involve the community;	Bennett (2002); Durst (2000): Kahnawake Shakotiia'takehnhas (PQ) & Nog-Da-Win-Da-Min Family (Ont.) and Community Services: community consultation projects for social service delivery; Flette (1995); McKenzie and Flette (2003); McKenzie (2002, 1999); WRCFS: 2005-6 Service Plan;
Developing **clear definitions of disability**, for example to include behavioral issues and cognitive learning disabilities; Develop a culturally sensitive resource base and public awareness around issues of disabilities (FAS/E, etc.).	Health Canada (1997); Wright et al. (2005);
Funding research advisory groups and ongoing research, which helps to inform evidence-based policy and practices around prevention (e.g. with a child outcomes focus); Policy development: e.g. take measures to create consistency/ coordination in the practices of FNCFS agencies (within reasonable parameters since activities/teams are decentralized); Standardized data collection (comparative statistics) and reporting for research and evaluation purposes;	Davies (2003) – research that is linked into the policy process (p.384); Fox-Decent (1993); Jones (2003) – Looking After Children Model in England – policy rooted in evidence drives and supports the required changes in practices (p.374); McKenzie (1999); Nutter et al. (1995);

many of these systemic issues which impact the entire community is apt to have a more positive impact on prevention strategies, but the enormity of the task is costly to implement and vulnerable to unsustainable financing from government sources.

Conclusion

This paper reviewed the literature on best practices in prevention work, from a standpoint of least disruptive measures in preventing a child from coming into formal care. At the risk of oversimplifying the multifaceted continuum of care in child welfare service delivery, in this analysis, prevention initiatives are distinguished separately into four classifications: Primary, Secondary and Tertiary prevention, as well as Developmental Strategies. Though there has been action on a variety of preventive initiatives within several First Nations Child and Family Services agencies, the glaring obstacle is that financial resources are rarely made available to develop an appropriate inventory of services. Such strategies would better match the philosophy of service delivery which puts the responsibility back on the community by emphasizing intensive family support and cultural connections.

Furthermore, this literature review investigates a range of critical developmental issues in First Nations communities, which are at the core of much child maltreatment – poverty, unemployment, racism, violence, sexual abuse, addictions and the growing prevalence of fetal alcohol birth effects. It highlights the issue that families in distress, as well as the consequent intergenerational outcomes and costs to society, ought to make prevention measures a concern for all Canadians, and not just the responsibility of the First Nations Child and Family Services agencies acting in isolation. In light of these issues, a recurring theme in the literature is that, while reactive or tertiary prevention programs are absolutely needed for families who are presently in distress, it is of paramount importance that the question of sustained financial support be addressed so that proactive primary and second preventive activities, as well as community development initiatives are undertaken in First Nations communities.

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MANAGEMENT
Information Systems

CHAPTER 5

Prepared on behalf of:
First Nations Child & Family Caring Society Canada

Written by: Stanley Loo

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Background

This review of information systems used by FNCFSAs (First Nations Child and Family Service Agencies) is part of the funding formula development project. Costs related to acquiring and maintaining information systems can be substantial and are important data needed for testing the three funding formula options identified in Phase One of the project. It should also be recognized that since information systems cannot be implemented without a viable technological infrastructure in place, accurate cost estimates must be based on all aspects of technology deployed, not just those specific to information systems or databases.

Although FNCFAs vary in their present levels of use of computer technology and information systems, they, like all other organizations across Canada mandated to deliver child protection services, must ultimately have a uniform capability, by means of appropriate computer technology, to operate efficiently, manage and monitor delivery of child protection services, report on service or program outcomes, facilitate service planning, and meet various accountability expectations and standards.[1] Specifically, they must strive to use technology to achieve the following core functions of child welfare agencies:

1. Managing day-to-day office operation, e.g., word processing, accounting, payrolls, newsletters, etc.
2. Managing caseloads, service delivery, and resources.
3. Meeting performance expectations and legislated requirements for accountability management, i.e., ability to quickly generate accurate and current financial reports, caseload reports, and other types of status or ad hoc statistical reports for government departments or regional authorities.
4. Producing performance feedback information for management, and contributing child protection outcomes data to the national project currently underway.[2]
5. Exchanging electronic datasets with external

organizations, such as university research centers, government agencies, and the proposed First Nations Statistical Institute.

The Auditor General of Canada usefully pointed out in their December 2002 report[3] that deploying appropriate computer technology is the only way for First Nations organizations to meet the demanding reporting requirements imposed by federal government departments and to ensure that the data is accurate. Authors of the report were "concerned about the burden associated with the federal reporting requirements." In reviewing the experiences of four First Nations and two tribal councils in Saskatchewan, the report authors estimated that the total number of financial and non-financial reports that a community was required to compile annually for INAC, Health Canada, HRDC and CMHC was between 168 and 202. The federal government acknowledged that the current reporting requirements must be made less cumbersome and less excessive. Among the strategies proposed to streamline reporting requirements were:

- "…make full and efficient use of available technology".
- Building on the positive results of the Government on Line (GOL) initiative, "promote electronic data exchange as a way of doing business with First Nations".

Purpose of Review

This review aims to answer the four questions pertaining to information systems listed in the project proposal, and they are:

1. "What kinds of MIS systems are currently in use by FNCFSA and how do they compare with provincial systems?"
2. "What kind of MIS system is required to meet agency requirements and ensure adequate interfaces with provincial and national data systems?"
3. "What are the costs of developing and maintaining such a system?"
4. "What are the implications for funding formula budget?"

In order to identify practicable computer technology options that would allow FNCFSAs to build the kinds of operational and data capability described above, and to estimate costs, we need to know the present situations, efforts, and technology deployment plans in the agencies. In addition, since FNCFSAs are accountable to their respective provincial governments for service delivery as per provincial child welfare legislation, policies and standards, and, as part of this legislative arrangement, are required to use or contribute case data to provincial information systems, it is equally important to understand the kinds of provincial-agency arrangement in place and the extent to which such arrangements help FNCFSAs to meet their day-to-day operational and management needs. Recommendations regarding suitable information systems must be made on the basis of a balanced understanding of specific situations, needs, issues, and the larger context in which agencies operate.

Methodology

Scope of the Review

Currently there are 119 FNCFSAs in nine Canadian provinces[4], according to FNCCSC (First Nations Child and Caring Society of Canada). Since the 11 Ontario agencies are not included in this project due to a different funding arrangement the Ontario government has with First Nations agencies in that province, a total of 108 FNCFSAs constituted the population for this review. However, we knew that time and budget limitations would not allow us to interview too many agencies. It was therefore concluded that, given the specific purpose and focus of this review, our data collection priority should be to include those agencies that have their own information system. Should resources allow, we would also interview agencies that use provincial systems exclusively as well as those that wanted to contribute information or discuss operational or funding issues related to office automation or information systems. We also decided that, to the extent possible, information should be collected from all nine target provinces so that we would have a more complete picture of issues across Canada.

Data Collection

The following data gathering approach was adopted for this review:

1. FNCCSC identified agencies that used a uniform computerized information system and invited them to participate in the review.[5]
2. The researcher called the designated contact, explained the purpose of the interview, named the types of information to be collected,[6] and set up a time for the interview. Email confirmations were sent out.
3. The researcher conducted phone interviews with the designated persons(s)[7] at the pre-arranged time.
4. At the end of the interview, the researcher asked, where warranted, for the name of the system developer and/or the name of a provincial contact for information on the provincial system.
5. Where more information needed to be collected from the system developer or the provincial contact, steps 2 and 3 were followed. On a number of occasions, additional provincial officials had to be identified and interviewed because the original contact did not have full answers to our questions, and steps 2 and 3 were repeated. HRDC also gave us with the names of provincial officials who were members of the National Child Protection Outcomes Working Group, and encouraged us to contact them where needed.

Information was collected from agencies, government officials, and/or system developers in all eight target provinces. Specifically, eleven agency officials representing eight FNCFSAs were interviewed. Detailed technical information was gathered from three external consultants or technology suppliers related to systems installed in three of the agencies. We also interviewed ten provincial officials having direct knowledge of or responsibility for implementing provincial systems. The following table provides the breakdown.

Number of People Interviewed

Province	Agency Officials (FNCFSAs)	Provincial Government Officials	Developers /System Suppliers
British Columbia	2+ (2 agencies)	0	0
Alberta	0	3	0
Saskatchewan	2 (2 agencies)	1	2
Manitoba ++	3 (1 agency)	3	0
Quebec	1 (1 agency)	0	0
New Brunswick +++	2 (1 agency)	1	1++++
Nova Scotia	1 (1 agency)	1	0
Newfoundland and Labrador	0	1	0
Total	11 (8 agencies)	10	3

\+ 1 was an in-house developer

++ 1 manager in a First Nations regional authority became unavailable at the prearranged interview time, and did not return phone message.

+++ 1 technical manager became unavailable at the prearranged interview time, and did not return phone message.

++++ Same person who supplied the same system to the Quebec agency interviewed.

The researcher received very good cooperation from all respondents, and successfully completed all interviews, despite their lengths. The interviews, guided by a set of standard questions, were conversational in style and exhaustive in nature, involving frequent probing for details. All respondents provided frank, factual and useful information. The average time to complete a phone interview was 1 hour and 30 minutes. Two agencies also shared materials or reports with the researcher as supplementary information. A number of respondents were re-contacted for additional information.

Types Of Information Collected

Depending on the role of the respondent, the kinds of questions varied.

The main emphasis in interviewing government officials was on understanding the current features of the provincial information system, including specific technical changes made to the system since the nationwide review conducted in 2001-2002, availability of child protection outcomes data in the current system, and arrangement between the government and FNCFSAs regarding use of the provincial system.

Interviews with FNCFSA officials and their technology suppliers focused on the following areas:

- Types of technology deployed
- Technical features of agency information system or database
- Data sharing capacity
- Interface with provincial system
- Ability to generate reports for INAC and government departments
- Availability of child protection outcomes data
- Arrangement with province regarding using the provincial system
- Technical support
- Technology costs
- Technology funding
- Future plans

The timeframe and budget of this project did not allow site visits or hands-on verification of the information provided. For example, we did not have an opportunity to extract data from agency databases for testing.[8] Probing for technical details during the interviews was the only way to allow us to assess the technical capability of an information system.

Findings

This review of office automation and information systems used in FNCFSAs employs a case study approach, arguably the most appropriate one given the purpose of the review and the complex issues involved. The nationwide scope, inclusion of all major types of organizations, collection of detailed information from the most knowledgeable respondents,[9] and vigorous efforts to gather frank and accurate information from both agency and government sources allow us to form a good and balanced understanding of specific situations, needs, issues, and the larger context in which agencies operate. The findings of the review, issues identified, suggested solutions, and costs are presented in the following sections.

Using Provincial Child Protection Information Systems

In the majority of provinces, most, but not all, FNCFAs have some sort of computer technology, and many of them are connected to the respective provincial information systems in one way or another.[10] As provincially mandated child welfare organizations, all FNCFSAs are required to contribute to the provincial system information or data pertaining to all off-reserve cases (on-reserve cases as well in some provinces) they serve. Agencies do so by means of an online system, paper reports, or document/spreadsheet files. Other than this requirement, the government does not stipulate the kinds of systems agencies must use to manage their day-to-day operation, including service delivery.

Although very few FNCFSAs outside Ontario[11] have their own child protection information system, it appears that the majority do use computers for basic office functions. Those agencies without their own information system use either the provincial system or a paper file system to manage service delivery. It also seems that all provinces prefer FNCFSAs to use some aspects of the government system, and some have rolled out a deliberate plan to sign up agencies. Provincial recruitment strategies typically involve offer of free ISP service. One province also gives out free computer hardware and installation service if the agency does not have and cannot afford suitable computer equipment. Building a province-wide broadband infrastructure of fiber optic lines to allow remote agencies to have high speed connection to the provincial system is a project underway in one province. At least two

are considering using satellite ISP service to speed up data transfer for remote locations where dialup connection is currently the only option. At the same time, it is interesting to note that, according to one agency, they have to pay the government $4,000 a month for using the provincial system. All other provinces offer free access to the government information system.

Provinces seem to vary not only in terms of level of enthusiasm and strategies with respect to signing up FNCFSAs for the provincial information system; how an agency accesses the government system is also different. Depending on the provincial plan, there are generally two different ways. One setup involves installing thin client remote access and security software on the computer of each worker mandated by the province to provide child protection service. [12] (Note: non-mandated workers are not allowed to use the provincial system.) The other arrangement is for the province to install in the agency a "provincial" computer and a printer dedicated to the government information system. Only the provincial worker on location or a government-authorized agency employee is allowed to operate the equipment. It should also be noted that access by agency staff to the provincial system is restricted to certain service delivery and management modules only. Financial modules are, without exception, not available to agency users. Security concern is the reason cited for restricted access.[13]

Private Information Systems Installed

Outside Ontario, there are at least four different private systems in use by a handful of FNCFSAs in Canada. The following paragraphs summarize their features and capacity, as per information provided by their respective respondents.[14]

What appears to be the most advanced system of the four is a Sybase client/server application produced with PowerBuilder. It was first developed in 1995. The main modules include Basic Case Management, Payment, Support, Prevention, and Outside Service. A noteworthy feature of this particular system is a case audit module developed to meet government audit standards. According to the respondent, this system is properly designed, incorporating adequate data integrity enforcement features, and has the ability to store various types of historical data and to output electronic data files. However, only a limited set of data needed for the national child protection outcomes measurement project is currently available. Enhancement plan includes incorporating a case tracking capability among agencies. Six or seven agencies in the province are also using this system under a lease agreement.

The second private system is a SQL Server client/server application being written in Visual Basic. Mainly for reasons of lack of sustainable funding, this system is still under development after 10 years.[15] According to agency respondents, this system, when completed, will allow them to easily manipulate data to meet various statistical reporting requirements, to exchange data with other agencies, to interface with government systems, to contribute to internal and external planning and evaluation processes, to efficiently manage service delivery and human resources, and to achieve a high level of operational and financial accountability. This system will also have program performance indicators for inputs, outputs and outcomes, a recommendation or requirement under INAC's new Results-Based Management and Accountability Framework. The types of information available will include: core information on child-in-care and protection cases, information on foster parents, homemakers and parent aides workers/supervisors, financial information to facilitate payments to foster parents and service providers, and police and Abuse Registry Information. A cursory review of the work produced to-date suggests that this project has the potential to evolve into a comprehensive and capable system, if the database structure is properly designed and the application competently written to take care of complex data linking, among other technical challenges. The agency producing the system has been using Excel to manage service delivery. Because of incongruence in structure between their Excel spreadsheets and the SQL Server database under development, most of the existing data cannot be salvaged. However, being a system under development, opportunities to include historical outcomes data should be reasonably good.

The third private system, installed in two agencies in two different provinces, is supplied by a firm in Toronto, Ontario. It is a 4th Dimension client/server database application probably written in Visual Basic. The modules available are Agency Resources, Clients (demographics, education, employment, etc.), Cases (intake, placements, and services provided), and Payment. According to the company's technical salesperson, the database design, including data integrity enforcement, is adequate and the database has all sorts of historical data that can be unloaded for external use. We were also told that all the data needed to measure child protection outcomes are available. Each module can be customized for or by the client. Features customizable include pick lists, reports, data extraction, and other things. This application seems to rely extensively on templates to achieve customization. Service planning is a main feature: it allows the worker to pick service objectives and associated outcome indicators, identify service providers (workers/agencies), set target dates, review results, etc. Built into this system are the standard assessment tools used in the agency's province. The two agencies that have this system also use AccPac for accounting functions, but software interface between this system and AccPac is not available, according to one of the respondents.

The fourth private information system, reported by one FNCFSA included in this review, is actually an off-the-shelf contact management software package customized for that agency. This package is a Pervasive SQL database application, but it is unclear which language is used to develop it. Although this system is not a specially developed database application in the traditional sense, its usefulness might still be appreciated by the user because the supplier is able to customize, within limits of the database structure, to suit existing, new or changed requirements. According to the supplier of this system, producing reports for INAC is not a problem. Most of the data needed for child protection outcomes measurement is not in the system, likely due to the particular original purpose and database structure of this software package.

Computer Equipment Deployed

FNCFSAs that have computers use various versions of Microsoft operating systems, enabling system software, and office suites. Microsoft Publisher, Project and Visio are also used by at least one agency. PCAnywhere and NetSupport Manager are the most popular remote support tools, which, along with Citrix, are also used for remote access to database servers. In addition, many of the agencies, whether they use a private information system or the provincial system, also use an off-the-shelf accounting software package, and AccPac is the dominant choice in this category. However, in all situations, because of absence of software to connect the accounting package to either the provincial or the private information system, staff needs to enter data twice. A common practice is to enter data into one system first, print out a hard copy of the information, and manually key the copy data into the second system.

In terms of computer hardware in use, there is an even greater variety, perhaps a reflection of different affordability levels and history. Computers range from Pentium I or II workstations with 64MB RAM running Windows 95 to dual-Xeon class server computers powered by Microsoft Server 2003. While all the agencies interviewed have a Windows local area network in place (some also implement messaging function), we are certain that workstations in many of the small agencies not interviewed are mostly older standalone computers.[16] Depending on the operating system of the provincial information system, the workstations of mandated workers permitted to access the government system may or may not have 3270 emulation software installed.

Remote access is mainly via broadband or dialup connection. However, satellite is being considered by a large agency as a substitute for the much slower dialup option. Thin client remote access software and firewall software are often used. VPNs are also deployed to achieve secure communications for remote users who directly connect to agency networks or servers. Generally, both governments and agencies have a similar setup for remote access, although it is most likely that government systems deploy more

functionality servers, enforce stronger firewalls, and implement tightly coded secure services portals.

Technical support in the largest agencies is provided onsite typically by agency staff along with offsite consultants. Small agencies rely on offsite support personnel. Government technical support is available only to agencies that have a direct connection to the provincial system.

Mainly because of lack of money, many agencies are still using computer equipment that should have been retired years ago. For example, two provincial sources mentioned that they had come across agencies still using very old and slow computers running Windows 95. We assume they were referring to Pentium I, 486 or even 386 computers. Using obsolete hardware and operating systems usually gives rise to the following problems:

- Efficiency is compromised due to inability to deploy newer software that is not only easier to use but also has better features. In addition, older equipment takes more time to process commands, and cannot use new hardware devices due to lack of software drivers.
- Networking older computers running obsolete versions of Windows or DOS is always technically difficult. The operation is slow, and unstable or failed performance is a common complaint.
- It is expensive to maintain old equipment because it has a higher than normal rate of hardware failure. Certain replacement parts are sometimes hard to find and costly.
- Downtime due to hardware problems further reduces worker efficiency. Need to redo things because of lost or damaged work also directly wastes staff time and causes frustration.
- Information systems cannot be deployed using obsolete or inadequate hardware and software. (Details are presented in later sections of this report.)

In the case of one agency, old technology has already created problem for them to work or liaise with the government. They have had difficulty exchanging electronic files with the province since the time the government upgraded their operating system and office software. According to the respondents, they need to upgrade their office automation software from Microsoft Office 97 to Office 2003 and the operating system to Windows XP Professional in order to comply with the current software standards of the province. Software upgrades often entail hardware upgrades too which, in this case, mainly involve, fortunately, installing more main memory in the computers.

Provincial Child Protection Information Systems[17]

Since the time the characteristics and capacity[18] of provincial/territorial child protection information systems were assessed in 2001-2002, improvements have been made to a number of these systems. Although reviewing government systems is not a focus for this review, it is useful to briefly mention the main characteristics of these systems, especially with respect to technology deployment and availability of data for the measurement of child protection outcomes. Both aspects have implications for technology planning on the part of FNCFSAs.

The 2001-2002 review showed that enterprise-scale client/server computing had been very widely implemented to add flexibility and power to mainframe computing. Using industrial-strength RDBMSs (Relational Database Management Systems) to develop child protection information systems across the nation was another distinct development. A number of the provinces, including a number of mainframe-centric operations, were hoping that enterprise-level applications developed with RDBMSs and deployed on a client/server computing architecture would allow them to have a unified information system for sharing data across departmental programs and services. We also noted that, although client/server computing has been very popular since early 1990s and true RDBMSs were first introduced in early 1980s, mainframe-centric government organizations had been slow in adopting such new technology.

Four years later, both trends continue to dominate. Availability of 64-bit computing will

expectedly solidify these trends and give rise to more and better design options. In addition, there is a significant emerging development: web applications. Both Nova Scotia and Manitoba have produced viable applications deployed on the Internet. The Manitoba system may also the first Linus-based child protection system in Canada. It is very likely that other provinces are also pursuing the web option, which particularly suits users with high bandwidth communication lines and equipment. Security should not be an issue with the deployment of VPN or tightly coded secure internet services portals. Despite what appears to be a rapid adoption of cutting edge technology by the majority of provinces, a small number of them are still mainframe-centric, working in a predominately UNIX environment where terminals or workstations running 3270 emulation are in widespread use.

Other than using better technology to improve performance, facilitate users anywhere to access the information system, and reduce costs, a number of provinces have also been working to enhance their data ability to support national efforts to measure child protection outcomes. Among the eight provinces included in this review, British Columbia, Alberta, Manitoba, Newfoundland and Labrador, and New Brunswick are taking a lead role in this area. In at least three provinces, data not previously available is being added to their databases. The following table summarizes progress made to-date by the eight provinces included in this review, regarding availability of data needed for outcomes measurement in their information systems.

Data Needed for Outcomes Measurement	Alberta	British Columbia +	Manitoba	New Brunswick +	Newfoundland and Labrador	Nova Scotia	Quebec /CJLPJ +	Saskatchewan +
Child's DOB	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Child's sex	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Child's Ethno-cultural background	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Date case closes	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Number of minor children in family when case opens	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Number of minor children in family when case closes	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Date case opens	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
New opening/reopening marker	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
Reason for opening/reopening	Yes	Yes	Yes	Yes	Yes?	Yes	Yes	Yes?
Maltreatment								
· Date	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
· Type of maltreatment	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
· Level of substantiation	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
Address change								
· Date	Yes	No	No	Yes	Yes	Yes	No	Yes
· Address or postal code	Yes	No	No	No	Yes	Yes	No	Yes
Injuries/deaths								
· Date	No	No	Yes	Yes	No	No	No	No
· Type	Yes?	No	Yes	Yes	No	No	No	No
· Severity	No	No	Yes	No	No	No	No	No
· Intentionality	No	No	Yes	No	No	No	No	No
School grade/graduation								
· Date	No	No	Yes	Yes	No	No	No	Yes?
· Grade	No	No	Yes	Yes	No	No	No	Yes?
· Graduation (Diploma)	No	No	Yes	No	No	No	No	No
Child's behaviour								
· Date	No	No	Yes	No	No	No	No	No
· Rating	No	No	Yes	No	No	No	No	No
Placement								
· Date	Yes	Yes	Yes	Yes	Yes	Yes	Part[19]	Yes
· Type	Yes	Yes	Yes	Yes	Yes	Yes	No	Yes
· Reason for placement/move	Yes	Yes	Yes	Yes	Yes	No	No	No
Parenting capacity								
· Date	No	No	No	No	No	No	No	No
· Rating	No	No	No	No	No	No	No	No
Ethno-cultural matching								
· Date	Yes	Yes	Yes	Yes	Yes	No	No	Yes
· Placement inclusiveness	No	No	No	No	No	No	No	No
· Match	Yes	Yes	Yes	Yes	Yes	No	No	Yes
Legal authority								
· Date	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes
· Type	Yes	Yes	Yes	Yes	Yes	Yes	Yes	Yes

+ Current information not collected. Most likely no change since 2002.

Information System Costs to Agencies

Office automation and information system technology can be costly to acquire, maintain, upgrade and support. This review discovered that many of the computer-using agencies have not upgraded their systems for a long time and are finding themselves having problem using newer releases of software, operating their private information systems, or even exchanging electronic files with the government. A few managed to find money in their budgets to upgrade or replace some of their computer equipment to avoid failed operation.

This review uncovered a wide range of cost figures related to technology deployment, and some of these figures, representing either an agency's current year estimates, or expenditures actually incurred in the agency's current or last fiscal year, are presented below.

The primary reason for the big variance has a lot to do with the specific needs and size of the respective agencies. A larger agency has more computers to upgrade and/or replace, and the cost is naturally much higher than that of a small agency. How much something costs also greatly depends on what is acquired or gets replaced.

Agency	Computer Hardware (LAN included)	Computer Software	Information System	Others (Tech support, training)	Total[20]	Notes
A	$251,220	$69,375	$85,000 (System development work)		$405,595	Of this total, cost to upgrade hardware and software to allow for compliance with provincial requirements = $220,040
B	$25,000	$5,000	$48,000 (Fee paid to province for use of system)		$78,000	User of government system exclusively
C	$26,000	$3,200	$5,000 (RDBMS license fee)	$2,350	$36,550	
D	$52,500	$1,200			$53,700	User of government system exclusively
E			$41,500		$41,500	Recently acquired own information system
F	$45,000		$4,430		$49,430	¨ Need $45,000 annually to replace 25 of the 125 computers each year, but this allocation has not happened. (Expected life span of a computer is 5 years) ¨ Budget for software upgrades also does not exist
G		Will soon have to install Windows XP Professional on all 17 computers			?	No budget information was received
H	$49,000	$1,000			$50,000	¨ User of government system exclusively ¨ Agency tries to allocate $30,000 each year for office automation

For example, the cost to replace a functionality server is many times more than that to replace a desktop computer. Another example: buying Microsoft Exchange Server CALs (Client Access Licenses) alone for 125 workers costs $14,000[21], whereas buying a copy of PCAnywhere only costs $200. Similarly, an agency having to replace all its 30 obsolete computers for the first time in 12 years has to pay significantly more than another same size agency just needing to add 256 MB memory in each of its 30 computers acquired, say, only three years ago. Furthermore, developing information systems is always expensive, and the costs to develop and maintain the application and to acquire the necessary hardware and system software to support the information system must be included in technology deployment planning and budgets.

Although the wide range of these cost figures is the direct result of situational and needs factors unique to the individual agencies, these figures together do give us a glimpse of certain key aspects of the reality, and they are as follows.

- Office automation and information systems can be expensive to acquire, maintain, and support.
- Computers, especially servers, in an organization need to be upgraded (where possible) or replaced every four to seven years.
- Whether an agency uses the government system or its own system, it still has to find money to buy all the hardware and software, to maintain and upgrade them, and to pay for support and training.
- A viable technological infrastructure must exist in the agency first for an information system to operate. Therefore, in estimating costs of an information system, all aspects of technology deployment in the agency, not just those specific to the information system.
- A uniform method to plan office automation and information system work is needed.

A subsequent section of this report suggests one common and equitable framework for estimating costs related to deploying office automation and information systems.

Issues Regarding Agency Use of Provincial Information Systems

As mandated provincial child protection organizations, all FNCFSAs are required to supply data concerning cases they serve to their respective provincial governments. As a result, all agencies do interface, in one way or another, with the provincial system, but it seems that a large percentage of them are reluctant to use the government system unless they feel they do not have a choice. In addition, despite invitations extended by a number of provinces to FNCFSAs to use the government system, many agencies are still using a paper file system. There are a number of reasons for this phenomenon.

Technology Funding

Although provincial governments, with the exception of one, do not require agencies to pay an access fee, using the provincial system is not really for free. Agencies must have a viable technological setup (adequate computers, current operating systems, networks, and, in many situations, useful communication links) before they can connect to the government system. Most agencies do not have the necessary technology simply because they cannot afford it. Provinces do want agencies to contribute data to and use the government system, but do not seem to want to give out or pay for the needed equipment. Since FNCFSAs are federally funded agencies performing provincially mandated reimbursable child protection services, provinces see that INAC, not them, have that direct responsibility although they all know INAC does not provide technology funding. The only kind of offer provinces are willing to consider is paying for external communication links, i.e., Internet Service Provider service charges. This combined government position has also hampered the efforts of provincial officials in charge of rolling out a provincial system.

We also know that only a handful of FNCFSAs across Canada use a private information system -- either their own creation or one leased from an external source. According to the respondents, the main reason for the paucity of FNCFSA-specific information systems is lack of funding, definitely not lack of needs. All agencies realize

the importance to have a viable information system to allow them to efficiently manage day-to-day service delivery and generate reports or information for INAC and other government departments, among other things. They also very much like to have a system that allows agencies to exchange data electronically with government departments, a direction advocated by the Attorney General of Canada. Achieving these objectives requires computer technology, but both levels of government are silent on who would pay for what.

The story of one large agency is worth noting because this is a good example of how the current funding system can directly prevent agencies from getting things done right, a real dilemma especially for accountability- and efficiency-conscious organizations. Since there was and still is no information system that can meet the needs of First Nation agencies having to satisfy the dual reporting requirements of both federal and provincial governments, this agency began to develop a database application in 1994 that would eliminate double data entries, thus resulting in saving tremendous amount of staff time and producing more accurate reports. Their goal was to have a cost-effective, user-friendly and unified data system that could interface with the provincial system and INAC for better communication and timely sharing of information, based on consistent and standardized data collection and reporting. To-date, 10 years later, work is still incomplete due to absence of INAC funding and government support. Struggling to find money outside the agency to complete the project has apparently consumed a great deal of staff time and caused much frustration over the years. Recent refusal by the province to pay for hardware and software upgrades to allow them to continue exchanging files with the provincial government has added another layer of frustration.

Absence of INAC and provincial funding for technology is a main concern among agencies across the nation. However, it appears that not all provinces are equally firm on their position with regard to paying for certain computer equipment. For example, if a province is very anxious to get agencies use a newly rolled out provincial system, it might consider exception.

However, the problem remains that there is no government policy or even a consistent and clear understanding regarding who pays for what.

Perceptions of Usefulness of Provincial Systems

Most respondents believe that the reason why the province is anxious in getting them to use the government system is because the province needs their data. A number of ways are used by agencies to supply data: facsimile reports, spreadsheet files, document files, or direct remote data entry (for agencies that have suitable equipment). Stationing a provincial worker in the agency to collect data concerning specific types of cases using dedicated provincial computer equipment is not an unusual arrangement. Some provinces collect off-reserve cases only, but others want both off- and on-reserve cases.

Most agencies on the government system are dissatisfied. A general perception is that the province wants agencies to contribute data, but in return is not interested in giving them the tools they need. Their complaints are quite consistent and some respondents said they were certain that other agencies would have shared the same views. The common reasons cited for their unhappiness are as follows:

- Use of the provincial system is presented as a condition for service agreement. Agencies are not given a choice.
- Agencies are not permitted to access the financial module of the government system, for stated security reasons. As a result, they use a separate accounting package to manage financial data. Lack of software connectivity between the accounting package and the government system requires double data entry. In addition, computing child-based or service-based cost statistics is not possible or is very difficult.
- Provincial information systems are designed for government users exclusively. There is no special version for FNCFSAs with interface features and the kinds of information they need. Another consistent main complaint is that the reports available do not meet INAC requirements, and the province has no plan

to customize any features of the government system for FNCFSAs. Agencies must compile INAC in a labour intensive way.

- A few provinces, as mentioned above, still use a UNIX system. For people familiar with the Windows environment, using a text-based information system developed long time ago is counterproductive. Finding simple information often requires extensive and tedious navigation, a difficult, time-consuming and frustrating process. The kinds of reports available are difficult to read and some span rows or screen pages.

INAC Reporting

The Auditor General of Canada report[22] identified the following financial and non-financial reports (reformatted for inclusion here) that First Nations child and family services authorities are required to submit.

Financial Reports

Indian Child and Family Services Child Specific Invoice Summary (10th day of the month for CFA)	This report is submitted to INAC by the agency providing the service to request reimbursement. It includes a summary for the month containing the following: - Child information (such as name, member number, and date of birth). - Date of admission into care, type of care, and most recent placement date. - Start and end pay date, basic maintenance total, skill fee or fee for service, special needs description, and total, and total amount invoiced.

Non-Financial Reports

Child Care Notification Form (Monthly on the 10th day for services funded by the Comprehensive Funding Arrangement)	This form is completed when a child is removed from its home and placed under child protection in alternative care facilities. It includes the following: - Child information (name, gender, birth date, address, health insurance number). - Where child was apprehended from, reason that a Notification is being completed. - Type of care being provided, type of action taken under the Child and Family Services (CFS) Act, date action was taken. - Information on both parents indicating who is the care-giving parent with Indian Status and who is the custodial parent. - Information on person providing care if the birth parent is no longer doing so, and entity that is financially responsible for the child (for example, INAC, Provincial Social Services, or provincial Justice Department).
Special Needs Greater Than $2,000 Report (Monthly on the 10th day for CFA fund)	Special Needs Greater Than $2,000 requests need approval annually by INAC and state the special need requirement for each child including estimated yearly cost over $2,000.
CFS Operational Report (Twice yearly on Oct 15 and April 15)	This report for INAC operations funding is to reflect services to residents who are normally resident on the agencies' member reserves and includes the following: - Information on Prevention Services (list of specific services provided; number of families and children served by each; number of local CFS committees active; number of elder committees; number of Public Information and Education workshops) - Information on Protection Services (list of specific services provided; numbers of families served with/without placement; number of trained/approved foster care homes and parent aides contracts; number of children placed in off-reserve resources; number of children having status under the CFS Act; and number of adoption homes)

Domain	Indicator	Variable
Safety	Recurrence of maltreatment (rate & incidence)	· Reopening date · Reopening closing date · Reason case reopened · Type of maltreatment · Type of substantiation
	Serious injuries/deaths (rate & incidence)	· Date of injury · Injury severity · Injury type · Injury intentionality
Well-being	Grade level/Graduation	· Date of grade level/graduation report · Grade level/graduation
	Child behaviour	· Date of child behaviour rating · Child behaviour rating
Permanence	Placement rate	· Placement date · Placement type · Discharge date · Discharge type
	Moves in care [Placement changes] (rate & incidence)	· Placement date · Placement type · Reason for move/placement
	Time to achieving permanent placement	· Placement date · Placement type · Reason for move/placement
Family & Community Support	Family moves (rate & incidence)	· Date of address · Address or Postal Code
	Parenting capacity	· Date of parenting capacity assessment · Parenting capacity assessment
	Ethno-cultural placement matching	· Date of placement · Ethno-cultural matching · Placement inclusiveness

Although the number of reports is not large, compiling the kinds of information needed for these reports can be a difficult recurrent task for agencies without an information system, and the degree of hardship is proportionate to caseload size or agency size. In addition, it is easy to introduce errors into manual reports. Since no provincial system includes INAC reports, it is not difficult to understand why all agencies want to have their own automated information system to allow them to not only handle reporting with ease, but also manage day-to-day service delivery in a way directly relevant to their particular needs, and assess performance, among many other benefits.

Performance Measurements

As mentioned before, a national child protection outcomes measurement project is underway under the auspices of HRDC. Given the significance of this concerted effort, we have included a summary of the Outcome Indicator Matrix in the appendix. For the purpose of this review, it is useful to know what data is needed to measure what outcomes as per the conceptual framework of the matrix. The following table identifies this data requirement.

Historical or time-series data is needed. All required data is deemed to be basic and should exist in provincial child protection information systems.[23]

The section on provincial child protection information systems above includes information on current availability of outcomes data in the eight provinces of interest to this review. It appears that, currently, measuring Recurrence of Maltreatment, Placement Rates, Moves in Care, Time to Achieving Permanent Placement appear to be possible. Provinces leading the national project are working hard to modify their databases to include data for as many indicators as possible. One provincial contact informed that he was confident that his province would have, within the near future, data for 8 of the 10 outcome measures. However, there is no known timeline set by the provinces for achieving this data objective.

The Ontario Incidence Study[24] and the Canadian Incidence Study[25] reveal that disproportionately

large numbers of First Nations children are served in the home or in care across Canada. For First Nations child protection authorities, ability to measure the complete spectrum of outcomes of child protection services and to report on outcomes periodically should be of particular importance. Unfortunately, the current provincial information systems, main sources of First Nations child protection case data in Canada, are short of this capability, and it is unclear how long it will take before we see real improvement.

According to information shared by an agency, INAC recently introduced a "Results-Based Management and Accountability Framework". One requirement under this initiative concerns program performance measurement. Indicators for resource inputs (what was spent), activities (what was done), outputs (what was produced), and outcomes (what benefits or impacts resulted) will need to be developed for each program as per its goals and objectives. A very important prerequisite for successful measurement is availability of data needed to support the various indicators. Because the measures are specific to First Nations programs, the kinds of data required mostly likely do not exist in provincial information systems. This means that First Nations agencies will have to have their own data systems to allow them to meet such emerging accountability requirements.

Implementing Information Systems in FNCFSAs

The Attorney General of Canada, focusing on the issue of federal reporting requirements, decried the situation two years ago, and concluded that First Nations agencies must have capable computerized information systems to deal with cumbersome and excessive reporting requirements. Unfortunately, due to lack of technology funding, the majority of FNCFSAs still does not have any or are not given a suitable information system. Not only do they have to continue to endure hardship in connection with reporting, they also cannot, among other things, efficiently manage service delivery, meet their accountability requirements, work collaboratively with each other and with government departments by means of data exchange, or participate in important national or regional performance measurement endeavours. In order not to remain in a helpless state, a couple of large agencies decided to develop their own systems a few years ago. We have also seen medium size agencies beginning to use a leased system, although they can barely afford it. It appears that most agencies across Canada are anxious to have a suitable information system.

Selecting an Information System

Basic Considerations

The purpose of any information system, regardless of type of organization and nature of business, is to support efficient and effective operation[26] of the organization as per its mandate, vision, mission, goals, and objectives. For an information system to be and remain useful, it must be properly designed and managed. Meeting the following design principles is very important:

- The kind of RDBMS deployed must be an industrial-strength system[27] with a robust engine designed to handle very large data volume. Multi-CPU support is an advantage.
- The database and applications must be designed to exactly mimic the operational model or processes of the organization, and comply with provincial legislation, policies and standards.
- The database structure must have the ability to allow quick modification to accommodate sudden changes in the organization's operational processes, or new requirements externally introduced[28].
- The data in the database must be valid and complete to support the agency's needs, via tight data integrity enforcement at the structure level, form level, and code level.
- The applications must be designed with the user in mind, including features like logical and user-friendly graphical interface, familiar terminology, flexible searching for information using user-defined criteria, easy navigation, and attractive graphics.
- The data in the database must be available for SQL manipulation behind the scenes to facilitate managers to perform quick queries,

computations or other reports, above and beyond what the standard menus provide, and to allow live connection to external data sources.

- The database system must support local as well as remote access.

Specific to FNCFSAs, the following additional features are important, and each has implications for the database and application design:

- Financial data related to the child and/or the child's family must be captured and stored in the same database. This is the best way to facilitate accurate and convenient computations of costs, especially unit costs using child, family, or service event as the unit. Cost comparisons across categories, e.g., type of abuse, type of placement resource, etc., are possible only with cost data totally integrated and linked to the child or the family.
- All standard detail and summary reports required by INAC must be efficiently designed, exploiting the power of SQL, and temporary views and tables, for example. Using any of the report should be a one-button operation. The same design approach should be applied to all other reports.
- The application must include a "one-button" feature to automatically upload or supply selected data to external organizations, e.g., daily case data to the province, daily case data to a regional or national tracking system, monthly summary data or statistics to the national outcomes data pool, monthly report data to INAC, etc. Design specifications must be worked out with the parties or dataset recipients involved. This is the level of data exchange advocated by the Auditor General of Canada.
- The data in the database must be selectively retrievable for sharing with external groups on an as-required basis, like INAC, First Nations Statistical Institute, and university research institutes.
- The database must incorporate all the data and measurement scales needed to support the national outcomes measurement project.
- All data, especially events data, in the database must be historical and date-specific to permit meaningful statistical analysis, case audits, child protection outcome measurements, and other types of performance measurements.

Costs of Information Systems

Ten years ago, when very few relevant child protection information systems were commercially available, agencies in need of one usually ended up developing their own. They hired external consultants to do that if they did not have qualified developers on staff. For example, in late 1960s, the Children's Aid Society of Metropolitan Toronto used internal staff to produce the very first child protection information system in Canada. The Catholic Children's Aid Society of Metropolitan Toronto did the same a few years later, followed by the Ottawa Children's Aid Society and one or two others. These were and still are among the largest child protection agencies in Canada and could afford developing their own information systems. However, since early 1980s, leasing a commercial system has been the trend. Currently, all the remaining 48 children's aid societies and close to 10 First Nations child protection agencies in Ontario use a leased system.

In the field of First Nations child welfare in Canada, a similar trend took place. West Region Child & Family Services, Inc. in Manitoba, one of the largest FNCFSAs in Canada, decided to develop its own system in 1994. Lalum'utul'smun'eem Child & Family Services in British Columbia did the same a year later. However, the current trend is to lease, although the number of agencies which can afford their own system, leased or otherwise, are still far few and in between, as described above.

To lease or to develop is always a difficult decision, and there are no specific rules. However, the following factors should be taken into consideration in making such a decision:

- Which way is less expensive in the next 5 years? (Initial cost, license and software costs, support cost, modification cost, etc. Warning : it is not uncommon to see cost overrun in application development projects.)
- Who (vendor or developer in mind) is more

familiar with the child welfare service delivery system, operational and reporting requirements, legislation, etc.? (Content knowledge impacts relevance, quality, delivery timeframe, cost, time of agency liaison, etc.)

- Who (vendor or developer in mind) is more technically competent? (Knowing the person's track record, clients' satisfaction, similar work completed, etc., is very important. Can this person deliver the expectations listed under "Basic Considerations" above?).
- How long does it take to have the system installed and staff trained? (Leased systems are by definition in a far more favorable position on this count.)
- Who (vendor or developer in mind) can provide better support?
- How long is the person (vendor or developer in mind) going to be in business? (How long has this person been in business?)

Assuming the decision is to lease, deciding which vendor to use is also not easy. Given wide variations between vendors in price, features, product quality, and technical support ability, it is extremely important that the agency sees a live demonstration, asks in-depth questions before, during and after a demonstration, and talks to current users of the system under consideration. The agency must also assess the real technical ability of the vendor, among other things. Making promises is totally different from getting things done or successfully resolving problems. In addition to the expectations list under "Basic Considerations" above, the questions included in the table below should be useful to agencies choosing a commercial information system.

Technological Infrastructure Required to support an Information System and Costs

Information systems cannot be implemented without a viable technological infrastructure in place. It is equally important to realize that computer technology in the office deemed adequate for office automation is not necessarily capable to support the operation of an information system. The technology required for implementing information systems is far more demanding. However, a technological infrastructure good enough for supporting an information system is always able to host office automation, including demanding features like imaging, voice-over-Internet, collaboration, remote computing, etc. The paragraphs below identify the types of technology needed to operate a typical information system in voluntary child protection agencies, and suggest a common framework for estimating the costs of such technology.

Minimum Computer Hardware Needed

What kinds of computer hardware and software agencies need to build an adequate technological infrastructure to support an information system, leased or otherwise, is quite a complex matter. Our observation is that, in the case of FNCFSAs, organization size, whether or not an organization has one or more locations/branches, and adequacy of current computer equipment in use are together key determinants of the kinds of technology an agency needs to allow them to set up an information system. For example, the types of system software and hardware and support structure needed by a small self-contained agency with, say, only 5 workers are quite different from those required for an agency that has a head office and two branches and whose workers, regardless of where they are located, have to access the agency information system in head office. Variations in technological requirements directly affect costs as well.

Other than size and geographical spread of an agency, adequacy of computer technology in use creates another level of complexity. Information systems require fast servers, desktop computers and communication links on a functioning network. In addition, suitable operating system software for the servers and desktop computers must be properly installed and configured. For this reason, agencies currently using 386 or 486 standalone computers or slow servers will need to replace what they have.

Generally speaking, the following types of computer hardware are considered as minimum for operating a typical agency-level child protection system:

Subject	Questions to ask
Cost (Initial)	Leasing a commercial system costs between $30,000 and $45,000 in the outset. This fee generally includes customization to suit agency needs and onsite training time. In addition, there is a monthly or annual charge for phone support, software upgrades, and in some cases, user group membership. However, there is no standard for this type of charge. If the system is the client/server or web version, then number of locations in the organization should not affect the price. It is useful to remember that familiarity with operation and needs of child protection agencies, work quality, technical ability, relevance of the system, and professionalism are far more important considerations than price. A wrong decision in the beginning can cause very serious problems for the agency and will cost a lot to fix the problems. Examples are plenty. Ask the following questions: ¨ What modules are included in the price? What are their specific features? ¨ How many users are included in the license? How much extra does it cost to add users? ¨ What additional modules are available? What are their specific features? What are their prices? ¨ How much does it cost to transfer existing data to the system? ¨ Is onsite training included in the price? ¨ Can you provide references (current First Nations agency users)?
Cost (Annual)	Vendors charge between $2,000 and $15,000 a year for support and software upgrades. Ask the following questions: ¨ How much is the annual or monthly charge? ¨ What is covered by this fee? ¨ Are there additional charges?
Support	Technical support is usually included in the annual or monthly fee. Ask the following questions: ¨ Is there a limit on the number of support calls? ¨ How is remote support (remote connection to the system by vendor to solve problems) managed?
Features modification	Enhancement work is usually billable. Ask the following questions: ¨ What does it cost to add or change features in the application? ¨ How is the cost determined? What is the fee structure? (Ask for examples and details.)
Data extraction or exchange	It may be treated as enhancement work or one-time service. Usually billable. Ask the following questions: ¨ What does it cost to extract data from the database? ¨ What does it cost to add to the application ability to periodic exchange (upload and download) data with external organizations? ¨ How is the cost determined? What is the rate? (Ask for examples and details.)
Others	Ask the following questions: ¨ Can agency staff go into the actual database to use the data directly? Are there restrictions? ¨ Does the vendor have a web version for deployment on the Internet? ¨ How long has the information system been on the market? What is the current install base? How many First Nations child protection agencies are using the system? (Ask for references.) ¨ Does the vendor have a users group? What is the purpose of the users group? How does it work together with the vendor?

- Workstation: Pentium-class computer with 1 GHz processor, 512 MB main memory, 8 GB hard drive, 100 mbps network adapter, CD ROM drive, and 1024x768 video resolution operating under Windows XP Professional.
- Application/Database Server: Single Xeon server computer with 2.8 GHz processor, 4 GB main memory, two 40 GB SCSI hard drives (RAID-1), 100 mbps network adapter, CD ROM drive, and 40 GB tape drive.
- Network Server: Pentium 4 class server computer with 2.8 GHz processor, 1 GB main memory, 20 GB SCSI hard drives, 100 mbps network adapter, and CD ROM drive.
- Terminal Services Server: Pentium 4 class server computer with 2.8 GHz processor, 2 GB main memory, 20 GB SCSI hard drives, 100 mbps network adapter, and CD ROM drive.
- Local Area Network: Category-5 cables, and 100 mbps switch.

If an agency's computer equipment falls short of these minimum features, then, for the purpose of hosting a typical agency-level information system, their equipment may be considered as inadequate and needs to be upgraded or replaced.

Recommended Hardware, Software and Related Requirements, and Costs

This section contains detailed information on recommended hardware, software and related requirements and cost estimates for agencies categorized by size and geographical spread. The technical information is produced to the best of our knowledge based on what is available and feasible to do today regarding implementing a technological infrastructure in voluntary child protections agencies.[30] All cost figures are close estimates, reflecting current market pricing, which can vary somewhat between regions. In addition, we expect to see the prices of certain types of computer hardware products come down in the near future as their quality, reliability and features increase at the same time: something to keep in mind when planning to refresh technology a few years later.[31] Given the high degree of complexity of the subject, it is important to treat our suggestions as educated guidelines, which may require adjustment when an agency applies them. Situational, needs and other factors hitherto unknown or that may surface later make it extremely difficult to have just one set of recommendations for all agencies across Canada. In addition, technological advances necessitate periodic adjustment to this set of information to ensure currency and applicability.

The information involved is complex and detailed. The full package of this information and associated costs can be found in the appendix. The table on the next page presents information for three main categories of agencies. To avoid tedious repetition, only references to the applicable details are included in the table. The reader can easily locate the referenced details (equipment, costs, and related information) in the appendix. The reader will also be interested in knowing that charitable organizations, i.e., holders of a Charitable Organization Number issued by the federal government, are eligible for drastic discounts on all Microsoft[32] software products. Discounted prices under this arrangement are also included to allow us to form a more complete picture of costs and to do more accurate cost projections.

As we can see, the final cost strictly depends on the types and amount of hardware, software and service required, which in turn are determined by number of locations, preferred features and number of computers in the entire organization. If an agency already has some of the recommended items, then they will not need to include them in the calculation. However, if some or all existing equipment is of marginal performance, then the agency will need to decide to replace or to keep them. In making decisions of this nature, it is always important to seek input from technical experts who are in a position to make objective informed assessments. Using these guidelines, any agency should be able to estimate in a standard way the cost to build a viable technological infrastructure not only for operating an information system, but also for hosting office automation. Finally, it must be realized that technology budgets must be based on actual hardware and software required, not caseload size. For this reason, INAC's traditional formula based

Hardware and Software Required by Agencies to Operate a Typical Agency-level Information System

Agency Type		Recommended Hardware, Software, and Related items[33]	Notes
Type A	¨ One location only ¨ Less than 75 computers ¨	Option 1 - Software: A1; (A2); (A3); (A5); (A7); A8; A9; A10 Computers: C1; (C2); C4; C5 Others: B; D1-D3; E1-E4; F1-F3; G1-G2.	¨ Bracketed items are optional for small agencies (less than 10 computers) ¨ Software and hardware installation and configuration expenses do not apply to agencies having required expertise on staff. ¨ Only one A10 is needed
		Option 2 - Software: A1; A4; (A5); (A7); A8; A9; A10 Computers: C1; (C2); C4; C5 Others: B; D1-D3; E1-E4; F1-F3; G1-G2.	¨ Small Business Server 2003 can support up to 75 devices or users, as per the number of CALs purchased. ¨ Bracketed items are optional ¨ Software and hardware installation and configuration expenses do not apply to agencies having required expertise on staff. ¨ Only one A10 is needed
Type B	¨ One location only ¨ 75 or more computers	Software: A1; A2; A3; (A5); (A7); A8; A9; A10 Computers: C1; C2; C4; C5 Others: B; D1-D3; E1-E4; F1-F3; G1-G2.	¨ Bracketed items are optional ¨ Software and hardware installation and configuration expenses do not apply to agencies having required expertise on staff. ¨ Only one A10 is needed
Type C	Multiple locations (head office plus one or more branches)	Software: A1; A2; A3; (A5); (A6); (A7); A8; A9; A10 Computers: C1; C2; C3; C4; C5 Others: B; D1-D3; E1-E4; F1-F3; G1-G2.	¨ Bracketed items are optional ¨ Software and hardware installation and configuration expenses do not apply to agencies having required expertise on staff. ¨ Item A10 is needed for head office and each branch ¨ Item B is needed for head office and each branch ¨ Items C1, C2 and C3 are needed for head office only ¨ Item C2 may also be needed in certain large branches

please see pages 169 to 174 for component (A#) explanations

on number of on-reserve children cannot be used to fund technology.

APPENDIX A

The following section is adapted from the original Outcome Indicator Matrix document[34]

Recurrence of Maltreatment

Child protection is the core function and primary focus of the child welfare system with the ultimate goal of preventing future maltreatment. Recurrence of maltreatment includes all confirmed cases of child abuse or neglect known to a child protection system in which a subsequent confirmed incident of maltreatment occurs and becomes known to child protective services. Reported rates of recurrence range from under 10% to over 60%. The best study to date reported 24% of families experienced at least one repeat incident of confirmed maltreatment within 12 months of the first incident, 43% repeated within 5 years.[35] Recurrence is measured over a set interval. For example the 12 month recurrence rate is the proportion of children identified by child welfare services as maltreated who are maltreated again within 12 months.

Serious Injuries and Deaths

Protection from serious harm is a key priority for all child protection services and such cases require priority intervention and tacking. While the majority of investigated maltreatment cases do not involve serious injuries or fatalities, every effort must be made to prevent such tragic outcomes. The Canadian Incidence Study of Reported Child Abuse and Neglect found that 4% of substantiated investigations documented physical harm severe enough to require medical attention[36]. While injuries associated with suspected maltreatment and all serious injuries (intentional and non-intentional) to children in child welfare placements (e.g., foster care, group care, & residential care) are documented in child welfare case notes, most Child Welfare Information Systems (CWISs) do not track injury information.

Grade level/graduation

Maltreatment is a significant risk factor for developmental, cognitive, and academic delays. Enhancing child well-being is a paramount objective of the child welfare system. Improvements in cognitive functioning is a key outcome indicator. This is not the exclusive domain of the child welfare system, but it represents a service priority that should be well documented. Research consistently shows that children receiving child welfare services are behind their peers in all aspects of cognitive development and school performance. A community survey in upper New York State found that maltreated children were 2.5 times more likely to repeat a grade than were a matched group of non-maltreated children[37]. Performance can be measured as age to grade ratio, achievement on standardized tests (e.g. Math & English), placement in special education classes, school attendance, and assessed risk of failure. While test scores may more accurately measure specific skills, age to grade ratio is the most feasible indicator for child welfare services to collect, especially for children receiving home based services. For out of school older youth, graduation rates are a simple and appropriate measure. Outcome monitoring for pre-school children depends on the extent to which child welfare authorities use developmental assessments.

Child Behaviour

Maltreated children are higher risk for behavioural problems at home and in school, delinquency, and criminal activity. Preliminary findings from the Looking After Children in Canada Project were that 39% of maltreated youth reported having difficulties with anger, and 32% reported often getting into trouble for defiance[38]. Similarly, a recent American study using the Teacher report from the Child Behaviour Checklist found that over 40% of children in the child welfare system were rated as having problem behaviours compared to 20% in a matched sample[39]. Standardized measures of child behaviour are not generally used in child welfare settings. However, some jurisdictions have started to use instruments that include some behavioural information, either in risk assessment tools or in assessment records for children in long-term care.

Placement Rate

Placement of children in out-of-home care is a consistently documented indicator for child welfare services. Placement in care is necessary for children who cannot be adequately protected at home or whose needs cannot be met at home. The Canadian Incidence Study of Reported Child Abuse and Neglect found that 8% investigations lead to a placement in care within the first two-months of the investigations[40]. An Illinois study of over 10,000 child welfare investigations found that placement rates increase as a function of the time a case is kept open. At one month after referral 7% of children had been placed in care compared to 21% within one year of the initial referral[41]. Interpretation of placement statistics is complex. An increase in placement rates is not necessarily a negative outcome; it could mean that child welfare authorities are doing a better job at identifying and protecting children who would have been severely harmed if left at home. This is further complicated by the fact that placement decisions are affected by the availability of placement resources. In some jurisdictions official placement rates may significantly under represent children who are placed in non-traditional child welfare settings, such as customary care or informal community placements. Runaway youth should also be carefully tracked in placement statistics.

Moves in Care

Social stability is essential for children to develop a sense of belonging and identity as they cope with separation from their families. Some placement changes can be beneficial, but multiple unplanned moves can have seriously negative short and long-term consequences for children. Moves in care tracks admissions, re-admissions, and significant placement changes. A four year longitudinal study of 717 children who entered foster care in Saskatchewan found that 71% of children experienced only one out-of-home placement. The average number of moves for children who experienced more than one out-of-home placement was 2.3, and only 10% of these had more than 4[42]. The simplest way to measure moves in care is to count the number of moves experienced by children when they are discharged from care. This method measures moves during a specific spell in

care. The moves in care indicator should only track significant placement changes, not respite placements or home visits.

Time to Achieving Permanent Placement

Most children brought into care return home after relatively short periods of time. Rosenbluth (1995) found that children entering care in Saskatchewan spent an average of one year in foster care, although the majority of children returned home in less than six months. Placement drift is a concern for children who remain in care. The challenge in measuring time to achieving permanence is deciding which placements can appropriately be categorized as permanent. The simplest definition of permanent placement is one that is intended to be permanent, such as returning a child home (reunification), placement in an adoptive home, or a permanent foster home placement. Using time to achieving permanence as an outcome measure is complicated by the fact that hasty placements may be more likely to break down. Reunification breakdown rates have been as high as 30%. Courtney (1995) found that foster children reunified within three months were more likely to be taken into care again than children reunified between three and six months.

Family Moves

Frequent moves lead to loss of peer and social support networks for children and parents. For children, frequent moves and multiple school changes may prevent the formation of constructive social support networks. Housing instability is caused by many factors including lack of affordable good quality housing, employment changes, lifestyle, and other family crises. While

child welfare services are not responsible for providing housing, many child welfare social workers advocate for better affordable housing for their clients and also work with families to adopt lifestyles that will increase their likelihood of enjoying housing stability. The Canadian Incidence Study of Reported Child Abuse and Neglect found that more than 23% of investigated families had experienced at least one address in change in the previous six months (Trocmé, MacLaurin , Fallon, et al. 2001). A recent survey conducted a the Children's Aid Society of Toronto found that 21% of respondents noted that housing was a factor in the decision to place children in out of home care (Chau, Fitzpatrick, Hulchanski, Leslie & Schatia, 2001)

Parenting Capacity

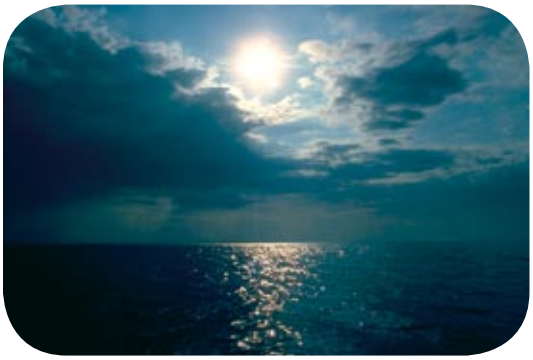
Parenting capacity is a major concern in many cases of child maltreatment. Most home based child welfare services target parents' ability to meet the emotional, cognitive, physical, and behavioural needs of their children. Improved parenting is a good outcome for children. Better parenting translates into better long-term child outcomes. Parenting is targeted by many child welfare interventions and tools have been developed to assess parenting and family functioning. However, standardized parenting measures are not commonly used to assess families or track outcomes in child welfare. Most risk assessment tools also include a number of potentially useful parenting measures, although their interpretation as outcome measures has yet to be tested.

Ethno-Cultural Placement Matching

When children and youth must be removed from their homes, efforts should be made to place them within their geographic community with extended family, a family with similar ethno-cultural background, or in foster care that is very inclusive of their family and friends. There is well-founded concern that many minority children (e.g. Aboriginal, Black, Muslim, etc.) are not placed in matched foster homes or homes easily accessible to their family and friends. For example, although 64% of children in care in Saskatchewan in March 1990 were of Aboriginal ancestry, and these children spent on average more time in foster care than did non-Native children, less than 10% of these Native children were in matched foster homes. Placement matching data must be interpreted with caution in individual cases because ethno-cultural matching is only one of the factors to be considered in finding the most appropriate placement for a child. Nonetheless, ethno-cultural matching provides a strong indicator of community engagement in recruiting foster homes and finding the most appropriate out-of-home placements for children in their communities.

Interpretation Issues

Many of the indicators selected for the Child Welfare Outcome Indicator Matrix are proxy measures that will need to be interpreted with caution. A narrow focus on any one indicator could have unintended effects on delivery of services. Reducing placements, for example, without ensuring safety and supporting child well-being, could simply result is a loss of services leaving more children at risk of further maltreatment. Proxy indicators that reflect system events can nevertheless provide a meaningful measurement framework if the selection of indicators covers a broad set of domains, as proposed in the Child Welfare Outcome Indicator Matrix.



APPENDIX B

Recommended computer hardware, software and other requirements for building a viable technological infrastructure to support a typical

GROUP A = Software				
	System Software	**Price**	**Special Price for Charitable Organizations**	**Notes**
A1	**Microsoft Windows XP Professional** (Upgrade version) Each workstation computer Main uses in a self-contained office, branch office or headoffice: ¨ Networking ¨ Messaging ¨ Accessing database remotely located in head office	$260	$100	¨ Upgrade version is for upgrading any version of Windows since Windows 98 ¨ OEM version (preinstalled full version) is supplied by computer manufacturer, and is not usually available for retail sale. ¨ Windows XP Home, lacking important security and communication features, is not suitable ¨ Should include Windows XP Professional when ordering new computers
A2	**Microsoft Server 2003** (Standard edition) Main uses: ¨ Domain networking ¨ Setting up application/database server ¨ Setting up Terminal Services Server (Both Application and Administration modes of Terminal Services are available in Server 2003)	$1,000	$190	¨ Only 1 package is needed for setting up in head office: • Network server • Application server • Terminal Services server ¨ Certain offices with less than 75 computers may find this version more cost-effective than Small Business Server 2003 with additional CALs, depending on agency size and features needed.
	Each Server 2003 CAL (device or user)	$40	$10	
	Each Terminal Services CAL (device or user)	$112	$60	
A3	**Microsoft Exchange Server 2003** (Standard edition) Main uses: ¨ Emailing (using Outlook)	$980	$600	¨ Can be installed in Network Server, if preferred.
A4	**Microsoft Small Business Server 2003** (Standard edition) Main uses: ¨ Setting up application/database server ¨ Networking	$733	$314	¨ Suitable for self-contained office. License for up to 5 users/devices is included. ¨ Additional licenses can be purchased to increase the number of users/devices up to a maximum of 75 ¨ Only 1 package is needed for setting up: • Domain network • Application/database server ¨ Only 1 server computer is needed to host the application and database and to control network
	Each Exchange Services CAL	$94	$6	

GROUP A = Software				
	System Software	**Price**	**Special Price for Charitable Organizations**	**Notes**
A5	System software and network configurations (Small job)	$1,350	$1,350	¨ Up to 3 hours @ $450 – each location ¨ Rate varies between $200 and $450 an hour, depending on region and qualifications
A6	System software and network configurations (Big job)	$7,200	$7,200	¨ 12-16 hours @ $450 – main location ¨ Work includes setting up: • Domain network • Exchange Server • Application server • Terminal Services Server • VPN ¨ Rate varies between $200 and $450 an hour, depending on region and qualifications
	Software Upgrades			
A7	Microsoft's Software Assurance Program subscription	Add 50% to each system software price	Add 50% to each system software price	¨ Optional ¨ Subscribers receive free upgrades for two years of all insured server software
	Office Suite			
A8	Microsoft Office 2003 (Standard edition) – Each workstation computer	$518	$77	¨ Includes Word, Excel, and PowerPoint ¨ Should include Office 2003 (Standard edition) when ordering new computers
	Utility Software			
A9	Norton SystemWorks 2005	$100	$100	¨ Protects against virus and intrusion, keeps files in good working order, manages bad sectors, etc. ¨ One per computer
A10	PCAnywhere version 11 (Host and Client)	$200 (one per location)	$200 (one per location)	¨ For remote support ¨ GoToMyPC or NetSupport Manager is equally appropriate

GROUP B = Internet Service Provider				
agency-level information system:		Cost (One-time)	Monthly Cost	Notes
	One of the following options:			¨ Prices vary between regions. All prices are approximate only. ¨ Add to monthly cost extra charges for static IP addresses needed for remote computers connecting to head office Terminal Services Servers to access central databases. Charges can vary greatly between carrier types and vendors. ¨ Add to monthly cost extra charges for additional email addresses, where needed.
	Cable ISP (Best option)		$50	¨ Modem always included ¨ Usually free installation
	DSL ISP (Second best option)		$40	¨ Modem extra ¨ Self installation
	DSL Modem	$150		
	Dedicated phone line		$28	If all the phones in the small office and the DSL modem have to share one phone line, then telephone filters (one per phone) are needed. One time cost is $5 per filter.
	Satellite ISP (Third best option)		$400	¨ Charges can vary greatly between vendors. ¨ Upload and download speeds greatly affected by number of concurrent users. Practical maximum is 2-3 concurrent users. ¨ Signal problems in bad weather condition
	Dish, materials, and installation	$7,000		¨ Prices vary greatly between vendors. ¨ Installation cost also depends on location.
	Dialup ISP (Last option)		$30	Should use thin client software to help offset speed problem.
	Dedicated phone line		$28	

GROUP C = Computer Hardware (Very important to use high quality equipment)			
		Price	Notes
C1	Computer for managing application and database (Application Tower Server) ¨ Intel server grade motherboard ¨ Dual Xeon, 3.2 GHz ¨ 4 GB RAM ¨ Redundant power supply ¨ 2 SCSI 73 GB Seagate hard drives (RAID-1 implementation) ¨ CD ROM drive ¨ 72 GB DAT Seagate tape drive ¨ Onboard video, 100 mbps NIC ¨ Keyboard ¨ Optical mouse ¨ 17" LCD monitor (16ms) ¨ No OS, but Microsoft ready ¨ 3 years onsite next business day service	$5,700	Needed for each agency regardless of number of branches ¨ One dual processor server per 40-50 concurrent users. ¨ Small self-contained agencies with 10 or fewer users may use a single processor server instead ¨ Size of main memory depends on specific application. Upgrade memory if performance is slow. ¨ Price estimate based on Dell's PowerEdge line ¨ Price will change

GROUP C = Computer Hardware (Very important to use high quality equipment)			
		Price	**Notes**
C2	Computer for managing large network in head office (Network Tower Server) ¨ Intel server grade motherboard ¨ Pentium 4, 3.2 GHz ¨ 1 GB RAM ¨ 80 GB, 7200 rpm SATA Seagate hard drive ¨ CD ROM drive ¨ Onboard video, 10/100/1 GB mbps NIC ¨ Keyboard ¨ Optical mouse ¨ 17" LCD monitor (16ms) ¨ No OS, but Microsoft ready ¨ 3 years onsite next business day service	$1,850	¨ Not needed for a small self-contained office running Microsoft Small Business Server 2003 ¨ Not needed for a small branch office running Windows XP Professional workgroup network. ¨ Price estimate based on Dell's PowerEdge line ¨ Price will change
C3	Computer for managing Terminal Services (Terminal Services Tower Server) ¨ Intel server grade motherboard ¨ Pentium 4, 3.2 GHz ¨ 2 GB RAM ¨ 80 GB, 7200 rpm SATA Seagate hard drive ¨ CD ROM drive ¨ Onboard video, 10/100/1 GB mbps NIC ¨ Keyboard ¨ Optical mouse ¨ 17" LCD monitor (16ms) ¨ No OS, but Microsoft ready ¨ 3 years onsite next business day service	$2,430	¨ Install in head office for remote computers to access head office databases. ¨ Key consideration is RAM size. Calculated as 100 Megabyte per user. 4 Gigabyte is needed for 40-50 concurrent users. Adjust RAM size accordingly. ¨ Elaborate VPN setup may require Xeon-class server. ¨ Price estimate based on Dell's PowerEdge line ¨ Price will change
C4	Mini-tower Workstation – Each staff person ¨ Intel motherboard ¨ Pentium 4, 3GHz ¨ 512 MB RAM ¨ IDE 80 GB, 7200 rpm hard drive ¨ CD ROM ¨ Onboard video, 100 mbps NIC ¨ Keyboard ¨ Optical mouse ¨ 17" LCD monitor (16ms) ¨ Windows XP Professional ¨ Office 2003 (Standard edition: Word, Excel, PowerPoint) ¨ 3 years onsite next business day service	$1,270	¨ One for each staff person in agency. ¨ Price estimate based on Dell's Dimension line
C5	Laser printer – Each location ¨ Monochrome ¨ 1200 x 1200 dpi ¨ Networked ¨ 25 pages per minute ¨ 15,000 pages per month duty cycle ¨ 3 years onsite next business day service	$500	¨ Offices with less than 20 workers may need a printer with a higher duty cycle rating ¨ Price estimate based on Dell's 1700n model ¨ Price will change

GROUP D = Technology Refresh Planning (Every 4 to 7 years, depending on equipment) Also applies to technology currently in use in agencies			
		Price	**Notes**
D1	Server replacement	80-85% of original price for servers with similar features	The average useful service life span of servers is between 4 and 5 years. However, replacing or upgrading components may extend the life span for another 3 to 4 years. Decisions to retire or upgrade should be made within the context of performance too vis a vis the current system software, not just economy.
D2	Workstation replacement	60-75% of original price for desktop computers with similar features	The average useful service life span of desktop computers is between 5 to 7 years. Although replacing or upgrading components may extend the life span for another 3 to 4 years, the usually small cost differential might make better sense to replace the whole computer.
D3	Laser printer replacement	70-75% of original price for laser printers with similar features	Laser printers are normally not worth fixing. In addition, the cost to replace the drum could be as high as the cost of a new printer.

GROUP E = Local Area Networks (Very important to use high quality equipment) (One-time cost for each location currently without a viable LAN setup)			
		Price	**Notes**
E1	16-port switch	$80	For locations with more than 16 devices, purchase either a switch with more ports OR multiple units.
E2	Firewall and VPN router	$400	Must be compatible with the broadband service. Important to ask service provider to recommend suitable brands and models. Price is approximate for a good quality router.
E3	Regular Category 5 cable	$30 (For each workstation located within 30 feet of switch)	¨ Assuming 30 feet of cable for each computer. ¨ Fire retardant grade cables cost many times more.
E4	Installation labor	$75 an hour	Rate varies between regions.

GROUP F = Computer Accessories and Other Office Equipment			
		Price	Notes
F1	Uninterrupted Power Supply (980 Watts, 25 minutes) – Each server computer	$800	One for each server
F2	Replacement battery of Uninterrupted Power Supply	$600	Approximately every 3 years
F3	Laser printer toner	$120 per cartridge	Should belong to the supplies budget

GROUP G = Annual Computer Hardware Maintenance and Support			
		Price	Notes
G1	External computer hardware services (on-site)	Approximately 5% of first time total equipment cost	¨ Some vendors may charge as high as 10% ¨ Best is to include onsite service plan in all computer purchases to cover labor and parts. 3-year protection is probably most cost-sensible.
G2	Replacement parts	$1,000	"Quesstimate"

(Footnotes)

[1] See Nico Trocme, Stanley Loo, Butch Nutter and Barbara Fallon, *Client Outcomes in Child Welfare: Phase II*, Centre of Excellence for Child Welfare, University of Toronto, April 5, 2002. (This report focused on measuring child protection service outcomes, and recommended steps for removing data problems in provincial/territorial government information systems found to hinder national outcomes measurement efforts.)

2 Subsequent to the release of the University of Toronto report, HRDC set up a national child protection outcomes working group to launch a pilot project. Five provinces (British Columbia, Alberta, Manitoba, Prince Edward Island, and Newfoundland and Labrador) will be contributing test data, in accordance with the definitional intent and requirements of the University of Toronto's *Child Welfare Outcome Indicator Matrix*.

3 *Streamlining First Nations Reporting to Federal Organizations*, Report of the Auditor General of Canada, December 2002 (Internet version at: http://www.oag-bvg.gc.ca/domino/reports.nsf/html/20021201ce.html)

4 18 in Alberta, 25 in British Columbia, 15 in Manitoba, 9 in New Brunswick, 1 in Newfoundland and Labrador, 1 in Nova Scotia, 11 in Ontario, 24 in Quebec, and 15 in Saskatchewan. Northwest Territories, Yukon, Nunavut and Prince Edward Island have none.

5 Since a list of agencies that have their own information system did not exist, the only way to identify them was asking FNCCSC's regional contacts to find these agencies. The names of those agencies willing to be interviewed were given to the researcher, along with contact information. The same approach was used to recruit agencies that used a provincial system exclusively.

6 If the respondent wanted to be more prepared, the researcher would email a list of questions to him/her well ahead of time.

7 On four occasions, the contact invited one or more colleagues to sit in at the interview, in order to be able to readily provide more accurate or technically complete answers. This arrangement helped to produce better responses and save time.

8 The reader might be interested in knowing that running tests on database data, a strong and technically involved design feature of the recent nationwide review of provincial/territorial child protection information systems, allowed us to uncover many technical shortcomings in a number of government systems.

9 They were key agency officials, government officials directly responsible for implementing or managing provincial child protection information systems, and suppliers of technology to FNCFSAs.

10 Compared to other provinces, New Brunswick may have the highest number and proportion (9 out of 11, or about 80%, according to a government contact) of agencies that still use a paper file system and are not connected to the provincial system at all. The actual situation in Quebec is difficult to determine, and usage figures for that province are not available.

11 Ontario does not have a provincial child protection information system, although this situation will change when the government introduces an integrated system, perhaps a few years later. This data system project is in the planning stage, and a request for proposals will be issued shortly, according to a government source. Absence of a government information system has given rise to a proliferation of private systems in the province. Currently, most of the 53 CASs (Children's Aid Societies) use a system supplied by one of two consulting firms. Eight First Nations agencies in Ontario use *Frontline*, a dedicated child welfare information system also installed in 60% of the CASs. The other system is *CWIS (Child Welfare Information System)*. The four largest CASs in the province use a private system developed in-house years ago.

12 Criteria used by the government for worker certification varies somewhat between provinces, but level of former social work education and training is an important one.

13 It is likely that access to certain non-financial modules is also denied.

14 The real capacity of these systems cannot be ascertained because we did not have an opportunity to analyze the database structures, the applications, and the database data, among other things.

15 Development work started in 1994.

16 It is also possible that some agencies still use 486 computers or Microsoft DOS.

17 See the University of Toronto final report for details. Advantages of client/server computing and RDBMSs were described in an interim report of that project.

18 Characteristics of the information system: Information gathered included details about the database management system used to build the database and drive the application; types of computer technology deployed; languages used to develop the application; history of application development; main functions of the application; user training; and plans for further development. Capacity of the information system: Information gathered included types and amount of data stored in the database; availability of data needed to measure outcomes; database structure; data integrity enforcement; and coding scheme. An important part of that review involved extracting large datasets from each information system and running extensive usability tests on the data to uncover problems and pinpoint errors.

19 Child in care is noted, but not number of placements nor placement change dates.

20 Salaries and benefits of agency technical support staff are extra.

21 According to Microsoft's current price. Federally registered charitable organizations are eligible for drastic discounts.

22 See footnote #3.

23 An earlier study of Ontario information systems revealed that only one commercial information system had all the data needed, which could be retrieved easily.

24 Trocme, Nico, McPhee, D, et al., *Ontario Incidence Study of Reported Child Abuse and Neglect*. Toronto: Institute for the Prevention of Child Abuse, 1944.

25 Trocme, Nico, et al., *Canadian Incidence Study of Reported Child Abuse and Neglect*. Ottawa: Health Canada, 2001.

26 It is difficult to specify what features should be included in an information system. The usefulness of a system must be decided by the user. However, we should advise that, although inclusion of enterprise level features like human resource management, payrolls, and fleet management is important from the point of view of a comprehensive information management system, these additional features should be managed separately given their specific nature and purposes. As a general design principle, a good database should include only modules intrinsically related to each other and whose data need to be linked to each other. Since a child protection information system is child-based and family-based, only those modules directly or indirectly linkable to a child or a family should be included.

27 If the application is for web or local deployment, it does not matter whether the RDBMS is a client/server system or a file server system. 32-bit engines should be adequate for FNCFSAs.

28 Such flexibility would also take care of what the Auditor General of Canada called "report creep", where the introduction of a new program invariably adds to reporting requirements.

29 The amount of memory is a function of the number of concurrent Terminal Services clients. 2 GB should be able to handle up to 20 clients.

30 The same idea applies to complex organizations and governments as well, although enterprise versions of system software are needed and elaborate security measures are usually involved. In addition, mainframe computers and high-end servers may be deployed, especially in a government computing environment.

31 Items D1, D2 and D3 in the table below and in Appendix B concern technology refresh planning.

32 Most, if not all agencies use Microsoft software products. Therefore, the hardware and software we recommend support this strong tendency.

33 See Appendix B for details and costs.

34 Trocmé, N, Nutter, B, MacLaurin B, Fallon, Barbara (1999), *Child Welfare Outcome Indicator Ma*trix Toronto, Bell Canada Child Welfare Research Unit, Faculty of Social Work, University of Toronto.

35 DePanfilis, D., & Zuravin, S. J. (1999). Epidemiology of Child Maltreatment Recurrences. *Social Services Review*, 73(2), 218-239.

36 Trocmé, MacLaurin, Fallon, et.al. (2001) *The Canadian Incidence Study of Reported Child Abuse and Neglect (CIS): Final Report*, Ottawa, Ontario: Minister of Public Works and Government Services Canada.

37 Eckenrode, J., Laird, M., & Doris, J. (1993). The Effect of Neglect on Academic Achievement and Disciplinary Problem: A Developmental Perspective. *Developmental Psychology*, 29, 53-62

38 Kufeldt, K., Baker, J., Bennett, L., & Tite, R. (1998). Looking After Children in Canada: Interim Report . Fredericton, New Brunswick: University of New Brunswick.

39 Howing, P. T., Wodarski, J. S., Kurtz, P. D., & Gaudin, J. M. (1993). Maltreatment of the school-age child: Developmental outcomes and system issues. New York, NY: Haworth Press.

40 see footnote 36.

41 Schuerman, J. R., Rzepnicki, T. L., & Littell, J. H. (1994). *Putting Families First: An Experiment in Family Preservation*. New York, NY: Aldine De Gruyter

42 Rosenbluth, D. (1995). Moving In and Out of Foster Care. In J. H. a. B. Galaway (Ed.), *Child Welfare in Canada: Research and Policy Implications* (pp. 233-244). Toronto: Thompson Educational Publishing, Inc

Extraordinary Costs and Jurisdictional Disputes

CHAPTER 6

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First Nations Child & Family Caring Society Canada

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Executive Summary

Jurisdictional disputes and extraordinary costs are endemic to all bureaucratic apparatuses. However, it is not always clear where the boundary between the two terms lies. For the purposes of this analysis, a distinction is made between extraordinary events that are unanticipated, unforeseen, or outside normal risks, from events that appear extraordinary because they lie outside or between established jurisdictions.

Since Directive 20-1 is a national formula, it is not surprising events classified as extraordinary for many First Nations agencies are in fact quite ordinary for some agencies. This is particularly true where agencies are responsible for remote communities with their high incidence of community dysfunction and high travel costs.

Distinguishing between extraordinary and ordinary local events can only be done through the application of community capacity studies, which will provide a guide to the particular needs of the communities serviced by agencies.

The data from this study suggest there are two primary types of jurisdictional disputes plaguing First Nations agencies. First, persistent disputation between INAC and Health Canada over funding for non-insurable medical costs leads to denial or unnecessary delay in the provision of services to children in the care of agencies. In particular, children with complex developmental, mental health, and physical health issues suffer from these delays. Second, some agencies report disputes between themselves and provincial counterparts due to insufficient funding to cover provincially mandated services, demands by provincial actors for agencies to take responsibility for children not recognized by INAC, and disputes over appropriate case practice.

The effect of jurisdictional disputes is to divert staff effort and agency funding from targeted activities and toward dispute resolution. Moreover, the incidence of jurisdictional disputes is highly variable across agencies suggesting some agencies find themselves in a disputing environment in which there appears to be a minimum of cross-agency cooperation. Further, data shows a rough correlation between frequency of disputes and the degree to which agencies service remote communities.

Suggested mechanisms for preventing or resolving jurisdictional disputes include; conducting community capacity studies, establishing interagency committees at local, regional, and provincial levels (with adequate funding for necessary travel), funding for mediation between disputing parties as necessary, and establishing an officer responsible for advocating on behalf of on reserve children.

Data on extraordinary costs does not reflect events that are unanticipated, unforeseen, or outside normal risks. Rather, the data is very similar to that considered under jurisdictional disputes and suggests that much of what is considered 'extraordinary' is, in fact, a body of predictable and repetitive events for which no established jurisdiction can or will take responsibility. For example, complex medical needs are mentioned both as jurisdictional disputes and as extraordinary costs. Yet, the incidence of complex medical needs is calculable and therefore not unexpected.

That said, some agencies report the periodic outbreak of community crises related to sudden high rates of suicide, substance abuse, or other socially destructive behavior. These crises are sudden in the sense they depart from community norms and therefore constitute a major drain for agencies already overstretched by their ordinary commitments. It is important to recognize that these kinds of crises cannot be managed by casework insofar as the dysfunctional unit appears to be the community as a whole, rather than its individual members.

Further, while not noted by agencies surveyed, there are a range of possible extraordinary costs that have been experienced by other child welfare jurisdictions. These include exposure to legal liability, required involvement in public inquiries, and social consequences of natural disasters. The two former types of extraordinary costs are in the nature of moral hazards insofar as while their occurrence is random they are nevertheless

intrinsic to the child welfare enterprise.

It is also evident that little attention has been paid to the cost implications of making reserve communities accessible for disabled children. These costs are not restricted to individual residences, although that is an issue, but also to general civic improvements.

From the perspective of jurisdictional disputes and extraordinary costs a major requirement is a better relationship between Health Canada and INAC. Cooperation between these two federal agencies would save considerable effort and expenditure currently falling to agencies. Some of the cost issues can be addressed by re-jigging Directive 20-1 to more accurately reflect the actual costs of delivering child welfare services. In particular, recognition of the enormous costs of travel for agencies servicing remote communities and a graduated maintenance schedule recognizing the existence of complex needs and the guardianship responsibilities they entail. Similarly, the formula must provide for recognition of the differing responsibilities created by varied provincial legislative regimes.

Finally, it is significant that the on reserve population of children do not have a designated minister or officer dedicated to advancing their interests. This is unique in Canada. In particular, the lack of an ombudsman or advocate for First Nations children places them out of step with the U.N. Declaration of the Rights of the Child and many provincial jurisdictions. It is the position of the author that jurisdictional disputes and the extraordinary costs they generate are likely to persist so long as there is no government supported independent voice dedicated to solely to advancing First Nations children's interests.

Introduction:

The following paper is organized into four parts. First, I provide an overall discussion of how we might think about extraordinary costs and their relationship to jurisdictional disputes. In the second section I turn to surveyed agencies' responses and consider the types of jurisdictional

disputes which are so common as to not meet the test of 'extraordinary' since these disputes are not unanticipated, unforeseen, or outside normal risks. However, I also underline that that which is ordinary for some jurisdictions is abnormal for others – and this is particularly true of travel costs to remote communities and the kind of services which, at present, are legally mandated yet practically impossible to deliver. I follow this with a section concerned with extraordinary costs as described by agencies. Again, I try to distinguish costs which are truly extraordinary from those that ordinary but not addressed by current funding and staffing arrangements. Each of the second and third sections includes a summation of the issues raised and observations about how to address them.

I conclude the paper with a distillation of the paper's findings into recommendations with respect to improving funding under Directive 20-1 and a call for budget lines not contemplated by the Directive. I recognize it is a preferred strategy to improve rather than eliminate the conditions of Directive 20-1 but the reader will realize that the subjects of extraordinary costs and jurisdictional disputes presuppose failings or gaps in the present formula. While some of these problems can be addressed by tinkering with present budgetary procedures, there are issues which have arisen for First Nations agencies which clearly were not contemplated by the authors of the Directive and cannot be addressed by an adjustment to current structural arrangements. However, I hope the reader will appreciate that where possible I have suggested changes which could be addressed under the current structural regime; the rest is perhaps a longer-term project but, I hope, worth the effort.

Locating the Extraordinary:

The past several decades have seen an explosion of "assessment" tools and an accompanying theoretical literature on what should be assessed, how assessments should be constructed, and what purposes assessments should serve. In general, assessments are constructed around one or more of three concepts: risk, needs, and capacity (sometimes called strengths). However, no matter which concept is predominant, all assessment tools work from a normative base. Sometimes this normative base is constructed from expert opinion, other times it is constructed from specific and local research designed to create a baseline of present conditions. Participatory Action Research seeks to combine baseline research with a political agenda of change.

The majority of tools utilized by child protection systems use as their object either parents, children, or some combination of the two. This is true whether the central concept utilized by the assessment is risk or needs. Where community appears in these types of assessments, it is not, in and of itself, subject to assessment. Rather, community appears as a given and what is measured is not community functioning but the child's or parents' involvement in this assumed community. Effectively, this approach conceives of parents and children as more or less defective liberal citizens situated within interchangeable healthy communities.[1]

INAC recognizes at least one distinction between reserve communities – degrees of isolation. Its basic departmental data utilizes four categories (urban, rural, remote, and special access) based upon geographic distance from a 'service center' (INAC 2003, 94). While not overtly stated, this classification system appears to assume quality of life is related to accessing services contained within a service center. However, there is no reason to assume this single dimension is an adequate measure of quality of life or that it is capable of distinguishing between healthy and toxic communities.[2]

The significance of this observation is central to the conception of extraordinary costs. An assessment scale designed to assess only parents, or only children, without taking account of community functioning will necessarily create distortions. It is reasonable to suggest that a child presenting objective extraordinary challenges (for example, autism, F.A.S.) will be much more likely to become a child in care if the challenges occur within a community with low child welfare capacity. On the other hand, if the community contains high capacity the child's objective challenges may present less difficulty and, hence, not be extraordinary.

Further, the conception 'child welfare capacity' is not limited to professional assistance or intervention. In theory, a healthy community would not require professional assistance or intervention because it would have its own internal capacity to address problems and issues as they arose. Within the First Nations context, the frequently cited importance of extended family indicates Nations composed of healthy extended families would not require professional intervention – or at least not an alternate care system – since healthy extended families would tend to care for their own.

In contrast to child welfare literature, a significant body of community assessment tools has emerged in the population health area (Granner and Sharpe 2004). As well, a variety of needs assessment tools have emerged in the U.K. in response to various central government initiatives designed to ensure local authorities are responsive to the needs of local jurisdictions (for example, see Browne 1996). The examples provided by Percy-Smith (1996) include assessments of community care, community needs, housing needs, access to legal services, and labor market and training needs. Others, such as Oetting et al (2001) have attempted to create a theoretical and methodological base for needs assessment. Meanwhile, Family Support America (Samuels et al 1998) has developed a step-by-step guide for assessing community needs and Christakopoulou et al (2001) have reported an initial international test of reliability and validity for a community well-being questionnaire.

Of urban Europe, Christopoulou et al write:

> *The need for a comprehensive profile of community wellbeing arises from the multiple nature of the problems themselves that many urban neighbourhoods face. Although disadvantaged neighbourhoods are often classified as low income areas, it is a mixture of environmental, social and economic problems that undermine investments and residents' commitment to these areas often encourage social exclusion.* (ibid, 322)

The significance of this understanding of multiple causes of lack of community wellbeing is reflected in the data collected by Trocme et al (n.d.). Here, substantiated child protection investigations on reserve reflect the presence of an average of 4.1 risk factors as opposed to an average of 2.5 risk factors for non-aboriginal children (ibid, 23). Moreover, amongst these risk factors mental health issues occur in 40% of all cases yet the Joint National Policy Review notes that of fifty First Nations child welfare agencies surveyed only eight had contact with mental health agencies (McDonald et al 69). In other words, given the prevalence of mental health concerns in child protection matters it astonishes that in five of nine provinces First Nations agencies had no contact with mental health services at all.

From the point-of-view of extraordinary costs the presence of mental health risk factors for on-reserve child abuse investigations is not extraordinary at all. It is, like alcohol abuse (73% occurrence) and solvent abuse (54% occurrence), virtually normative despite being far in excess of normal occurrence rates in non-aboriginal communities. Given these facts it is unreasonable to assume that on-reserve child welfare services should simply match usual provincial service levels because by this standard all aboriginal communities have extraordinary needs in comparison to non-aboriginal needs. Further, despite the usefulness of national figures, the reported Trocme et al (n.d.) data is not fine grained enough to suggest the distribution of risk factors across the on-reserve population. It is reasonable to suppose that risk factors are, in fact, unevenly distributed across nations and localities.

A funding formula for child welfare agencies must take into account not only the demonstrably greater needs of on-reserve populations, but must also discern differences between First Nations since the determination of what constitutes an extraordinary event or problem cannot be uniform across localities. More precisely, it is not possible to determine which individual cases are extraordinary without reference to local and particular norms.

Risks and Strengths:

Returning to the need for a calculus of risks and strengths within communities, and the question of what appropriate level of funding is required. We might put this graphically in this way:

Statutory Requirements

Risks ----------		---------- funding
	Capacity	
Strengths --------		----available resources

Fig. 1

Higher levels of risk indicate an increased necessity for funding. However, funding does not, in itself, create healthy communities. Therefore, while strengths would presumably positively correlate with available resources this is not a simple equation of more resources equal more strengths. For the present, 'available resources' is meant to reflect expertise and wisdom, the presence of appropriate jurisdictions to address issues impinging upon child welfare, and, perhaps most importantly, adequate networking of available resources distributed across jurisdictional boundaries. In short, available resources are not simply additive; resources become strengths when they knowledgeable and sufficiently networked to create meaningful responses to social challenges.

Required or Preferred?

Despite much effort, there is, as yet, no generally accepted agreement as to what constitutes the minimum number or type of satisfiers of human needs upon which citizens have a universal claim

within a welfare state (Percy-Smith 1996, 143). As outlined in the National Policy Review, there are at least three conceptions of required services under which First Nations agencies must operate: statutory, contractual, and audit formats. In other words, First Nations agencies must comply with applicable statutes, with the conditions of their bipartite and tripartite contractual arrangements, and the financial, record-keeping, and case practices formally reviewed through audit systems. While these requirements vary in their details, the National Policy Review indicates they exist across provincial jurisdictions. In particular, statutes generally agree on broad definitions of child abuse. We make take these requirements as providing for the minimum number of satisfiers required to meet human needs.

The large number of on-reserve children in care indicates a discrepancy between reserve capacity and reserve needs. Clearly, in the judgment of child welfare agencies a high proportion of on-reserve children face an unacceptable level of risk of child abuse. The vast majority of funding directed at alleviating these risk conditions is predicated upon child removal. However, it is not immediately clear whether this strategy is based upon any given reserve's lack of strengths (in which case it is not individual parents who are the source of risk but the community as a whole), a lack of resources (understood as networked expertise and practice), or a lack of funding to operationalize latent strengths and resources already extant. Alternatively, even if sufficient funding for a specific function (say psychiatric care) were available it is not immediately obvious that there would be anywhere to spend it. One can easily imagine a perversity of funding arrangements in which adequate funding for psychiatric care was available but accompanied by insufficient travel funding to get the client to the psychiatrist (or the psychiatrist to the client).

There seems little point in rehearsing the reasons why on-reserve children are taken into care more often than non-aboriginal children. The question that needs to be addressed is what to do about the problem. I suggest that any policy which seeks equivalency between on-reserve services and non-aboriginal services misses the point. It is not the equivalency of services that is required but an equivalency of community capacity to create the minimum number of satisfiers to meet human needs. However, the distinction between required and preferred satisfiers is blurred by what Ian Hacking calls a "looping effect" (Hacking 1995). As an example, it was not so long ago that high school graduation was preferred but not required for the purposes of employment. As more people become aware that high school graduation is possible (and as employment standards come to recognize the possibility) more people come to define themselves as either graduates or drop-outs[3] and this self-definition is colored by the generally held belief that high school graduation is not preferred but necessary.

Consider also something as simple as indoor plumbing. Even in Canada's urban areas indoor plumbing is a relatively recent adaptation. Nevertheless, indoor plumbing has rapidly become a necessity where before it was only preferred. Now consider requirements for foster parents to possess "adequate housing". Presumably, "adequate" in this context would take as its normative referent the provision of indoor plumbing because this is a national norm even though it may not be a local norm. Yet, this national norm is a relatively recent occurrence. This means that an architectural innovation rapidly became a norm beyond the realm of architecture and into the realm of (amongst other things) child neglect. A child raised without indoor plumbing falls below the national norm and, more importantly, comes to be viewed both by him/herself and others as living in inadequate housing.

From this perspective, a major difficulty for reserve populations is the impossibility of "catching up" to ever-evolving national norms. Put another way, reserve populations can never achieve normative community capacity if the resources available to them are predicated upon an assumption of an already achieved normative state. As the colloquialism goes, "it's hard to soar with eagles when you're swimming with alligators".

To the extent that on-reserve populations have failed to realize a normative level of community capacity they are exceptional. Yet, if the entire

on-reserve population has exceptional needs it follows that no on-reserve person has exceptional needs. I suggest this is a major reason why INAC has shown a remarkable reluctance to fund exceptional costs. It may be useful here to acknowledge that this is not a problem restricted to reserve populations. The Windsor-Essex County Children's Aid Society ran into a similar problem when they classified all children in their care as "special needs" (personal communication, April 2005).

Extraordinary Review

The National Policy Review (McDonald et al 2000) noted that there is no uniformity across provincial jurisdictions with respect to reporting and audit functions. This is a problem in itself, but it is also the case that no child welfare jurisdictions are immune to child fatalities or critical incidents. While many of these fatalities and incidents follow a routine form of review (either internal or external to child welfare agencies), it is also the case that occasionally such incidents are brought into the public view (typically through press coverage) and become objects of public inquiries[4]. For present purposes, the importance of these events are a) the impossibility of predicting when and where they will happen, and b) whether the event will remain within normative review processes or will create a public inquiry requiring large amounts of agency time and effort.

First Nations child welfare agencies have not been immune to these sorts of inquiries. The "Baby Andy" case involved both a review panel and a "fact finding" project conducted by the Children's Advocate of Saskatchewan. While not as massive as some inquiries, this review demanded considerable agency time and resources.

The Children's Advocate Office completed independent fact finding by holding interviews with 23 persons from 11 agencies and reviewing documentation from all relevant files and records. This information was compiled and provided to the review panel in February 2003 for thorough analysis. (Saskatchewan 2003, 7)

An inquiry into the 1998 deaths of Constance Jacobs and Tyundanaikah Jacobs at the Tsuu T'ina Nation, Alberta does not give an account of how many people were consulted, however some twenty legal counsel representing various parties participated in the inquiry's activities (Goodson 2000).

Some jurisdictions – notably British Columbia – have experimented with mandatory reviews of child fatalities and critical incidents by independent or quasi-independent bodies[5]. These policies tend to depend for their longevity on the vagaries of press coverage and provincial government's political problems. In any case, for present purposes the main point is that inquiry involvement is largely unpredictable, outside First Nations control and, most importantly, expensive in terms of both funding and time. Social workers and administrators who participate in inquiries are taken away from their normal tasks in order to service the requirements of inquiries. Additionally, such inquiries typically occur within very public and highly charged emotional situations. Staff moral is almost always adversely affected resulting in loss of productivity.

Concluding Remarks

The foregoing section has attempted to highlight the difficulty in conceptualizing what the category 'extraordinary' contains in the context of child welfare. A principle difficulty is the high level of need demonstrated by many First Nations communities. Many events that might be described as extraordinary in the overall Canadian context are, in fact, quite ordinary in First Nations' experience. That said, it remains to be seen how uniformly such events are distributed across the universe of First Nations. In any case, the argument has been made that it is impossible to identify extraordinary events without an assessment of the overall capacity of communities using available tools.

This analysis has been necessary in order to distinguish the projected greater needs of First Nations' communities from their off reserve counterparts. If, as is indicated by available

research, First Nations communities are generally high needs then the prospect of simply matching services available off reserve will always leave First Nations resource poor. In turn, the discrepancy will generate extraordinary costs due to predictable jurisdictional (service) gaps. What is needed is a philosophy of matching services to particular needs, rather than matching services to a presumed provincial average. In any case, matching service provision to provincial equivalents must result in varied service provision across provincial boundaries where those services are subject to differing legislative, policy, and audit regimes.

Moreover, as discussed in the final section, extraordinary events such as child fatalities can rapidly lead to expenditures of time and funds for activities demanded by inquiries. These inquiries are impossible to predict because they tend to be struck in response to the passing interests of parties normally outside the child welfare universe. This is particular true of the press whose interest in any particular case is dependent upon a variety of commercial pressures (i.e. competing stories) but nevertheless can exercise considerable public pressure. This point will be further argued below, but for the moment it is important to recall that it is not child mortality per se that is extraordinary – rather it is the public reaction to specific children's deaths that is extraordinary.

Anyone familiar with public inquiries into child welfare recognizes the repetitive plea for better communication and better coordination across jurisdictions. Conceivably, most extraordinary events are, in fact, not extraordinary at all. Rather, they are events for which bureaucratic and service responses are lacking. The following section takes up this theme in greater detail. It will argue that many events characterized as extraordinary are quite common occurrences. What makes them extraordinary is the degree to which jurisdictional disputes hamper, delay, or prevent appropriate service delivery.

If we can locate persistent jurisdictional disputes in the same terrain as persistent extraordinary costs then it ought to be possible to identify service gaps. Such service gaps are distinguished from extraordinary events because they meet none of the criteria defining extraordinary. That is, they are not unanticipated, unforeseen, nor outside normal risks.

Jurisdictional Disputes

Frequency

Aggregate data indicates all but one of the study agencies experienced jurisdictional disputes. The frequency of these disputes varied from 1 to as many as 165. Over a year, resolution of each dispute took anywhere up to 200 hours of staff time with half the reporting agencies dedicating 10 to 150 hours as usual.

Frequency of jurisdictional disputes is not reflected in the amount of staff time required. For example, one agency reported only one jurisdictional dispute but this engaged four staff members for an estimated total of 150 hours. The lowest estimate of staff time per dispute is two hours. By far the largest estimate of staff time dedicated to jurisdictional disputes was 200 hours per dispute of a total of 32 disputes, necessitating a total staff commitment of 6,400 person hours. The highest estimated total number of disputes per year was 165 at an estimated 20 hours per dispute totaling 3,300 hours.

Data from the studied agencies did not specify time per occupational classification. Therefore, it is not possible to give an overall dollar cost for staff time although it is possible to calculate costs for reporting agencies in terms of Full Time Equivalents (FTEs). Based on a 35 hour week, agencies reported a low of 0 FTEs to a high of 3.5 FTEs required for resolving jurisdictional disputes.

Types of Disputes:

One agency reported only disputes between the federal and provincial governments. These disputes are reported to be over "kinship care". It is not clear what the exact nature of this dispute was, but it may be that there is no provincial equivalent to the federal Guardianship for Aid (GFA) program or possibly traditional adoption. Insofar as the GFA does not require child protection authorities to take custody of children this may be better phrased

as a dispute over preventative services rather than funding for children in care's residential or clinical requirements.

Six of nine studied agencies reported jurisdictional disputes between federal ministries/departments primarily due to disputes between the Ministry of Health and INAC over Non-Insured Health Benefits. By contrast, only one agency reported disputes internal to provincial governments (5 disputes).

Four of nine agencies report disputes between the agencies and provincial programs. Significantly, two of these agencies report from the same province (British Columbia). Further, where jurisdictional disputes between agencies and provincial governments occur, they comprise the largest proportion of disputes (although in two instances, frequencies of disputes between federal agencies/ministries and disputes between agencies and provincial governments are reported as identical.)

Three agencies report internal jurisdictional disputes i.e. between different First Nation programs, but the total number of disputes is minor in comparison to disputes between federal agencies and agency disputes with provincial governments.

Four agencies report disputes between themselves and the federal government. Again, in general these disputes are relatively minor in terms of the proportion of total jurisdictional disputes.

Overall Observations

Where jurisdictional disputes occur, the overwhelming incidence is concentrated in two areas. First, disputes between (a) federal agencies and second (b) disputes between First Nations' agencies and provincial governments.

a) For disputes between federal agencies, examples provided by reporting agencies show disputes are largely concerned with funding disputes between Health Canada's First Nations and Inuit Health Branch (FNIHB) and the Indian Affairs Department of INAC. The general impression is that First Nations agencies find these disputes particularly frustrating since while they are not party to the dispute, they are responsible for the health and care of the children in question. One can easily infer that because neither FNIHB nor INAC have direct responsibilities for children they do not experience the sense of urgency felt by First Nations agencies.

The problem of disputes between federal ministries may also be related to location. Problems of jurisdictional disputes between federal ministries are more likely to occur for agencies responsible for remote communities. One might infer, therefore, that problems of transportation and communication play a part in creating and extending jurisdictional disputes. For example, where there is a pressing need for diagnostic services in remote communities, and where this need is associated with lack of local resources, the dispute is likely to revolve around both large transportation costs and the scale of the demand. In other words, remote communities tend to have large numbers of undiagnosed disabilities (particularly FAS) which, at the very least, must create an enormous backlog of referrals.

b) Jurisdictional disputes between First Nations agencies and provincial governments are not widespread – occurring in only three of nine provinces. However, where they do occur, they consume a considerable amount agency time. Comments accompanying the survey suggest several sources of conflict. First, inadequate funding for First Nations' agencies to absorb the influx of responsibility associated with agencies receiving delegation. Second, disputes over the limits of First Nations' agencies capacity – what one agency described as provincial governments' "dumping cases". Provinces seem to expect First Nations' agencies to take responsibility for all band members irrespective of whether the members are recognized by INAC as reserve residents and therefore eligible for federal funding.

That said, a major source of jurisdictional disputation does not involve money, but practice. That is, First Nations' agencies report their provincial counterparts either do not keep them informed as to members' involvement with

provincial systems (and if they do, they assume First Nations' consent for provincial protective action) or do not employ 'least intrusive' strategies and tactics such as variations of kinship care.

Of course, while these latter types of dispute do not entail direct maintenance costs to First Nations' agencies, they do absorb a considerable amount of staff time (from a low of 10 hours per case to a high of 200 hours). Funding for staff time is presumably drawn from maintenance budgets for children in care of agencies and therefore the cost of these disputes is effectively transferred from children in the care of agencies and to provincial social work and judicial apparatuses.

Disputing Cultures?

It is remarkable that some First Nations' agencies report an enormous resource drain due to jurisdictional disputes while one reports no disputes whatsoever. Moreover, of the nine agencies surveyed, four identify only one type of dispute and three of those concern disputes between federal ministries, not disputes between the agency and some other entity. Further, of these latter agencies the number of disputes is significantly lower (to a maximum of 5 per year). By contrast, agencies reporting multiple sites of jurisdictional disputes report between 17 and 30 disputes per year except for one agency reporting a staggering 165 disputes[6].

The frequency and distribution of jurisdictional disputes has no correlation with either the number of children in care or the educational attainment of social workers. Instead, the best predictors of high rates of jurisdictional disputes are a) disputes between FNIHB and INAC and b) agencies and provincial jurisdictions where provincial policy and/or statute requires agencies to undertake tasks not funded by INAC. Related to the latter are disputes over best practices. On the one hand, agencies are not funded to perform tasks mandated by provincial legislation, while on the other hand agencies view provincial authorities as failing to encourage least intrusive strategies or to utilize traditional forms of alternate care.

In short, First Nations agencies reporting multiple jurisdictional disputes seem to be engaged with a wide range of disputes leading one to suspect either a) a general breakdown between all levels of government – including to some extent internal band government, or b) some agencies have not been able to create a non-disputing persona. This is not to suggest such agencies engage in disputes without substance, but rather certain characteristics of their particular situation either induce disputes or prevent dispute resolution[7].

It is possible that variation in reported jurisdictional disputes is not so much a measure of actual disputes but a measure of whether agencies create either a trust relationship or a bureaucratic routine with federal departments. For example, an agency reporting no jurisdictional disputes makes the following comment:

INAC and Health Canada fight, but agency sends bill to INAC and gets reimbursed. INAC then sorts it out with Health Canada. Almost anything with a medical component triggers a dispute. Agency is protected by a clause in its agreement.

Whatever the clause in the agreement is, it is clearly not a national clause because this is the only agency which considers disputes between INAC and Health Canada to be of no consequence to the agency itself. Hence, because the dispute is contained within federal departments no agency effort is directed at resolving the dispute.

The principle disputes at issue then are as follows.

1) Disputes between FNIHB and INAC which delay or withhold necessary non-insured health benefits to children.
2) Disputes between agencies and provincial authorities over the provision of services demanded by provincial legislation and/or policy but which is not reimbursed or contemplated by INAC policy.
3) Boundary disputes over which authority is responsible for particular children. Frequently these disputes are rooted in whether children or their parents are 'resident' on reserve

and the funding issues that flow from that determination. One agency reported these disputes can include the question of whether a child's parent died on or off reserve. These disputes include provincial authorities 'dumping' cases.

4) Disputes over appropriate practice. This is related to above insofar as agencies may view the range of provincial legislative or policy requirements as too limiting of culturally appropriate solutions. On the other hand, these disputes may also be based upon differing conceptions of safety thresholds and family strengths – that is to say, case management practice.

Structures for Resolving Jurisdictional Disputes:

Jurisdictional disputes may be solved through a continuum of strategies ranging from the informal to the formal. The best strategy depends upon the interests of the disputing parties, the relationship between the parties, the nature of the dispute, and whether the solution to any particular dispute ought to be general and binding on all similar disputes. The Province of Quebec identified a section of the responsible ministry (MSSSQ) whose task was negotiating intergovernmental issues. However, the Quebec based First Nation agency did not identify this division as resolving jurisdictional disputes. It seems the division is less a forum for resolving disputes than an arm of the provincial government specializing in negotiating with other governments on behalf of the Province of Quebec. While it is certainly useful to identify a specific part of government responsible for resolving disputes, this should not be confused with the actual resolution process itself[8]. Below I outline several possible processes and suggest the kinds of disputes they are best suited for.

Avoiding Disputes: Community Assessments:

The best way to resolve disputes is to try to prevent them from arising in the first place. There are several ways in which jurisdictional disputes might be avoided.

No policy initiative or shift in governmental responsibilities can anticipate all possible jurisdictional difficulties; however disputes often arise because of poor planning[9]. Above I alluded to the importance of conducting community capacity assessments. Indeed, it is striking that of the agencies surveyed, a community assessment was completed by only one agency apparently due to its block funding arrangement. By contrast, FNIHB insists that the first task of local delivery of health services is to conduct a needs assessment study and has created a handbook to guide local actors. The handbook's first paragraph makes the following point:

> Identifying home and community care priorities and needs through a community needs assessment is an important activity that needs to be conducted at the beginning of program development. Whereas word-of-mouth can be helpful for getting the idea for the program going, a needs assessment study provides a comprehensive and unbiased documentation of the needs in the whole community. (emph. in original) (Health Canada, [3])

The importance attached to community needs assessments by Health Canada is not surprising given the entrenchment of the population health paradigm within public health programs. However, it is also striking that children are almost entirely absent from FNIHB program strategies and goals. Indeed, with the exception of the Aboriginal Head Start program, and a brief flurry of training around FAS, children are entirely absent from FNIHB's literature. More precisely, the particular health needs of children are subsumed within general categories such as dental, vision; medical supplies and equipment, and so forth.

The absence of children as a category from FNIHB's literature is significant because it blinds medical practitioners to the physical and emotional consequences of child abuse and neglect. More precisely, it suggests abuse and its consequences are not FNIHB's responsibility. Since disputes between FNIHB and INAC over health funding for children in care are a major problem, it may be

that the genesis of these disputes is to be found in the lack of attention paid to child abuse and children in care by community needs assessments conducted within the population health paradigm.

The value of community assessments does not solely lie in their identification of community needs. Literature concerned with community assessments suggests that community assessments are themselves a mechanism for building community strength because they rely on the identification, mobilization and networking of key community members (Kelly et al 2003; Oetting et al 2001). Thus, community assessments not only collect objective information but they also play a part in establishing a shared mission and philosophy which is then widely distributed throughout the community. A community assessment that takes into account the social sphere as well as the medical sphere ought to result in both a clearer understanding of the health needs of parents and their children, but should also assist in developing cooperation between health care and social service providers. In turn, this ought to result in fewer jurisdictional disputes and therefore less time required for servicing disputes.

For all its emphasis on competition, business literature recognizes the central place of trust in economic relationships. This is because it would clearly be too expensive and too time consuming to litigate every dispute. Further, many business disputes arising from professional activities are too difficult to specify in terms of end product and therefore are virtually non-justiciable. The variable rates of jurisdictional disputes reported by agencies may well be a reflection of the presence or absence of trust. The comment by one agency (referred to above) that it trusts FNIHB and INAC to work out their funding arrangements – albeit with contractual support – indicates the importance of inter-agency trust. Note also this trust works both ways; presumably in this instance INAC trusts the agency not to bill for frivolous or unnecessary medical services. A major benefit of community assessments then is the opportunities they create for building trust relationships.

Managing Disputes: Committees:

Bureaucracies are ever faced with the task of imposing rational order upon the disorderly nature of lived experience. Bureaucratic rationalism requires the bounding of human experience within specified categories of action and under the domain of specified areas of expertise. It is perhaps the great irony of bureaucracies that in order for them to function at all they must divide experience into manageable parts. As Nikolas Rose (1999) has remarked, this results in rational bureaucracies resembling Tinguely's fantastic machines filled with independent and often borrowed parts that while seemingly randomly connected nevertheless get things done.

Bureaucratic classifications of experience and expertise tend to create departmental isolates. For one department a client is a set of teeth, for another a problem to be transported, and for a third a risk of child abuse. As each department attempts to sustain its own isolated rationality it may find itself at cross-purposes with other departments where the overall result is either nullification of action or the misuse of extant programs in order to address a service vacuum created by another department's policies.[10]

The usual response of bureaucracies to identifying, preventing, or resolving bureaucratic jurisdictional disputes is the committee. In theory, a committee is capable of reassembling the bureaucratic whole through representatives of departments and expert domains. A standing committee recognizes that some jurisdictional disputes are likely never entirely resolved at least in part because every bureaucratic system must cope with anomalies and exceptions on a case-by-case basis.

Committees are successful when they are a) fully attended by their members and b) based upon high trust between their members. Both of these factors have costs associated with them. Full attendance requires adequate funding for time and travel costs. Where time commitments are large this will have a 'knock-on' effect in terms of back-fill. Travel costs require a recognition that funding is directed at abstract goals – that is to

say, it is unlikely that 'trust' can be conceived as a measurable good and therefore would be opaque to value-for-money audits. Further, these costs will be higher for agencies servicing remote communities since travel will be both more extensive and more difficult. However, the reader will recall that frequency of disputes seems to be positively correlated with degree of isolation. If we can accept that trust relationships are more likely to occur in face-to-face relation than through communication technologies located in isolated areas, then a standing committee structure is likely to enhance trust relations and therefore reduce jurisdictional disputes. [11]

As we have seen, the bulk of jurisdictional disputes concern either disputes between INAC and FNIHB (in which agencies are caught in the middle) or disputes between provincial governments and agencies often due to lack of INAC funding for provincial legislative and policy requirements and exacerbated by a lack of understanding of these limitations on the part of provincial officials. Hence, a standing committee structured to require attendance by these three bureaucratic spheres ought to lessen at least some jurisdictional disputes. I have in mind an hierarchical structure composed of local, regional, provincial, and possibly national committees in which disputes that cannot be resolved at one level may be raised to a higher table.[12]

It is possible to build in an incentive to standing committee's effectiveness by attaching a budget line. That is, a separate discretionary budget for family and children's services accessible solely through the committee and requiring some form of quorum or consensus. I will address this further under the heading of 'Extraordinary Costs' since as I have argued above many extraordinary costs are not in and of themselves extraordinary but, rather, costs outside established jurisdictions and budget lines. That is to say, they are often boundary cases because they partially fit many budget lines but wholly fit within none.

Resolving Disputes: Alternative Dispute Mechanisms

In the movie "Cool Hand Luke" the prison warden explains his brutalization of a prisoner with the phrase: "What we have here is a failure to communicate." Alternate Dispute Resolution mechanisms (ADR) are predicated upon the belief that most disputes are rooted in failures to communicate resulting in a perception by at least one of the disputing parties that they have not been heard – if not brutalized. ADR can take several different forms with arbitration, mediation, and their several sub-forms being predominate. There are two main advantages of ADR over litigation. First, ADR tends to be informal and therefore has more discretion as to what factors (particularly emotional factors) are important and tends to be less expensive than litigation. Second, ADR seeks to create win-win situations through creative solutions where litigation creates win-lose solutions defined within legal parameters and procedures.

However, there are some important negative characteristics of ADR that ought to be kept in mind. First, ADR works best when it is voluntary. Parties who engage in coerced ADR have no stake in the process and therefore the whole philosophy of ADR is undermined. Second, informal procedures provide little protection where the parties enter ADR from unequal power positions. The formality of judicial procedures does provide a hedge against bullying or extortive behavior. As well, ADR can lead to solutions that are less advantageous than legal precedent expects. Third, ADR is often time limited, meaning there can be unreasonable time pressure on parties to reach an agreement irrespective of whether or not it is fair. Fourth, ADR tends to lead to "split-the-difference" solutions on the theory that half a loaf is better than no loaf. However, for the sorts of disputes under consideration here, half a prosthetic device or half a counseling regime (for example) is no solution at all.

Finally, mediators and arbitrators are typically selected by consent of both parties. Since some parties (i.e. insurance companies) frequently find themselves in ADR they tend to hire many more mediators and arbitrators than the other disputant.

In turn, mediators and arbitrators operate within an economy of ADR and it is only natural for them to either consciously or unconsciously attempt to please their primary customers.

Nevertheless, ADR can be a useful mechanism for resolving persistent jurisdictional disputes because of its emphasis on win-win solutions. And, the cost savings over litigation or the persistent drain of staff time due to unresolved disputes may make ADR an attractive alternative to both disputing parties. Nevertheless, while ADR may be cheaper it is not free. Nor does it necessarily save on legal fees insofar as many parties engaging in ADR are wise to engage the services of a solicitor to ensure both the process and settlement are fair. The extent to which agencies can expect to engage in ADR is dependent upon their current dispute frequency and their anticipation of further disputes arising due to government policy changes[13].

From a budgetary perspective, it is unlikely that ADR could be planned for on a global basis since, as we have seen, the frequency of jurisdictional disputes are highly variable. It seems more reasonable that agencies with a history of disputes would need to create a separate budget line (or claim against INAC) based upon their particular situation. From the perspective given here, what is important is that such a budget line be created for those agencies able to demonstrate the need.

Some may argue that to create such a budget line would be to encourage disputes rather than the smooth operation of jurisdictional cooperation. While I certainly allow for the possibility, I find this concern unfounded because it fails to take account of a secondary byproduct of ADR. Pavlich (1996) points out that a major goal of ADR is to teach participants how to resolve their own conflicts – what he calls the creation of non-disputing selves. The reader will recall that I have speculated above that the extraordinarily high number of disputes reported by a minority of agencies seems to suggest a culture of dispute. If Pavlich is right, then a major reason for this culture may not be the objective conditions under dispute but the lack of skills and trust available to the disputing parties. In theory, ADR provides a forum for disputing organizations to acquire a non-disputing persona by gaining skills and enhancing future trust relations based upon the increased likelihood of win-win solutions. At the very least, a skilled mediator ought to be able to increase the level of trust due to their practice goal of having each party hear and understand the position of the other party.

Formal Advocates and (Child) Rights Approaches

The United Nations Convention on the Rights of the Child, ratified by Canada in 1991, is generally accepted as a watershed moment in defining the relationship between the state and children. In its wake, the Convention has created a number of reporting requirements and advocacy apparatuses designed to monitor and report on states' compliance with the Convention's requirements. According to Canada's Second Report on the Convention of the Rights of the Child (Canadian Heritage 2003) there were five Canadian provinces with some form of advocate, commission, or ombudsman dedicated to insuring governments act in accordance with the Convention[14]. Other provinces identified a specific minister designated to act on behalf of children's rights.

The federal government does not have a single ombudsman although a number of ministries and departments have their own internal ombudsman. (Interestingly, the staff of INAC has recourse to an internal ombudsman.) Since Canada's constitution assigns governmental responsibility for social services and children to the provinces, the federal government does not ordinarily have any requirement for a child advocate to monitor its own policies and procedures. However, the situation of First Nations children is different since the federal government retains a fiduciary duty toward them. This anomaly means that First Nations children on reserve are the only children in Canada for whom no authority is designated as responsible for them, and they are among that proportion of children who cannot call upon an independent body dedicated to speaking on their behalf. Given that a significant number of jurisdictional disputes concern disputes within the

federal government the absence of an independent voice effectively means there is no way to leverage policy and procedural change for the benefit of aboriginal children.

By contrast, the recent example of children in care of Ontario Children's Aid Societies due to the government's decision not to fund Special Care Agreements and its subsequent reversal of that policy was largely due to the activities and report of the Ombudsman of Ontario (2005). Similarly, in British Columbia, pressure to change child protection legislation in the early 1990s came in no small part from the release of two provincial Ombudsman's reports (1990; 1991)[15]. Hence, while Ombudsman and other Advocates have no authority to make governments change their policies, the ability of these officers to embarrass government through their public reports can provide an important and effective incentive for change.

The importance of independent voices speaking on behalf of children has been noted by UNICEF:

> …without independent institutions focusing entirely on the rights of children, these rights will rarely receive the priority they deserve. While children are among the heaviest users of public services, they remain the people who are least able to influence the actions of governments. The main task of such institutions is to close the gap between the rights rhetoric and the realities of children's lives, ensuring that rights are translated into law, *policy and practice*. *(emph. added.) (UNICEF 2001, 1)*

Thus, while the Convention explicitly requires states to "strive to ensure that no child is deprived of his or her right of access to such health care services" (Article 24) the reported jurisdictional disputes between INAC and FNIHB seem to amount to such a deprivation. Further, Article 12 requires states to take into account the views of children but in the absence of a designated voice representing the interests of First Nations children this right is more rhetorical than substantive.

The federal government has introduced Bill C-257 titled "An Act to establish a First Nations

Ombudsman and a First Nations Auditor to assist with administrative and financial problems"[16]. However, while Section 2 (a) (iii) contemplates this Ombudsman investigating problems arising "between one or more First Nations communities and the Government of Canada", it is clear the Bill's principle concern is with financial irregularities within First Nations' governments. The Ombudsman's task will not be, as law professor Larry Chartrand has noted, to "monitor non-aboriginal governments' accountability to aboriginal peoples". Further, the First Nations Ombudsman does not have responsibility for investigating difficulties involving individuals – its concern is between First Nations governments and INAC – unless that difficulty is between a band member and his or her First Nation government.

Disputes within the federal bureaucracy are unquestionably the responsibility of the federal government. However, as we have noted, jurisdictional disputes are as likely to occur with provincial authorities. Would a federally constituted ombudsman or child advocate have the authority to intervene in these kinds of disputes? In principle, there seems to be no objection. As has been frequently noted, just because the federal government has not legislated on behalf of First Nations children on reserve does not mean it cannot. This is a choice of the federal government. A federally constituted child advocate would not be inherently restricted to federal government programs since the office's task would be to represent First Nations children – no matter where their concerns lie.

Moreover, as noted above, ombudsmen and child advocates normally do not have authority to make government – in this case either federal or provincial – change law or policy. Rather, their role

is to investigate, report, and, if need be, embarrass governments into action. Further, provincial ombudsmen and child advocates share certain general characteristics. There is no reason to suppose a federally appointed advocate could not participate in a cooperative network of advocates composed of both provincial and federal officers charged with resolving jurisdictional disputes of mutual interest.

Linking Mediation and Advocacy:

In the previous section I argued for a separate budget line that agencies could call on for the purpose of engaging a mediator for jurisdictional disputes. If a federal child advocate were appointed it is possible this advocate could either a) fulfill this role directly, or b) hold the mediation budget line, thus ensuring independence from INAC and provincial governments in the distribution of funding.

Such an arrangement would, of course, be outside the current activities funded by Directive 20-1. However, as I hope to have demonstrated, the present arrangement does little or nothing with respect to providing resources for the resolution of jurisdictional disputes. Instead, if the agency sample is at all representative of general conditions facing agencies, it is clear a substantial amount of funding supposed to used for the maintenance of First Nations children is in fact being directed at resolving jurisdictional disputes.

Furthermore, the repetition within reported disputes (as noted above) indicates one-off resolution of disputes is inefficient if the real issue is a policy gap. That is, if the jurisdictional dispute is general – and the disputes between INAC and FNIHB certainly appear so – then it is clearly a policy problem. What First Nations need, then, is a way into the policy-making domain; a way to influence internal government organization and policy. An ombudsman or child advocate ought to be able to perform precisely this function.

In Conclusion:

The most effective way of dealing with jurisdictional disputes is to prevent them. For this reason, I strongly believe that a change to current federal funding of First Nations child welfare agencies must include a provision for community assessment. The precedent has already been set by Health Canada due to their reliance on the population health paradigm. There is every reason to suppose a similar approach toward the incidence of child abuse and neglect is equally necessary. As noted, a significant byproduct of community assessments is the creation of networks of cooperation and trust. In turn, this ought to lessen the incidence of jurisdictional disputes.

Cooperation between staff and government departments is not a given. If community assessments begin the process of networking and cooperation then it is standing committees that sustain them. A committee structure presents significant difficulties for agencies in remote areas. Ideally, then, travel budgets of remote and rural agencies must recognize the importance of face-to-face contact amongst agents because it is only in this way the trust necessary for cooperative action can be initiated and sustained. Furthermore, a committee structure with access to its own budget line may provide a mechanism for dealing with disbursement of funds for extraordinary costs. I will pursue this recommendation in the following section.

Despite the best efforts of individuals, jurisdictional disputes are unlikely to be eliminated. They are simply a fact of life in complex bureaucracies. At present, there is no formal mechanism for outside mediation of disputes. Thus, it appears that in some instances disputes multiply due to an increasing mistrust and a belief by one or more parties that their position is neither heard nor understood. A funding mechanism is required to provide mediation services where they are appropriate. Mediation is not without its problems; however it can be a very useful resource under the right circumstances. Certainly, mediation services would be cheaper, less time-consuming, and more efficient than the current situation in which staff time is drained

out of direct service and into dispute engagement. Moreover, one supposes that persistent jurisdictional disputes might eventually lead to expensive and drawn out litigation.

Finally, the lack of an independent voice representing First Nations children's voices suggests the honoring of the Convention on the Rights of the Child is more rhetorical than actual; if INAC staff have the opportunity to call upon an ombudsman, why not children? Ideally, a First Nations child advocate would be entirely independent of government structures through its institution as an Officer of Parliament. In any case, any sort of quasi-independent voice would be better than the current situation.

Again, the logic of an independent advocate is based upon the observation that, at present, many resources supposedly destined for the maintenance of First Nations children are currently being directed towards the resolution of jurisdictional disputes which are all too predictable and repetitive. If, for example, an advocate was able to convince FNIBH and INAC to mesh their policies almost half of all serious jurisdictional disputes would be resolved. That Health Canada and INAC have been able to do this in one province suggests it can be done in all provinces. Of course, for First Nations the frustrating part of this problem is that without an advocate with access to federal government decision-making processes, it cannot be known why the problem persists. An advocate with an investigatory mandate could fulfill this function.

Extraordinary Costs

Six agencies reported incidences of extraordinary costs. Of the agencies reporting no incidences, two were from the same province (Alberta), while the third had a block funding agreement. In the latter case, it may be that the agency did not consider any expense 'extraordinary' insofar as block funding implies funding for everything – including extraordinary costs. Thus, this agency may experience extraordinary costs but does not perceive them as extraordinary because of the nature of their funding arrangement.

Agencies reporting extraordinary costs tend to mirror the concerns expressed with jurisdictional disputes. That is to say, extraordinary costs are associated with isolated and high needs communities due in the main to the travel costs incurred for providing service; costs associated with a lack of specialized care/resources such as psychiatric care for suicide, homicide, substance abuse, and so forth; and costs incurred due to delays caused by jurisdictional disputes.

Agencies servicing remote communities note the high cost of staff travel as well as travel for clients for diagnostic or remedial services. Two agencies noted the high costs of travel associated with calling a staff meeting (up to $50,000), but also the inherent danger of winter travel in sparsely populated districts. This danger is to be understood as twofold; a) danger associated with seasonal weather conditions and b) danger associated with child protection workers (and foster parents) co-resident with dangerous and potentially life-threatening clients in isolated and non-policed communities.

Children with complex health issues are a major feature of agencies' reports because these problems are widespread yet random in occurrence. That said, agencies servicing isolated communities report it is impossible to know the incidence of complex medical needs because travel costs preclude diagnostic services[17]. Related to the problem of complex medical needs are those children with complex developmental disabilities. The average cost of developmental disabilities of the four agencies reporting is $115,000. However, developmental disabilities often require extensive capital investment in accessibility technology but these costs do not appear to be part of agencies' calculations.

Like complex medical and developmental issues, complex mental health needs present extraordinary management challenges. Assuming they have been diagnosed, and there is little reason to believe the incidence of mental health difficulties amongst First Nations children has been adequately surveyed through appropriate diagnostic tools, then the average cost per agency of servicing such children is $500,000. It is unclear from the

data whether this includes special residential arrangements such as Special Needs homes. If it does not, an agency's reporting special needs foster care requires $12,500 per day is in addition to this initial $500,000. On the other hand, both agencies and provincial governments report specialized (and out-of-province) institutional placement as a major budgetary problem. Presumably this is because such institutions are inherently expensive but also because of the difficulty of predicting both the number of children requiring such care and the length of time the children would require intensive institutionalization.

One agency reported as an extraordinary cost the expenses involved with terminating an agency employee. A second agency reported as an extraordinary cost provision of post-majority care provided for by provincial statute.

The employment example is the only example of extraordinary costs if 'extraordinary' is understood to mean random, unforeseen, and unique. The vast majority of costs identified are not extraordinary by local standards. In other words, one agency reports the costs of helicopter transportation; a cost unique amongst surveyed agencies. However, there is nothing extraordinary about this form of transportation in the local area. Hence, what makes this cost extraordinary in the mind of the agency is a lack of adequate transportation funds covered by Directive 20-1[18].

In addition to the problem of medically fragile children and out-of-province institutional care, the Nova Scotia case study mentions "legal and settlement costs" in which "[settlements] can cost hundreds of thousands, while legal costs can be around millions". It is unclear from the response what sorts of settlements or legal procedures are referenced however it seems likely to include historical abuse settlements, class action lawsuits pertaining to institutional care, or serious abuse within other forms of care. This would be consistent with other jurisdictions; For example, British Columbia has been to the Supreme Court of Canada to appeal liability judgments in all these categories. According to the Nova Scotia case study there is no settled formula for dealing with such cases. Instead the government:

> Tend[s] to absorb it centrally after a review of all other alternatives and justification of the expense. Sometimes an agency can handle the cost, especially if their normal case load has dropped. The central office doesn't have a contingency budget for this either – the request needs to go to the Deputy Minister and sometimes to Cabinet. (N.S. case study)

In this description one detects a hierarchy of claims. First, local agencies are expected to cover costs through internal budgetary adjustments. Where this is not possible, the problem rises to provincial ministry which presumably pays for settlements though cost savings in other areas. If the cost is not only extraordinary in terms of type, but also in the amount of monies required then a Deputy Ministerial decision is required, which would presumably involve informing the responsible Minister and possibly making a special request to Treasury Board. Finally, where the cost is very large (millions) then Cabinet becomes involved as the cost may well involve reallocation of government budgetary resources involving other ministries.[19]

It should also be noted that the case study implies extraordinary expenses only involve one-time settlements and litigation. This would be consistent with the general legal practice of calculating "future care costs" as a lump sum transferred to the victim. However, it is possible that costs such as future counseling could be rendered "in kind" rather than as a lump sum settlement. In isolated communities where counseling services are sparse such an arrangement may be the only practical alternative. In any case, this may be a situation where an extraordinary cost is not as simple as a one-time payment consequent to a judicial decision. [20]

Since First Nations agencies are relatively new, legal and settlement costs associated with historical abuse may appear relatively remote. However, it should be kept in mind that, to my knowledge, no child welfare system has eliminated moral hazards from their activities. Unfortunate as it may be, no fostering system can prevent the problem of foster parents abusing children in their care. Moreover, given the progressive expansion

of behaviors considered abusive no child welfare system can be sure that its current practices will always be approved at a later date – although the Supreme Court of Canada has indicated the standard for such determinations depends on the usual practices and state of knowledge at the time of the any infractions (K.L.B.). On the other hand, the U.K. experience of the Cleveland Affair indicates that where child welfare personnel utilize novel technologies to determine the occurrence of abuse considerable legal and political effort can be engaged to both attack and defend child protection decisions.

Furthermore, children-in-care are almost by definition a challenging population. For example, in June of 2005 a child pled guilty to murdering a group home worker at his residential resource in Alberta. According to news reports the worker's parents are planning to sue the Alberta government for $75,000 (Harding 2005, A8). Rare as it may be, children-in-care do commit crimes – sometimes violent crimes – both against those that care for them and members of the public. Under such circumstances, agencies and governments may be liable for the crimes of the children. Many of these liabilities are settled out of court and therefore it is difficult to predict potential settlement costs. However, as an example, in 1987 the British Columbia government negotiated a $40,000 out of court settlement to a woman sexually assaulted by a child in a government psychiatric facility for adolescents (Vancouver Sun 1987, G.8).

Of particular concern for agencies serving isolated communities is the gap between the agencies legal responsibility to protect children and the actual resources available to do the job. One agency describes child protection workers in isolated communities taking children into their own homes but without any local police protection. In a worst case scenario, if the person posing a danger to the child were to enter the worker's home and assault its inhabitants one can imagine a resulting plethora of lawsuits. First, the child(ren) may sue the agency for failing to protect them. Second, employees may sue the agency for failing to ensure their safety 'in the workplace'. Third, others present in the employees' home – whether family, friends, or acquaintances – may sue the agency for any harms they or their family members' experience as a consequence of the agency's enterprise. Of course, not taking the child into custody would also present its own potential liabilities.

Calculating extraordinary costs is, then, not a simple or straightforward matter. For agencies servicing isolated communities or challenging clients, lack of sufficient funding for travel or adequate residential resources may transform ordinary travel costs into extraordinary legal costs. That is to say, the inability to monitor resources for potential moral hazards, travel and diagnostic barriers preventing agencies from fulfilling their statutory mandates, the dangers associated with potentially volatile clients, and reliance on ad hoc travel technologies may save money in the short run but extraordinary expenses in the form of agency liability seem inevitable.

Forms of Extraordinary Costs:

In general, the most significant costs reported by agencies can be divided into three types; a) those that are extraordinary due to jurisdictional disputes or obviously insufficient funding; b) costs associated with the unexpected and random distribution of moral hazards found in any child welfare system; and c) costs experienced by other jurisdictions but not mentioned in the agency survey.

Type (a):

1) Agencies servicing isolated communities face extraordinary staff travel costs, communities with widespread and largely undiagnosed problems associated with community-wide dysfunctions, and an inability to transport clients to needed services. In addition, child and staff safety is compromised due to a lack of adequate police protection and safe forms of transportation. These costs are only extraordinary insofar as they are costs not ordinarily faced by most child welfare agencies. They are not however extraordinary for these particular agencies. Rather, they are simply costs associated with providing child welfare to

isolated and often dysfunctional communities. These problems are not amenable to 'one off' solutions but instead demonstrate an ongoing need for adequate funding if child welfare responsibility is to be practiced in isolated communities. Reported under-funding is difficult to judge since agencies responsible for isolated communities are, in a sense, "bottomless pits" of problems and therefore funding requirements are potentially without end. I suggest that establishing the necessary budgetary commitment can only be calculated in the context of an adequate community capacity assessment. As it stands, funding estimates are at best guesses and at worst wildly divergent from actual needs.

2) Children with complex medical needs create extraordinary costs. It should be kept in mind that this issue is also significant for jurisdictional disputes. These kinds of extraordinary costs may be considerably alleviated if funding and responsibility disputes between FNIHB and INAC are resolved. Put another way, funding for complex medical needs is not necessarily an agency problem; it becomes an agency problem when federal departments dispute responsibility amongst themselves. That said, there remain additional travel costs agencies can expect to absorb. In-person case management and consultation, costs associated with accompanying children to medical services, and family visitation for children unable to live in their home communities are not, strictly speaking, medical costs. Such visitation is, of course, necessary for best practice reasons. Therefore, staff and family travel costs are rightly an agency responsibility. However, they are not, in and of themselves, extraordinary costs insofar as the population of children with complex medical needs is calculable. For that matter, if FNIHB's recommended community needs surveys have been completed then the demand ought to be largely known.

3) From both agency data, and the FNIHB policies available to me, it is difficult to judge the boundary between FNIHB responsibility and agency responsibility for children with complex developmental disabilities. Judging by the information available it seems likely FNIHB would limit its responsibility to direct medical care and provision of prosthetic devices. However, the general movement toward de-institutionalizing the physically and mentally disabled has revealed considerable cost considerations with respect to the provision and/or monitoring of daily care as well as the need to retrofit public buildings, roadways, vehicles, and housing. In the absence of other sources of funding, it seems likely many of these costs will fall to agencies. Again, it is useful to remember these issues are not unique to First Nations except that many First Nations have considerably further to catch up to standards still developing within the non-aboriginal world. Research is clearly required to establish the incidence of children with complex developmental delays resident on reserve. Furthermore, as de-institutionalization becomes entrenched, such a determination will need to take into account both the possibility of disabled persons returning to their home reserves and the difficulty of establishing a baseline when past practice was to remove disabled children from their homes and place them in institutions.

4) As with (3) above, the jurisdictional boundaries and incidence of complex mental health needs are difficult to determine. As mentioned above, addressing mental health issues on reserve is something of a novel initiative since historically it seems to have been ignored. The knowledge vacuum is exacerbated by the lack of diagnostic services available to remote communities. It is worth noting however that where complex mental health needs are mentioned by the survey they are far and away the most expensive needs to service – likely due to the extraordinary supervision and residential requirements associated with mental health needs.

Type (b)

1) The only purely random extraordinary cost reported by agencies concerned costs involved with terminating an employee. The cost was estimated at $25,000.

2) As alluded to in Type (a) (1), widespread community dysfunction is reported by agencies concerned with isolated communities. However, one agency drew attention to "communities in crisis". Examples of such crises include sudden jumps in suicide rates (referred to in suicide literature as "clustering") and periodic outbreaks of substance or solvent abuse. Responding to such crises places an enormous drain on both ordinary travel budgets (already overstretched) and staff time with the usual problems of back-fill this creates. Additionally, such crises and the sudden demands they generate, tend to make great demands on whatever counseling services are available. [21]

Type (c)

1) No agencies reported extraordinary legal costs for liability exposure. However, while this may be a function of First Nations agencies effectiveness, I would suggest it is more likely due to agencies' relative novelty. It is also worth noting that lawsuits directed at government child welfare policies and practices are still in their relative infancy, which suggests jurisprudence in the area is still unsettled. For example, The Critchley judgment of the British Columbia Court of Appeal that established important principles of government liability was rendered in 1998. The next year, the Supreme Court of Canada rendered its decision in Bazely where it was found the Children's Foundation was vicariously liable for the torts of a group home parent. Significantly, the Children's Foundation had no insurance coverage for this type of liability. Had the British Columbia government not underwritten the damages accrued, the Foundation (a non-profit organization) would likely have gone bankrupt.

   Given the potential for large damage quanta, it is unlikely First Nations agencies could afford insurance for global liability – especially since according to H.L.A. Hart (1994, 132) liability can only be determined after-the-fact. Exposure to liability may not constitute the most common form of extraordinary expense experienced by agencies, but in light of the comments of the Nova Scotia official it may turn out to be the most expensive. Clearly, protection from liability exposure, and a means of ensuring damages do not bankrupt First Nations agencies are crucial to the First Nations child welfare project. First Nations agencies do not share the economies of scale enjoyed by government nor do they have the kind of deep pockets self-insurance requires.

2) As with the example from Alberta given above, agency liability is not limited to the actions of its staff or contracted representatives toward clientele. Liability exposure must also take into account agency exposure to liability for the conduct of its clientele toward its staff. Given the safety and policing concerns expressed by agencies responsible for isolated communities this form of liability exposure deserves further attention.

3) Type (b) 2 concerns the effects of periodic crises on service delivery to communities – these are understood as located within the community as a whole rather than crises located within individual behavior. However, communities are also subject, from time to time, to crises consequent to natural disasters. The precise boundary between natural and human causation can be fuzzy with respect to natural disasters (i.e. is a dam bursting, or an oil tanker sinking a natural disaster?). Moreover, disasters can be sudden (i.e. an earthquake) or cumulative over extended periods of time. The Minimata effect at Grassy Narrows and Whitedog reserves is an example of a cumulative health and social disaster.

There are three aspects to disasters that need to be kept in mind. First, disasters need a coordinating body. Second, disasters require immediate response. Third, disaster response is usually followed by a period of reconstruction. In off-reserve Canada, governments have established a number of emergency plans and protocols to clarify what body is responsible for declaring an event a disaster and to ensure coordination and quick response. Whether these plans and protocols are binding on reserve is a legal question, however it seems reasonable to assume that First Nations might choose to develop their own emergency

response either because the community is of a sufficient size to warrant independent plans, the community is sufficiently isolated that it is effectively self-responsible, or the community makes a political decision to take care of its own.

In the case of a disaster in the form of an epidemic, it is now well appreciated from the African AIDS experience that a large number of orphans can be created by age opportunistic diseases. Were such an epidemic to break out on reserve it would be up to agencies to try to cope with the social consequences of a lethal epidemic. Moreover, Canada's experience with SARS suggests that it is not just the objective dangers of a given disease, but subjective risk perceptions that define whether or not an event is classified as a disaster.[22]

The implication of natural disasters is the need for a disaster planning body. The federal government provides for a source of funding for such planning through its Public Safety and Emergency Preparedness program. Of First Nations, the programs website states:

> Under the legislation of Alberta, Prince Edward Island and the Northwest Territories, the band council of an Indian band or a settlement council, as the case may be, is given the same power and responsibility as a local authority with regards to preventing, responding to, and recovering from an emergency. In British Columbia, the Minister of Indian Affairs is the local authority for a reserve. Alberta allows reserves to be considered municipalities under the Disaster Services Act. Manitoba supports First Nations initiatives such as an Assembly of Manitoba Chiefs for emergency preparedness activities and the Manitoba Association of Native Fire Fighters.

The Department of Indian and Northern Affairs is required, under the federal Emergency Preparedness Act, to co-ordinate emergency response measures on all reserves. The INAC works to ensure "contingency plans are in place in First Nation communities on reserve lands and in communities on federal lands north of 60 degrees." It attempts to provide "prompt, coordinated responses…that are community based and supported by the local population." (INAC, Administration Manual, Foreward, 1994.)

It is beyond the purview of the present work to examine this arrangement in detail however it is clear that responsibilities vary from province to province and the likelihood of INAC creating a comprehensive, nation-wide, emergency preparedness plan for all First Nations' reserves is highly unlikely. It seems reasonable then to suppose First Nations governments, child welfare agencies, and health organizations have an interest in establishing their own disaster responses and that INAC should be the conduit for funding that activity. [23]

Finally, the Public Safety and Emergency Preparedness program has a role to play in post-disaster reconstruction. First Nations child welfare agencies need to feel confident the interests of their clients are reflected within any reconstruction effort. This may be accomplished through on-reserve consortiums of interests (government, child welfare, health, education, etc.) and, in the case of children, underwritten by the either the committee system and/or the children's ombudsman/advocate as proposed in the jurisdictional disputes section of this paper.

4) No agency specifically reported involvement with public inquiries as an extraordinary cost. However, as discussed in the introductory section of this paper, public inquiries into child welfare are the quintessential extraordinary cost. This is so because a) such inquiries are impossible to predict when so often they are a consequence of press interest and transient political pressures; and b) because the kinds of events leading to public inquiries are usually not, in themselves, extraordinary. Rather, attention is attracted to such events due to their unusual and unforeseen consequences. This is particularly true for child homicides where the belief that a child died as a consequence of child abuse, and that the consequence of that child abuse was obvious, is widespread but erroneous.[24]

I will not belabor the obvious problems inquiries

present with respect to drains on staff time, the need for back-fill of positions, impact on staff morale, requirements for travel and the problem of attending inquiries of uncertain duration. I will simply reiterate that I have discovered no budget line specifically set aside as a contingency fund for such activities. Rather, governments tend to absorb these costs through economies of scale, specific requests to cabinet and Treasury Board, or through an entirely separate inquiry budget. Clearly, Directive 20-1 did not anticipate the possibility of extensive resource commitment to such inquiries despite the fact First Nations have no control over their establishment or the degree of participation required of First Nations.

Budget Strategies:

Funding provision under Directive 20-1 is primarily divided into two forms; operational costs and maintenance costs for children in care. Operational costs are adjusted according to on reserve child populations and degree of remoteness. So far as I've been able to ascertain, if there was an initial logic to the division of funding and the amount of funding, that logic has been lost over the intervening years. As a general observation, it seems clear that agencies' subsequent experience has demonstrated Directive 20-1 severely underestimated both the types of agency activities and the funding required for supporting those activities. Hence, a theme of agencies surveyed is the universal practice of 'robbing Peter to pay Paul'. In particular, a general problem is the diversion of maintenance funding away from children in care and towards subsidizing large travel or administrative costs.

This paper has argued that a good deal of what is considered under the general rubric of jurisdictional disputes and extraordinary costs is, in fact, neither. Rather, for approximately half the cases, jurisdictional disputes and extraordinary costs are actually problems associated with under-funding. More precisely, lack of funding for the particular circumstances of particular agencies. The theme to which this paper has consistently returned – the need for the kind of community assessment already entrenched in FNIHB policy – attempts to suggest that funding quantum needs to be tailored to each agency's particular circumstances.

Operational funding:

Operational costs are clearly inadequate to cover travel expenses conceived as 'extraordinary' from a national perspective but 'ordinary' from the perspective of agencies faced with delivering statutory services to remote locations. As well, a national funding formula cannot take account of the differing operational costs associated with provincial legislative and policy demands. These demands range from the purely bureaucratic (i.e. audit and reporting policies) resulting from administrative requirements built into contracting arrangements required by provincial governments, to legal responsibilities pursuant to the delegation process. For example, responsibility for mediation, repatriation and post-majority services varies with each province's legislative regime. Hence, one operational formula cannot be sensitive to each of these varied demands.

With respect to contracting, it is significant that one agency reporting no jurisdictional disputes mentions disputes between FNIHB and INAC over medical funding; but not as a problem for the agency. This is due to the contractual relationship the agency has with the federal government. By inference, if this contractual relationship were replicated across the country a significant number of jurisdictional disputes would be eliminated. Of course, it would be simpler if the two branches of the federal government could resolve this problem in Ottawa, but a clause within agency contracts could protect agencies from the periodic reallocation of funding responsibilities between federal departments.

Travel costs ought not to be limited simply to the costs associated with adequate transportation technologies. As noted above, transportation problems have significant knock-on effects for both the safety of children and staff. Thus, savings realized from inadequate travel budgets may well reappear as extraordinary costs in the form of legal liability.

Assuming the distinction presently made by Directive 20-1 between operational and maintenance funding remains in place, the most crucial improvement needed for operational funding is the inclusion of a requirement and funding support for community capacity assessments. As discussed above, this is a requirement for health funding and it seems curious child welfare has not hitherto been subject to a similar requirement. Much of the difficulties coded as jurisdictional disputes and extraordinary funding could be alleviated with this relatively inexpensive investment.

In addition, increased funding for travel is required, particularly where this is directed at agencies responsible for remote communities. Similarly, the formula for operational funding must reflect the actual demands placed on agencies by various provincial legislative requirements. Hence, the formula probably needs to be tweaked by provincial jurisdiction. Further, given that agencies have no control over shifts in provincial legislative and policy regimes, the operational funding formula will require regularly scheduled reviews (say, every 3 to 5 years) of changes in provincial requirements.

Maintenance funding:

In one form or another, all surveyed agencies report a significant proportion of children in care, or children likely to enter care, as possessing significant special needs. The actual demand is unknown largely due to the difficulty of accessing appropriate diagnostic resources. Again, this problem grows more acute the more remote the community served. While an adequate community assessment would help to reveal the extent of the problem for any particular community, the problem of diagnostic, treatment, and supervision costs remains to be calculated. As noted above, by far the most expensive type of client are those with complex mental health concerns, however costs associated with complex developmental delay and complex acute medical needs are equally urgent.

By and large, provincial jurisdictions solve the problem of varied special needs by creating graduated care regimes. That is to say, the cost of maintaining a child in care varies according to the degree of care the child requires. This approach would seem to be self-evident; however the approach seems to have no application within Directive 20-1. Of course, recognition of the principle of special needs does not necessarily imply agreement upon where the boundary between 'special' and 'regular' lies, nor how much funding should be attached to 'special care'. Some argue all children in care have special needs, but this seems unhelpful given the broad range of potential disabilities, their relative severity, and variable access to support services.

As well, while special needs children require attentive and professional care, their needs are also understood to include specialized support (i.e. psychiatry, counseling, etc. with their associated travel requirements) and capital costs associated with renovating modest housing to accommodate children with special needs (i.e. wheelchair ramps, accessible vehicles, additional staff associated with twenty-four hour care of the medically fragile, etc.)

From the perspective of the federal government, the difficulty with recognizing children's special needs is that, at present, it is almost impossible to predict the global costs associated with a graduated maintenance regime. Largely, this is because there is, as yet, no reliable mechanism to calculate the actual incidence of children with special needs on reserve. The best source of such information may be FNIHB but it seems likely to be incomplete. Nevertheless, a survey of community needs assessments undertaken under the auspices of FNIHB policy may give a rough approximation of the number of children with complex special needs.

It is further worth noting that special institutional care is noted as a large expense by the Nova Scotia case study. All child welfare jurisdictions are faced with such costs and recognize they are sufficiently beyond the means of the usual formula for maintenance that they are often paid out of centralized budgets. Here, provincial authorities rely on their economies of scale to absorb extra costs which are extraordinary in the sense of being outside the usual requirements of residential care but ordinary

in the sense of being regular and predictable in their incidence. It seems likely, then, that a central budget – either managed by INAC itself or managed by the committee system proposed above – will be a requisite to ensure adequate funding on an as-needed basis.

The funding formula for maintenance must be adjusted to create a tiered system of payments capable of recognizing the real incidence of complex special needs amongst on reserve children in care. The hierarchy must not be limited solely to residential costs but must be inclusive of the purchase of necessary professional support. The system needs to be augmented by a central budget line capable of releasing funds on an as-needed basis for institutional care or unexpected demands for exceptional costs.

Directive 20-1 seems not to have contemplated the need for capital costs associated with accessibility and the disabled. These costs are of two types; housing and vehicle renovation targeted at particular children and community based renovation such as installation of sidewalks, access to public buildings, traffic control, and the like. I raise this issue of public accessibility here because there seems little point in ensuring disabled children in care are located in accessible housing if they are unable to leave the residence due to lack of public amenities.

Funding External to Directive 20-1

Within the limitations of Directive 20-1 significant improvements can be made with a more nuanced and expansive use of the categories of operational and maintenance costs. However, the problem of extraordinary costs – that is, costs which come, as it were, 'out of the blue' remains. Similarly, the drain on agency resources caused by jurisdictional disputes which are often replicated across the country needs to be addressed through alternative funding structures. What follows, then, constitutes something of a wish list for a comprehensive on reserve child welfare system.

As noted above, at present First Nations children are the only children without a designated independent officer responsible for representing their interests. I regard it as crucial such an officer be appointed under the title of advocate or ombudsman. This officer would be a federal functionary (but ideally appointed through a consensus of the Assembly of First Nations or its designate, and Parliament) but independent of government and particularly INAC. Attached to this office may be either in-house mediators or a budget line for engaging mediators on an as-needed basis for jurisdictional disputes. As noted above, the frequency of jurisdictional disputes, and the costs associated with those disputes, varies wildly between agencies. Hence, it seems reasonable to centralize this aspect of advocacy work so that it is available to those jurisdictions where it is most needed as opposed to including small amounts of funding for each agency.

A similar economy of scale applies to the proposal for multi-jurisdictional committees. A separate budget line is required both to ensure adequate travel funds for their membership but also to allow for committee control of a budget line designated to address extraordinary costs as they arise[25]. Funds controlled by these committees would constitute a kind of insurance against extraordinary costs (such as inquiry participation or sudden community crises) requiring deeper pockets than any single agency could afford. They may also be able to coordinate back-fill for sudden events resulting from sudden drains on agency personnel resources. It is possible the committee controlled budget line could be established through a surcharge on funding for each agency (which would make it an insurance function), or funds could be disbursed from INAC to provincial committees which, in turn, would disburse a portion of those funds to regional and local committees. In any case, it is clear that no child welfare jurisdiction is immune to unexpected costs sometimes counted "in the millions". What is needed is a replication of the economies of scale the federal and provincial governments are able to call on.

Also outside the purview of Directive 20-1 are funds necessary to address the possibility of natural disasters and capital costs associated with community accessibility for the disabled.

As alluded to above, it is probable these costs are not likely to be seen as child welfare costs per se. However, an advantage of a children's advocate or ombudsman would be the ability to put these issues 'on the table' as children's issues. Whether agencies become the lead agencies responsible for addressing these shortcomings is, I suspect, for individual First Nations to determine. However, disaster response and accessibility is not the exclusive domain of the adult world. Therefore, funding for operational costs must reflect demands on agency resources for addressing these issues. Again, this may be incorporated directly into operational costs, or constitute a surcharge on contracted funding. In either case, recognition of children as full citizens also means recognition within all policies that affect them.

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Footnotes

[1] See (HRDSC n.d.) for a list by province of risk assessments in use in Canada.

[2] But see O'Sullivan and McHardy (2004) for a

national measurement using a Community Well-Being Index. The analysis provided gives regional comparisons, but not comparisons by type of community.

[3] And, of course, this self-categorization has implications for self-esteem and all the possible social problems low self-esteem is associated with.

[4] I have written on this elsewhere. See Cradock (2003) for a fuller account. In the U.K. similar inquiries have been sparked largely due to press coverage (see Nava 1995 for a media analysis of the Cleveland Affair and Franklin and Parton (1991) for a more general account of the relationship between social work and the press).

[5] British Columbia established the Children's Commission to conduct such inquiries in the wake of the Gove Inquiry. The Commission was disbanded in 2001 with the election of a new government.

[6] This number cannot be explained solely by the size of population served. Similar populations served by other agencies do not produce anywhere close to this number of disputes. It is possible the data was skewed insofar as the survey describes disputes between two parties. Perhaps this particular agency is double reporting tripartite disputes and therefore the survey double counts. Even so, the minimum number of disputes would still be on the order of 80, significantly higher than any other agency.

[7] See below for the construction of the 'non-disputing' self in the context of mediation. As an aside, variations between numbers of disputes may also indicate cultural differences towards disputes across First Nations in general. Further, see Cruise (1986) for rumination on contemporary aboriginal socialization and its relation to assertiveness. Briefly, Cruise argues part of aboriginal subjectivity depends upon creating an oppositional stance toward dominant social values. Lemert (1954) made a similar observation about 'outlaw' social groups within the nascent Catholic Indian State of late 19th century British Columbia.

[8] The Province of British Columbia has also experimented with specialist First Nations negotiators. When B.C. had a Ministry of Aboriginal Affairs it was supposed to liaise with designated persons within all other ministries within government to ensure First Nations issues were incorporated into all government initiatives. The Ministry was disbanded in 2001 and has recently (June) been resuscitated. The B.C. experience is a reminder that the priority given to negotiations between First Nations and other governments can radically change and therefore is always, to some extent, at the pleasure of sitting governments.

[9] Poorly planned social initiatives are not limited to aboriginal issues. See the withering critique of the Ombudsman of Ontario (2004) with respect to insufficient research, poor administrative planning, lack of funding and the consequent inflation of public expectations created by the Ontario government's attempt to establish services for autistic children.

[10] For example, previous research has identified aboriginal children entering care because of medical needs which parents cannot afford to meet. The recent scandal in Ontario over just this issue demonstrates this not unique to aboriginal children. (Windsor-Essex C.A.S. personal communication; Ombudsman of Ontario 2005)

[11] What I have in mind here is drawn from my own experience servicing remote communities in British Columbia. For example, to contact one band meant radio-telephoning (through an exchange) a luxury fishing camp who would then have an employee get into a boat, round the point to the band's location, and bring back a band member to the telephone. Needless to say, any telephone conversation was a very public communication. Similarly, in that area, cel phones were useless because there were no relay stations. It is possible face-to-face meetings might be replaced with new video conferencing and satellite communication (which might also have the benefit of being relatively independent of prevailing weather conditions) but if this medium is preferred it will obviously have capital cost implications.

[12] This model is loosely based upon the old Inter-

Ministerial Children's Committees (IMCC) utilized in British Columbia during the 1980s. These committees ranged from local committees of what amounted to interested persons, through regional committees, and up to a committee composed of Deputy Ministers.

[13] I have in mind here unexpected consequences for First Nations of policy changes directed at more global issues. As in the above example from Ontario re: special needs children in care. Of course, it is possible agencies may change their own policies and spark a dispute with provincial and federal agencies.

[14] Since the report was issued, British Columbia has abolished its Child and Youth Advocate.

[15] At the time, British Columbia had no independent body designated to advocate on behalf of children. However, these reports were authored by a deputy ombudsman who fulfilled that role within the larger mandate of the Ombudsman.

[16] The Act seems to have died on the order paper at least three times. In any case, it has never got past first reading.

[17] Presumably, many undiagnosed complex medical needs would eventually be counted as child mortality.

[18] Unusual forms of transportation (i.e. snowmobiles and other local forms of transportation from pick-ups to herring skiffs) are not solely used by protection workers but also by children if removal from isolated communities is the only way to ensure children's safety. If, as one agency reported, "no normal person would do it" then one might speculate that transportation risks are perceived as 'ordinary' if undertaken by workers but 'extraordinary' if undertaken by children. One can imagine a child taken into care to protect their safety but subsequently drowning if the snowmobile transporting them falls through the ice. The cause of death would, no doubt, be extraordinary while still not unexpected. The cost of dealing with the liability issues would however be both unusual and extraordinary.

[19] I have examined the line budgets of several provinces and INAC. I have not been able to identify any targeted contingency budget addressing such extraordinary costs.

[20] Historical institutional abuse arbitrated through an ADR process is another such situation. In this case, economies of scale and expertise might suggest a dedicated budget line for counseling services directed at a class of persons over a period of years; perhaps decades.

[21] My own experience as a child protection worker provides an example. An on-reserve school introduced the C.A.R.E kit for sexual abuse prevention. For a number of weeks nothing happened and then on a Friday afternoon my office received 17 allegations of sexual abuse all requiring immediate investigation. Of a total staff of six social workers, two were pulled off their usual duties to deal with the crisis. These workers' usual duties were taken on by auxiliary staff brought in for the occasion. However, costs were not limited to investigations. Prior to the introduction of the kit, and in the certain knowledge it would generate numerous investigations, the Province of British Columbia provided funding for the training and employing of four support workers. Even then, a professional counselor was also provided through Victims Compensation funding for personal counseling of the children. It is difficult to estimate the total cost because of the varied budget lines concerned. Suffice to say, dealing with that crisis was not cheap.

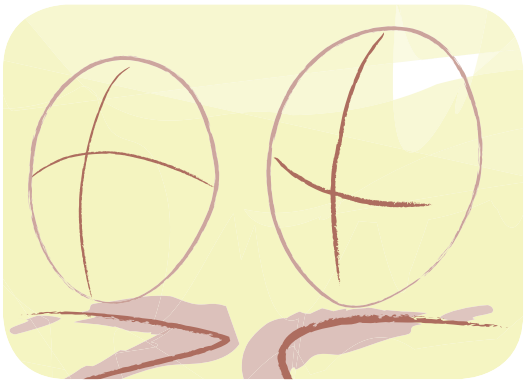
[22] Risk assessment theorists are well aware of the role of subjectivity. A favorite example is the varying perceptions of the dangers of nuclear power. Subjectively, nuclear power becomes more dangerous the closer one lives to a nuclear power plant.

[23] The preparedness program is comprehensive in its scope. It includes, for instance, privately owned dams, computing failure, storage of important documents, and anti-terrorism responses. A First Nations presence within the program may add issues of particular interest to First Nations to the program's rather eclectic list of concerns.

[24] I have written on this subject before so I will not belabor the subject here. See Cradock (2003; 2004) for a more detailed account.

[25] This is not to imply that the federal government would also be responsible for the participation of provincial representative, or that these provincial representatives would 'control' the disbursal of funds. What I have in mind is more the possibility of the committees accessing funds that could be used for such arrangements as matched funding or the purchase of, for example, institutional care in provincial resources.

Small Agencies



CHAPTER 7

Prepared on behalf of:
First Nations Child & Family Caring Society Canada

Prepared by:
Valerie Lannon & Associates Inc.

May 10, 2005

Introduction

1.0 - Background

The First Nations Child and Family Caring Society of Canada (FNCFCS) has been engaged to work with the National Advisory Committee (on the National Policy Review) to provide research which can be used to develop alternative funding formulae for First Nations child and family service agencies.

A multidisciplinary team is using a number of approaches to accomplish this research task, and part of the project entails a review of small agencies, those who serve child populations of less than 1,000. There are 51 small agencies out of a total of 93 agencies in Canada, excluding Ontario. (source: Summary report by FNCFCS presented February 2005 to a meeting of the Operational Funding Formula Design Team, Vancouver BC)

The three areas of inquiry are:

- What are the core administrative staffing and related requirements of small agencies?
- How should the funding formula be adjusted to meet these requirements?
- What is the minimum size of agency and related population that is consistent with good social work practice and economies of scale?

1.1 - Methodology

The FNCFCS engaged the services of Valerie Lannon & Associates Inc. to complete the research and prepare a report on small agencies. Ms. Lannon completed the research on agencies in British Columbia, and Ms. Judy Levi, an agency director in New Brunswick, completed the research on agencies in that province.

A structured interview was conducted with fourteen agency directors either on site or by telephone, using the questionnaire included as Appendix A.

1.2 - Agency information

The description of these fourteen agencies by child population is as follows:

Region	Less than 250*	Less than 500	Less than 800
B.C.	0	5	2
New Brunswick	4	3	0

** Note: these New Brunswick agencies came into existence prior to the establishment of Directive 20-1.*

The only other region with a significant number of small agencies is Quebec (12 out of 15 agencies); however, due to resource limitations, the Quebec agencies were not included in this aspect of the research project.

1.3 - Range of services provided

In addition to child protection services (by fully delegated agencies), the fourteen small agencies who took part in this research project also provide the following services:

Type of service	
Family preservation (child out of care)	11
Child support services (child out of care)	13
Respite care	11
Family reunification (child in care)	12
Support services for temporary or voluntary care	12
Adoption services	6 (in NB only)
Reunification (adults)	4
Prevention services	13
Community development	9
Foster home services	13

Other services provided by individual agencies included:

- Head Start
- Pilot Program For Youth At Risk
- Counselling
- Supervised Visits
- Recreation
- Early Childhood Development
- "Healthy Food" Programs
- Youth Advocacy
- Family Relations Act Advocacy
- Family Resource Centre
- Court Counselling And Intervention.

1.4 - Additional services required

When asked to identify services the agencies would like to provide but are unable to do so because of the limits of current funding, the respondents named the following services (costs noted where provided by respondents):

- Family Enhancement (In-home Parenting)
- Youth Enhancement
- Family Nights
- More Family Support Services
- Support For Two-spirited Youth
- Child And Youth Care - $80,000
- In-service Training - $50,000
- Foster Parent Facilitation $30,000
- Youth Activities (Share Costs With Other Service Providers)
- Services Off-reserve
- Family Counselling
- Services For Children With Special Needs
- On-call Services
- Adoption (Bc)
- Courtworker - $50,000
- Family Treatment Centre - $120,000
- Early Childhood Intervention - $60,000
- Mentors, Youth Summer Camp, Social Worker In Schools, Family Support - $205,000.

Characteristics of Small Agencies – some Regional Differences

2.0 - Regional differences

While agencies in both BC and New Brunswick are funded through Directive 20-1, and offer a somewhat comparable range of services, there are differences between the agencies in these two regions. There were also some regional differences in the responses to the questionnaire.

Delegation

BC is the only region in Canada where agencies assume delegated authority in a three-stage process, namely:

- Voluntary services – voluntary care agreements, special needs agreements, approval and support of residential resources, plus prevention and community development
- Guardianship – legal guardianship of children in care on temporary or continuing basis
- Child protection (or "full" delegation) – receipt and assessment of reports of child abuse and neglect, investigations, decisions regarding safety of child and, if necessary, removal of child.

Typically, it takes an agency 5-6 years to reach full delegation.

The composition of the agencies in BC is as follows:

	Voluntary Services	Guardian-ship	Full Delegation
Total # agencies*	2	10	7
# research partici-pants**	1	2	3

*Note: There are two additional agencies in BC; however they do not receive their funding through 20-1. These include the Nisga'a, which is funded under its treaty, and the Spallumcheen Band funded separately and created through a by-law, pre-dating Directive 20-1.

** Note: One of the research participants is an agency in the Start-up stage, not yet delivering delegated services.

Child population size

The Atlantic region is unique in Canada for having agencies whose child population count is less than the 250 required under 20-1. This is because all the agencies in New Brunswick existed prior to 20-1, except one, which received an exemption on size.

Treaties

BC is largely unceded land, and most First Nations in BC are involved in treaty discussions with the federal and provincial governments. These First Nations consider delegation enabling agreements as a preliminary, government-to-government step, prior to the execution of a treaty.

Agency age

Two of the Atlantic Region's thirteen agencies began operating after Directive 20-1 was established, whereas only one of BC's eighteen agencies began operating prior to 1989.

Almost all of the Atlantic Region's agencies began operating in the 1983-85 period and are, therefore, over twenty years old. In BC, most agencies have been in operation for twelve years or less.

Agency surplus

The BC Region of INAC has arranged for BC agencies to receive maintenance payments on a per diem basis, as opposed to payment based on actual expenditures. This arrangement is unique in Canada and provides a sort of "mini-block funding" to agencies.

The current per diem rate is $52.44. It was developed through bilateral negotiations with the provincial government, excluding First Nations. The figure is meant to reflect the average rate of payments for all family-type residential resources, from "restricted" (extended family member) to "level three" homes for children with special needs.

This arrangement can and does result in agencies accruing savings, as long as their actual care costs are less than the per diem rates. Such savings are used for other child and family service program costs.

Regional size and population diversity

BC is much larger in size than New Brunswick. BC has 199 First Nations communities made up of 30-40 major ethnic groups (shared territory, language and culture) and at least eight language families. New Brunswick has far fewer differences among its First Nations groupings.

Key differences in findings:

Respondents from New Brunswick were more likely than their BC counterparts to:

- want to have maintenance payments based on actual costs, rather than on a per diem basis;
- be open to centralizing some functions of their operations;
- identify a need for increased capital expenditures for office buildings and for information technology (hardware and software).

Core Requirements of Small Agencies

3.0 - Introduction

The first area of inquiry for this report is:

What are the core administrative staffing and related requirements of small agencies?

To explore the issues related to this question, agencies were asked to describe, among other

things:

- Current staffing levels
- Current costs for salaries and benefits
- Ideal staffing compliment
- Comparability with other child welfare organizations
- Types and amounts of non-staffing costs, and current funding gaps.

3.1 - Current Staffing Levels, Costs, And Comparability

All respondents indicated that current staffing levels include:

- A full-time program director (in three cases, this position is combined with a social work position)
- Social workers, full-time, varying in number from one to six (presumably depending on funding availability), with the average number being 2.5
- Administrative staff, varying in number from one (the most common number) to five full-time positions.

Annual costs for salaries and benefits range from a low of $64,000 to a high of $608,638. The average agency cost is approximately $250,000.00.

Nine of the twelve agencies that responded to this question indicated that their salary and benefit levels are not comparable to other child welfare organizations. It would take approximately $10,000 - $15,000 more per position annually to be more competitive.

To provide the full range of services needed by the community, virtually all respondents indicated that they would need additional full time staff. Typically this involved one to two more social workers, for an additional cost of up to $170,000 per year per agency. The other most commonly identified need was for prevention workers, at an average annual cost of $35,000 per agency.

Other required staffing, identified by individual respondents, included:

- Early home visitor (new mothers) – requiring a diploma, at a cost of $40,000
- Reconnection worker – requiring a diploma, at a cost of $40,000
- Policy analysts – requiring a BSW, for a total cost for two FTEs $140,000
- Child and youth counsellor/general counsellor – average cost of $78,000.

One agency stated it would need a home economist, a psychologist, an additional social worker, and a courtworker, for a total cost of $340,000 annually.

In an earlier report prepared by the New Brunswick agencies, it was noted that additional funding is needed to ensure adequate levels of training for staff. No dollar amount was specified.

3.2 - Non-staffing costs

The most frequently cited non-staffing cost that would be incurred if agencies were providing their preferred range of services is that associated with capital costs, for either a new office building or space, or office renovations. Estimated funding requirements were in the range of $15,000 to $250,000, with an average of $102,500.00.

In New Brunswick, there was an equal priority placed on costs for information technology software and hardware, at an average cost per agency of approximately $45,000.00

The gap between what is required to run an agency with the preferred full range of services and what the agencies currently receive runs from $119,000 to $524,000, with an average differential of $320,000.

Funding Formula Adjustments

4.0 - Introduction

The second area of inquiry for the research into small agencies was:

How should the funding formula be adjusted to meet these requirements?

Agencies were asked to discuss:

- aspects of the Directive 20-1
- the use of surplus funds

- preference for various forms of maintenance funding.

1.1 - Directive 20-1

While some agencies were satisfied with the separation of 20-1 funding between operational and maintenance funding (because it clarified accounting), there were no agencies that believe the population threshold policy is effective.

The overwhelming sentiment is that these thresholds do not meet the core needs of small agencies, and that funding should be based on community needs, not population size. A couple of New Brunswick respondents added that the entire community population should be taken into account, not just that of children, since it is the entire family that needs support when a child is at risk or is unsafe.

4.2 - Surplus funds

Not surprisingly, it was only BC agencies that advised that they had surpluses and, in almost all cases, the surplus came from the maintenance per diem arrangement.

The policy for use of surplus funds varied by region. In New Brunswick, the agencies noted that the policy is to return any unspent funds to INAC. In BC, however, agencies are to use surplus funds on child and family services.

4.3 - Maintenance funding alternatives

As mentioned in Chapter Two, the BC region is unique for using a per diem arrangement to pay for maintenance costs. In New Brunswick, as in the rest of Canada, maintenance costs are paid by INAC based on actual costs. The agencies were asked which of the two funding arrangements they preferred.

All of the New Brunswick agencies indicated a preference for the current payments, based on actuals. Most feared that a per diem arrangement might result in either a budget deficit or in reduced service delivery.

While two BC agencies stated that payment based on actual expenses would have the advantage of better covering the costs of children with special needs, most BC agencies feared that removing the per diem arrangement, and the removal of associated surpluses would mean less funds for staff and prevention programs.

There appears to be a trade-off, therefore, between being able to fully fund children with special needs, and having discretionary (surplus) funds for prevention and other programs.

How Small Agencies Can Ensure Good Practice and Economies of Scale

5.0 - Introduction

The third area of inquiry for this research was: What is the minimum size of agency and related population that is consistent with good social work practice and economies of scale?

Agencies were asked about:

- The particular challenges faced by small agencies in delivering services
- The volume of cases required for social workers to maintain their skills
- The allied services needed to optimize the impact of agencies' services
- Measures to achieve economies of scale
- Centralization of functions.

5.1 - Challenges facing small agencies

One of the challenges facing small agencies is the pressure to deliver comparable services to larger agencies, whether these larger agencies are First Nations or the provincial government child welfare organizations.

When asked how they thought their agencies' costs for services compared to what the provinces' costs would be for providing services in the community, the agencies were unanimous that agencies' services were more extensive and, therefore, INAC "gets more bang for the buck" from First Nations agencies. Respondents pointed out that provincial government organizations tend to focus primarily on child protection cases, whereas First Nations agencies, even small ones, provide prevention and community development programs, which act to reduce the incidence of child abuse over time.

In a sense, the question tended to combine "apples and oranges" given the differences in approaches to service delivery between provincial organizations and those of First Nations. The provinces tend to use a tertiary prevention vs. a primary prevention approach, to use the parlance of health promotion.

Some agency directors also pointed out that their costs are lower because they have lower maintenance costs (at least in BC) for foster parents, as agencies are less inclined to place children in more expensive "levelled" homes. As well, agencies are non-unionized and, therefore, are not bound to pay the higher salaries and benefits contained in collective agreements.

Virtually all respondents agreed that their staff members perform duties that would not be expected by employees in similar positions in large First Nations agencies. Examples of some of these duties include:

- community work, such as community clean-up, Christmas and children's parties, helping to furnish houses
- administrative duties
- handling non-child and family service requests (e.g. for transportation to town), mainly as a way of building up trust so that people are encouraged to use the child and family services on a voluntary basis.

In order to support the staff who are faced with carrying out extra duties, agencies have devised a number of methods, including:

- peer support
- support from the Board of Directors
- training on stress management
- use of traditional teachings.

In one case, staff members are given time off to compensate for overtime incurred due to performing "over and above" normal job requirements.

There is little in the way of support, however, when it comes to covering for staff when there are temporary absences, due to illness, vacation, training or other leave, vacations, or staff turnover. The most common response was "someone picks it (the workload) up". But in almost half the cases, directors said the routine, non-emergency work is left undone until the person gets back or the position is filled. In one case, the agency supervisor fills in, and in another case, the agency occasionally will hire a temporary worker. While there are no financial costs associated with these arrangements (because there is no funding available), the human cost can be high in terms of burn-out. The cost of temporary workers runs around $36,000 per year for the agency that uses this approach.

When asked how clinical supervision was carried out where social workers work outside the central office, the vast majority of agencies indicated this does not apply to their situation because all staff work from the same location. In one case, however, the agency responded that the supervisor visits the satellite office, and is also available by phone.

5.2 - Minimum volume of cases

The respondents were asked what volume of cases is necessary to ensure that a social worker's skills do not decrease due to lack of use. Two respondents were unsure, and two others stated that there is no minimum size, as there is always work to be done, and social workers are continually improving their skills depending on the situations they face.

Most respondents, however, believe that a minimum caseload is indeed necessary to maintain skill levels. Opinions varied as to size of the minimum caseload, as follows:

- A range of 10-15 cases for a generalized caseload
- 12-15 child protection cases
- 14 child protection cases and 6 children in care.

Another director stated that the minimum would be five to six cases a year involving a child at risk.

5.3 - Necessary allied services

When asked to identify the allied community services needed to optimize the impact of the agency's services, the majority of respondents named:

- addictions counselling;
- counselling (general);

- housing; and
- health services.

Some agencies also listed: educational supports; recreation; psychological assessment; social development/income assistance; native policing; occupational therapy/speech therapy/ physiotherapy; and employment advice and support.

In addition, the following services were identified by individual respondents:

- parental assessment
- art therapy
- Head Start
- safe house for women
- day care
- family resource centre for women
- cultural strengthening programs
- courtworker program
- transportation.

5.4 - Economies of scale

When asked whether they thought there is a minimum size of agency, and minimum size of population needed to ensure good social work and economies of scale, none of the respondents stated that there should be a minimum size of population. This is because of the high level of needs in their communities. Most respondents would not venture a minimum size of staff; however the two that did suggested a minimum of two social workers to ensure safety, back-up, and the opportunity for consultation and de-briefing.

Most respondents have taken measures to achieve some economies of scale, usually through sharing resources with other programs. Examples include:

- Sharing administrative staff, financial management, building space, and office supplies with another program (e.g. a health program)
- Shared training with other programs
- Joint organization of community events
- Sharing costs to bring specialists to the community
- Using multidisciplinary committees to assess families.

Because of the challenges small agencies face in trying to deliver a full range of services, there has been a suggestion that some agency functions be centralized, for example after hours services, clinical supervision, and administration. All of the New Brunswick agencies favoured this approach, as did the majority of BC respondents. Three BC respondents rejected this approach, however, due to the geographic isolation and/or high travel costs associated with their communities.

Conclusions

6.0 - Introduction

To conclude the investigation into small agencies, respondents were asked to:

- suggest alternative ways of funding small agencies;
- identify whether these alternatives would mean revising or rejecting the Directive 20-1; and
- provide advice to small First Nations to ensure the successful delivery of child and family services.

6.1 - Alternative funding approaches and implications for 20-1

Almost half of the respondents stated that funding should be based on community needs, not child population counts. Another quarter of the respondents (all from New Brunswick) stated that the population count should be of the total population, not just children, since it is the entire family that needs support when a child is at risk or is unsafe with her or his family.

And another quarter of the respondents indicated that a funding formula should include at least one of the following:

- funding for prevention and out of care options
- an increased rate for remoteness
- a mechanism for block funding
- consideration of the total population, whether status or non-status.

Most respondents believe that an entirely new funding formula is required, one that is based on community needs. But two of the respondents believe that adjusting Directive 20-1, by adding funds for prevention and community development, would meet their needs.

6.2 - Advice to small First Nations

All of the respondents encourage small First Nations to think positively about providing child and family services to their members. The most common messages of advice include:

- ensure funding is available for prevention services and make those the priority
- hire good staff
- set priorities
- network and share resources with other programs
- promote community involvement in service planning and reinforce the idea that the whole community is responsible for the well-being of children.

A couple of directors also advised that small First Nations consider the use of block funding although it was acknowledged that small agencies may not benefit from the economies of scale that make block funding work well.

And on an interesting philosophical note, one agency director advised, "What seems inconsequential can have huge implications. For example, just driving someone somewhere helps build trust and can mean there is a greater use of your organization's services." The message here is that agencies should have the goal of being the place that families want to come to when they need help.

APPENDIX A
QUESTIONNAIRE

A. General Background Information

A1 What is the size of the 0-18 status Indian child population served by your agency?

A2 What is the size of the non-status Indian population living on reserve?

A3 Does your agency serve non-status Indian children?
[ ] yes
[ ] no

A4 If so, how many per year?

A5 What are your arrangements for reimbursement?

A6 What is the size of the status Indian children from other First Nations living on reserve?

A7 Does your agency serve these children?

A8 If so, how many per year?

A9 What are your arrangements for reimbursement?

A10 Does your agency serve status Indian children off reserve for whom you receive no reimbursement from the Province or Federal Government (i.e. non-billable children in care?)
[ ] yes
[ ] no

A11 If so, how many?

A12 What is the average cost to your agency on an annual basis?

A13 Does your agency serve non-native children?
[ ] yes
[ ] no

A14 If so, how many?

A15 What are your arrangements for reimbursement?

A16 How many communities does your agency serve?

A17 Are there any that are not accessible by roads year-round?
[ ] yes
[ ] no

A18 If so, are the funds provided under the remoteness factor in the current formula adequate to cover the extra costs associated with remoteness?
[ ] yes
[ ] no

A19 If not, why not?

A20 What is the geographic area you serve?

A21 Do you have

[ ] full; or

[ ] partial delegation?

A22 If partial, which level?

A23 What is the governance structure of your agency?

A24 How many children are typically in care at one time?

A25 What percentage of Aboriginal children in care are placed with Aboriginal caregivers?

A26 How does this compare with when the province was providing services (pre-delegation)

A27 What services does your agency provide among the following:

[ ] Family Preservation (Child Out Of Care)

[ ] Child Support Services (Child Out Of Care)

[ ] Respite Care

[ ] Family Reunification (Child In Care)

[ ] Support Services For Temporary Or Voluntary Care

[ ] Adoption Services

[ ] Reunification Services (Adults)

[ ] Prevention Services

[ ] Community Development

[ ] Foster Home Services

[ ] Other (Specify)

A28 What services would your agency like to provide but is unable to fund under the current funding arrangement, and what are the costs of each service identified?

A29 What do you think the impacts, if any, would be on children and families if preferred range of services could be provided?
Over one year?
A30 Over three years?
A31 Over five years?
A32 Over ten years?

A33 What child welfare services, if any, are provided by another service provider (e.g. provincial social workers do child protection, use provincial after hours screening?)

A34 What is the annual estimated value of these services?

A35 What is the primary reason why the agency does not provide these services?

B What are the core administrative staffing and related requirements of small agencies?

B1 Please describe your agency's current staffing compliment :
Number and qualifications of staff in each full and part-time position
B2 Annual costs of salaries and benefits

B3 Are your agency's salary and benefits levels competitive with other child welfare organizations?
[ ] yes
[ ] no

B4 If not, please identify the amount of funding (per year) for each affected position that would be required to match other child welfare organizations

B5 Are there any situations where you are unable to meet labour standards related to staff compensation (i.e. overtime payment) and workplace safety due to the current level of funding provided under the operations formula?
[ ] yes
[ ] no

B6 If so, please describe each incident and the estimated amount of funds required per year to comply with each standard

B7 Does your agency have adequately trained staff in order to ensure quality, culturally-based services in accordance with your level of delegation?
[ ] yes
[ ] no

B8 If not, please identify the amount of funding (per year) that would be required to fill the gap

B9 Please describe the staffing compliment (including qualifications) your agency would require to provide the full range of services needed in your community(ies). Please indicate whether they are full time or part time

B10 What funding would be required to cover staffing costs each year? _____

B11 What are the types of non-staffing costs that need to be covered in order to operate a FULL service agency, and what would be required funding to cover each of these costs per year?
[ ] capital
[ ] remoteness
[ ] other

B12 What is the gap (if any) between required costs and what you currently receive under 20-1?

B13 Is the current level of funding provided to your agency adequate to develop and maintain culturally based child welfare standards?
[ ] yes
[ ] no

B12 If not, what would be the initial development cost and the annual cost for maintaining such standards?

B13 Is the current level of funding provided to your agency adequate to develop and maintain culturally based service evaluations?
[ ] yes
[ ] no

B14 If not, what would be the initial development cost of an evaluation framework?

B15 And for conducting evaluations?

B16 Has your agency developed financial policies and procedures that comply with Generally Accepted Accounting Principles (GAAAP) and reporting requirements of both the First Nation/Tribal Council/Agency Board and INAC?
[ ] yes
[ ] no

B17 If so, what were the costs associated with this? ____

B18 Were the funds provided under the operations formula adequate to cover these costs?
[ ] yes
[ ] no

B19 If not, what would be the cost of developing such standards? ____

C How should the funding formula be adjusted to meet these requirements?

C1 What are your thoughts on the current separation in 20-1 between operational and maintenance funding?

C2 The Directive currently provides operational funding pursuant to the Status Indian child population on reserve exceeding certain population thresholds (i.e. 251, 501, and 801). Do you think this policy is effective in meeting the needs of children and families on reserve?
[ ] yes
[ ] no

C3 If not, why not?

C4 Does the fact that the Directive does not have a policy to cover deficits impact the case practice in your agency?
[ ] yes
[ ] no

C5 If so, please describe

C6 Does your agency run a surplus?
[ ] yes
[ ] no

C7 If so, how was the surplus accrued?

C8 What policies are in place regarding the use of surplus funds?

C9 In many other areas of the country, maintenance costs are funded through reimbursement of actual expenses related to children in care (running surpluses under maintenance is theoretically impossible under this regime); whereas in BC, maintenance funding under the MOU is reimbursed under an average actual cost based on provincial expenditures. What impacts, if any, do you think that setting aside the MOU in favour of the reimbursement of actual expenses would have on the annual budget of your agency?

D. What is the minimum size of agency and related population that is consistent with good social work practice and economies of scale?

D1 Please describe the differences in service approaches between the Province and your agency

D2 Please describe what the impacts for children and families have been since your agency began providing services?

D3 How do you know what these impact are (i.e. independent evaluation, testimonials, personal opinion, etc.)?

D4 How do you think your costs for service compare to what the province would incur if it were providing services in your community (ies)?

D5 Do your staff perform duties that would not be expected by employees in similar positions in large First Nations agencies?
[ ] yes
[ ] no

D6 If so, what training and support are provided to help them manage this expanded range of responsibilities?

D7 How do you cover for staff when there are temporary absences (e.g. illness, vacaion, training other lave, staff turnover/vacancies)?

D8 What costs are involved?

D9 (if applicable) How do you provide clinical supervision in those cases where staff work outside the central office of the agency?

D10 What volume of cases is necessary to ensure that social work skills do not decrease due to lack of use? (e.g. investigation skills)

D11 What allied services in your community (ies) are needed to optimize services to children and families/ (e.g. counselling, substance misuse, better housing, etc…)

D12 Do you think there is a minimum size of agency and population that is needed to ensure good social work practice and some economies of scale? What size would that be and why?

D13 Please describe any measures your agency takes to achieve economies of scale? (e.g. sharing resources with another program)

D14 As small agencies face special challenges in delivering a full range of services, there has been discussion in some areas of the country of centralizing some child welfare functions (i.e. after hours, clinical supervision, administration) in a First Nations run organization that provides support to several agencies.
Do you think this approach would work in your agency?
[ ] yes
[ ] no

D15 If not, why not?

E. General

E1 Do you have any suggestions for alternative ways of funding agencies whose child populations are less than 1,000?

E2 Would this require adjusting the current 20-1 design, or creating a different funding model altogether? Please describe

E3 What advice would you give to First Nations with small child populations, in order to ensure that successful, viable child and family services can be delivered?

THANK YOU!!

WEN:DE
Appendices

Recommendations of the Joint National Policy Review on First Nations Child and Family Services

(MacDonald & Ladd, 2000)

1. The Joint Steering Committee of the National Policy Review recognizes that Directive 20-1 is based on a philosophy of delegated authority. The new policy or Directive must be supportive of the goal of First Nations to assume full jurisdiction over child welfare. The principles and goals of the new policy must enable self-governance and support First Nations leadership to that end, consistent with the policy of the Government of Canada as articulated in Gathering Strength.

The new policy or directive must support the governance mechanisms of First Nations and local agencies. Primary accountability back to community and First Nations leadership must be recognized and supported by the policy.

2. The Joint Steering Committee recognizes a need for a national process to support First Nations agencies and practitioners in delivery of services through various measures, including best practices.

3. A national framework is required that will be sensitive to the variations that exist regionally in relation to legislation and standards. Tripartite tables consisting of representatives from First Nations, [Department of Indian and Northern Affairs] DIAND, and the province/territory are required to identify issues and solutions that fit the needs of each province/territory. Some of the issues that will need to be addressed by these regional tables consist of (but are not limited to) the following:

   a. Definitions of maintenance

   b. Identification of essential statutory services and mechanisms for funding these services

   c. Definitions of target populations (as well as the roles of federal/provincial/territorial governments related to the provision of services)

   d. Adjustment factors for new provincial programs and services- processes for FNCFS agencies to adjust and accommodate the impacts of changes in programs and services.

   e. Definition of a special needs child

   f. Dispute mechanisms to address non-billable children in care

   g. Definition of range of services

   h. Definition of financial audit and compliance comparability/reciprocity between provincial and First Nations accreditation, training and qualifications requirements of staff (e.g. licensing criteria.)

4. DIAND, Health Canada [Public Health Agency of Canada] the provinces/territories and First Nations agencies must give priority to clarifying jurisdiction and resoursing issues related to responsibility for programming and funding for children with complex needs, such as handicapped children and children with emotional and/or medical needs. Services provided to these children must incorporate the importance of cultural heritage and identity.

5. A national framework is needed that includes fundamental principles of supporting FNCFS agencies, that is sensitive to provincial/territorial variances, and has mechanisms to ensure communication, accountability and dispute resolutions mechanisms. This will include evaluation of roles and capacity of all parties.

6. The funding formula in Directive 20-1 is not flexible and is outdated. The methodology for funding operations must be investigated. The new methodology should consider factors such as workload/case analysis, national demographics and the impact on large and small agencies, and economies of scale. Some of the other issues the new formula must address but not be limited to are:

a. Gaps in the operations formula. A clear definition is required.

b. Adjustment for remoteness

c. Establishment of national standards

d. Establishment of an average cost per caseload

e. Establishment of caseload/workload measurement models

f. Ways of funding a full service model of FNCFS

g. The issue of liability

h. Exploration of start up developmental costs

i. Develop and maintain information systems and technological capacity.

7. The Joint Steering Committee found that the funding formula does not provide adequate resources to allow FNCFS agencies to do legislated/targeted prevention, alternative programs, and least disruptive/intrusive measures for children at risk. It is recommended that DIAND seeks funding to support such programming as part of agency funding.

8. DIAND must pursue the necessary authorities to enable FNCFS agencies to enter into multi-year agreements and/or block funding as an option to contribution funding, in order to further enhance the ability of First Nations to deliver programs that are geared to maintaining children within their families, communities, and reuniting those children in care with their families. This requires the development of a methodology for establishing funding levels for block funding arrangements that encompass:

a. A methodology for new and second generation agreements

b. Multi-year authorities for these programs with a criteria for measurement of success [DIAND may need to go to Cabinet to get authority for these]

9. An exceptional circumstances funding methodology is required to respond to First Nations communities where large numbers of children are at risk. Best practices shall inform the development of this methodology.

10. A management information system must be developed and funded for First Nations in order to ensrue the establishment of consistent, reliable data collection, analysis and reporting procedures for all parties (First Nations, regions, provinces/territories and headquarters.)

11. Funding is required to assist First Nations CFS Agencies in the development of their computerization ability in terms of capacity, hardware and software.

12. Funding is required for all agencies for ongoing evaluation based on a national framework and guidelines to be developed.

13. DIAND and First Nations need to identify capital requirements of FNCFS agencies with a goal to develop a creative approach to finance First Nations child and family service facilities that will enhance holistic service delivery at the community level.

14. Funding is required for ongoing standards development that will allow FNCFS agencies to address change over time.

15. Priority consideration should be given to reinstating annual cost of living adjustments as soon as possible. Consideration should also be given to address the fact that there has not been an increase in cost of living since 1995-96.

16. Phased in funding is a problem in the formula and should be based on the level of delegation from the province.

17. An immediate tripartite review (Canada, Ontario and Ontario First Nations) be undertaken in Ontario due to the implications of the 1965 Indian Welfare Agreement, current changes to the funding formula, and the Ontario Child Welfare Reform.

Losses on INAC Operations Funding Due to Lack of Inflation Adjustment

Dr. John Loxley

BY REGION 1999-2005

	CPI	CPI	Manitoba			Alberta		
		set at 100						
			Formula Funding	Adjusted For Inlflation	Difference	Formula Funding	Adjusted For Inlflation	Difference
1995	104.2	100.0						
1996	105.9	101.6						
1997	107.6	103.3						
1998	108.6	104.2						
1999	110.5	106.1	$26,003,331	$27,575,509	$1,572,178	$18,696,982	$19,827,414	$1,130,432
2000	112.5	108.0	$26,894,433	$29,036,696	$2,142,263	$19,466,719	$21,017,331	$1,550,612
2001	116.4	111.7	$27,358,770	$30,562,004	$3,203,234	$20,010,414	$22,353,284	$2,342,870
2002	119.0	114.2	$27,021,542	$30,859,535	$3,837,993	$21,182,392	$24,191,023	$3,008,631
2003	122.3	117.4	$27,791,261	$32,618,726	$4,827,465	$21,220,056	$24,906,074	$3,686,017
2004	124.6	119.6	$28,074,251	$33,570,554	$5,496,303	$21,567,405	$25,789,814	$4,222,409
2005	126.3	121.2	$28,447,452	$34,480,933	$6,033,481	$21,917,142	$26,565,595	$4,648,453
	TOTAL		$191,591,040	$218,703,956	$27,112,916	$144,061,110	$164,650,535	$20,589,425

	Saskatchewan			British Columbia		
	Formula Funding	Adjusted For Inlflation	Difference	Formula Funding	Adjusted For Inlflation	Difference
1999	$19,300,739	$20,467,674	$1,166,935	$10,685,179	$11,331,212	$646,033
2000	$20,426,850	$22,053,941	$1,627,091	$11,054,960	$11,935,538	$880,577
2001	$20,933,921	$23,384,917	$2,450,997	$11,497,284	$12,843,415	$1,346,131
2002	$22,279,871	$25,444,383	$3,164,512	$11,841,517	$13,523,421	$1,681,905
2003	$22,708,946	$26,653,590	$3,944,644	$11,892,673	$13,958,482	$2,065,810
2004	$22,953,949	$27,447,812	$4,493,863	$12,143,635	$14,521,083	$2,377,449
2005	$22,841,362	$27,685,835	$4,844,473	$11,876,905	$14,395,903	$2,518,998
TOTAL	$151,445,637	$173,138,152	$21,692,515	$80,992,151	$92,509,053	$11,516,902

	Ontario		
	Formula Funding	Adjusted For Inlflation	Difference
1999	$17,357,220	$18,406,649	$1,049,429
2000	$17,510,634	$18,905,435	$1,394,801
2001	$17,884,992	$19,979,012	$2,094,020
2002	$17,947,944	$20,497,172	$2,549,228
2003	$17,790,723	$20,881,050	$3,090,327
2004	$17,587,494	$21,030,727	$3,443,233
2005	$17,348,992	$21,028,576	$3,679,585
TOTAL	$123,427,998	$140,728,620	$17,300,623

ATLANTIC

	Formula Funding	Adjusted For Inlflation	Difference
1999	$5,442,936	$5,772,020	$329,084
2000	$5,563,863	$6,007,050	$443,187
2001	$5,614,533	$6,271,897	$657,364
2002	$5,747,217	$6,563,521	$816,303
2003	$5,745,230	$6,743,202	$997,972
2004	$5,801,238	$6,936,990	$1,135,751
2005	$5,790,049	$7,018,073	$1,228,024
TOTAL	$39,705,067	$45,312,751	$5,607,684

Well I don't want to tell you
what you can give
but give everything you can.
Conviction is not enough.

It is not enough to be
conscious of the problems
of the world;
how we involve ourselves
in their solution is
the most important thing.

So let us believe again
in children and youth.
Let us believe again
in Indigenous peoples.

Let us believe in people
who can promote dialogue
in the SEARCH FOR PEACE.

Rhigoberta Menchu Tum
INDIGENOUS RIGHTS ADVOCATE
AND NOBEL LAUREATE