MOVING BEYOND NEGLECT:

RECOMMENDATIONS AND FUTURE DIRECTIONS FOR CHILD WELFARE POLICY AND PRACTICE

March 2022

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CWLC LBEC
Child Welfare League of Canada
Ligue pour le bien-être de l'enfance du Canada

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Acknowledgements

Thank you to members of the Beyond Neglect project advisory board and to all those who generously contributed their time and knowledge to this report:

Wyatt Asapace, First Voice advocate
Mark Atanasoff, Native Child and Family Services of Toronto
Andrea Auger, First Nations Child and Family Caring Society
Stephanie Ball, West Coast LEAF
Mohammed Baobaid, Muslim Resource Centre for Social Support and Integration
Rhonda Barraclough, ALIGN Association of Community Services
Nicole Bonnie, Ontario Association of Children's Aid Societies
Denise Brend, Université Laval
Talyah Breslin, Jewish Family and Child Service of Greater Toronto
Johanna Caldwell, Centre for Research on Children and Families
Albert Dumont, Traditional Algonquin Teacher
Kyrstin Dumont, Youth mentor, Algonquin
Tonino Esposito, University of Montreal
Irwin Elman, former Child and Youth Advocate for Ontario
Keishia Facey, One Vision One Voice
Barbara Fallon, University of Toronto
Helaina Gespard, Institute of Fiscal Studies and Democracy
Deborah Goodman, Child Welfare Institute
Melissa Hamonic, Native Child and Family Services of Toronto
Sharnell Jenkins-Thompson, Jewish Family and Child Service of Greater Toronto
Gabrielle Lindstrom, University of Calgary
Nikki Mann, Jewish Family and Child Service of Greater Toronto
Monty Montgomery, University of BC
William Morrison, University of New Brunswick
Sandra Noel, First Voice advocate
Kelly Raymond, Children's Aid Society of Ottawa
Leila Sarangi, Campaign 2000
Jeffrey Schiffer, Native Child and Family Services of Toronto
Nico Trocmé, McGill University
David van Overdijk, Native Child and Family Services of Toronto

Thank you to our funder:

CHILDREN'S AID FOUNDATION OF CANADA

Executive Summary

Neglect is among the most common concerns investigated by Canadian child welfare agencies and poses significant risks to child development and well-being. Yet, for years advocates have expressed that mainstream approaches to preventing, assessing and intervening in neglect are failing children and families. The Beyond Neglect project aims to bring together and amplify the voices of these advocates to promote change across the child welfare landscape. This report collates outstanding neglect-related recommendations from 32 reports published by public and community organizations and advocates between 1992 and 2019. The compiled recommendations are supported by findings from our conversations with stakeholders, experts and advocates in the fields of child welfare and family well-being. The result is a series of recommendations that reflects over two decades of guidance and calls for change. We present our findings through the lens of six key themes for moving beyond neglect.

THEME 1: IDENTIFY AND ADDRESS THE ROOT CAUSES UNDERLYING NEGLECT

We heard repeatedly in our conversations with child welfare experts and in our review of past reports that the issue of neglect is inextricably linked to that of child and family poverty, and other structural and systemic issues including inadequate housing, mental illness, and intergenerational trauma. Yet when children's needs go unmet, mainstream child welfare agencies and workers tend to take a surface-level view of the problem, assuming that caregivers are at fault. As a result, their interventions fail to address the challenges underlying neglect, and leave families with unmet service needs. In order to effectively understand, prevent and address neglect, policy makers, agencies and workers need to acknowledge and center the systemic and circumstantial challenges that cause it.

THEME 2: RECOGNIZE THAT NEGLECT IS USUALLY A RESULT OF SYSTEMS FAILURE, NOT CAREGIVER FAILURE

The conditions that are labelled as neglect are often the result of unmet service and support needs that result from a failure on the part of policy makers and child welfare agencies to ensure that children and families have what they need to survive and thrive. In child welfare policy and practice, a distinction is rarely drawn between caregivers who are unwilling to provide for their children materially, emotionally, and developmentally and those who are willing yet unable to due to forces beyond their control. In order to effectively address children's unmet needs, it is important to clarify this distinction and to acknowledge the policy and systemic failings

that allow children and families to go without. Child welfare workers must hone their ability to determine when neglect is in fact a symptom of a structural challenge, and support families in overcoming these challenges so they can thrive.

THEME 3: IDENTIFY AND ACKNOWLEDGE THE REAL RISKS POSED BY NEGLECT

Neglect poses a significant and troubling risk to children's development and well-being. Generally, these risks are the result of chronic conditions rather than any singular event. In order to effectively respond to neglect, child welfare agencies and workers need tools that allow them to accurately assess and understand neglect-related risks. The actuarial risk assessment tools presently relied on to predict risk are inaccurate and do not allow workers to generate a holistic understanding of the risk and resiliency factors that contribute to child safety. A culture of fear in child welfare agencies also drives workers to implement invasive interventions, such as child removal. Responding effectively to neglect requires that agencies adopt holistic assessment tools that allow them to better estimate the risk to a child and address the source of that risk, whether it is located inside or outside of the family. It also requires prioritizing family preservation.

THEME 4: SHIFT FROM A LENS OF CHILD PROTECTION TO ONE OF FAMILY WELL-BEING

The problems at the root of neglect – poverty, inadequate housing, and unmet service needs – do not affect children in isolation. They are experienced by the whole family and resolving them requires holistic interventions that prioritize family well-being. These interventions cannot be delivered by child welfare agencies alone. They require cooperation between public and community service providers to deliver integrated, wraparound supports. These services cannot be reserved only for families with the most acute needs or for whom neglect is an existing concern. Rather, policy makers and child welfare agencies should prioritize and fund the establishment of robust prevention and early intervention programs to stop the conditions that lead to neglect from worsening.

THEME 5: REIMAGINE "HEALTHY FAMILIES" THROUGH A STRENGTHS-BASED AND CULTURALLY RESPONSIVE LENS

The concept of neglect varies across cultures and communities. In order to effectively serve diverse families, child welfare agencies and workers must be able to adapt the lens through

which they conduct their assessments to one that aligns with the values and beliefs of the families they work with. Child welfare workers should familiarize themselves with culturally-specific and traditional caregiving practices and recognize these practices as a strength rather than a risk factor for neglect. To facilitate this shift, government and child welfare agency policies must be revised to recognize the value of diverse ways of raising a child and to accept a range of models for a "healthy family."

THEME 6: EMPOWER AND FUND MARGINALIZED COMMUNITIES TO RESPOND TO NEGLECT

The communities and individuals that are most impacted by the child welfare system – Black, Indigenous, and racialized communities and children – are rarely given a voice when it comes to policy and programmatic changes that will affect them. As the recommendations in this report are implemented, it is critical that policy makers and child welfare agencies consult with these communities to ensure that their interests are served. Additionally, direct funding to marginalized communities is needed to establish culturally-rooted neglect prevention and family wellness programs. This includes recognizing the inherent right of Indigenous communities to deliver their own child welfare services and providing sustainable funding and resources to support this transition.

We believe that implementing the recommendations in this report fully and expediently will represent a significant step towards moving beyond neglect for children and families across Turtle Island [a]. By transitioning from a threshold-based, adversarial model of child welfare policy and practice to an integrated, prevention-focused and culturally responsive approach, we can help ensure that the material, emotional, and developmental needs of young people are fulfilled, and that all families are lifted up.

a According to the Canadian Encyclopedia, 'Turtle Island' is the name used by many Indigenous peoples to refer to the land otherwise known as 'North America'. It is used in this report to describe children and families in what is known in settler society as 'Canada', although the term 'Canada' is used when referring to the Canadian state.

Summary of Recommendations

We recommend that **governments**, **child welfare agencies**, and **child welfare workers** implement the following outstanding recommendations on child neglect.

THEME 1: IDENTIFY AND ADDRESS THE ROOT CAUSES UNDERLYING NEGLECT

Acknowledge that Federal, Provincial and Territorial governments have allowed the needs of children - in particular, First Nations, Inuit, and Métis children[b]– to go unmet, by failing to provide resources and services essential to their development and well-being. (1 report, 2010)

Fully implement Jordan's Principle and ensure the equitable funding and delivery of services to Indigenous children living on and off reserve. (10 reports, 2008-2019)

Establish and fund programs and services within and outside of child welfare agencies that address the root causes of neglect including poverty, inadequate housing, lack of affordable childcare, substance misuse, and mental illness. (12 reports, 1992-2019)

When unmet material and service needs are identified, connect families with resources within your agency and community that can help fill these needs, being attentive to cultural relevance and supporting access by offering guidance and accompaniment. (2 reports, 1992-2008)

THEME 2: RECOGNIZE THAT NEGLECT IS USUALLY A RESULT OF SYSTEMS FAILURE, NOT CAREGIVER FAILURE

Enshrine in child welfare legislation a distinction between cases in which a caregiver neglects a child's needs, and cases in which a caregiver is unable to meet those needs because they lack access to essential resources and services such as stable housing, affordable childcare, and a livable income. (1 report, 2018)

b Throughout this report we have used the term 'Indigenous' to refer to First Nations, Inuit and Métis people when describing policies that do not distinguish between the three groups or when referring to source material that uses this term.

Mandate that no child be removed from a caregiver on the basis of poverty, inadequate housing, or unmet service needs. (5 reports, 1992-2019)

Update assessment protocols to clearly differentiate between cases in which a caregiver neglects a child's needs, and cases in which a caregiver is unable to meet those needs because they lack access to essential resources and services. Require workers to stipulate how they will address such structural barriers in their service plans. (3 reports, 1992-2010)

Provide workers with additional training and ongoing educational opportunities to understand the challenges faced by the families they serve, including:

- Training to understand historic and structural factors, such as poverty, trauma, racism and colonialism and the impact they have on families.
- Nation-specific Indigenous cultural competency training based on the region in which agencies are situated and the populations workers interact with.
- Opportunities to explore their own social position and cultivate an awareness of how their experiences and identity inform their perspective/contribute to biases. (8 reports, 2008-2019)

When completing assessment and services plans, address factors outside of a caregiver's control that contribute to situations in which a child's needs are unmet. Consider any historic and structural factors that can create barriers to effective caregiving, including:

- Lack of access to essential resources and services, such as a livable income; safe and stable housing; affordable, quality childcare; mental health care; and treatment for substance misuse.
- Trauma and intergenerational trauma, including, trauma experienced by Indigenous communities in residential schools, through the 60s scoop, and beyond.
- Caregivers who were raised in the child welfare system, and who lacked models for healthy caregiving. (6 reports, 2006-2019)

THEME 3: IDENTIFY AND ACKNOWLEDGE THE REAL RISKS POSED BY NEGLECT

- Amend assessment tools and practices to distinguish between immediate danger to a child and long-term risk to their development, with the understanding that the latter is much more common in cases of neglect. (4 reports, 1992-2018)
- End reliance on actuarial tools to predict risk posed by a caregiver to a child, as there is little evidence demonstrating that these tools produce accurate or reliable projections. (2 reports, 2013-2018)
- Counteract the culture of fear in child welfare agencies and increase risk tolerance to allow workers to use their professional judgement and creative problem solving. (2 reports, 2010-2018)

THEME 4: SHIFT FROM A LENS OF CHILD PROTECTION TO ONE OF FAMILY WELL-BEING

- Shift the funding model for child welfare from one that emphasizes threshold-based protection services to one that invests in universal and holistic prevention and support services, both within child welfare agencies and at the community level. (12 reports, 2008-2019)
- Establish multiple lines of intervention according to the level of risk to the child (i.e. Differential Response), starting with prevention. Mandate cooperative and minimally invasive approaches be used whenever possible, and urgent protection measures, such as apprehension to be used only when there is an imminent risk of serious harm to a child. (4 reports, 2009-2013)
- Establish policy structures that allow agencies to share information and jointly deliver services, thereby promoting an integrated approach to child and family well-being. (7 reports, 2009-2019)

- Collaborate with governmental and community organizations to provide wraparound services that address the problems underlying "neglect." Ensure that workers are familiar with service delivery partners and equipped to provide culturally responsive referrals and community connections. (8 reports, 2008-2019)Create conditions that allow workers to invest the time and resources required to establish trusting relationships with families and to use holistic approaches to assessment and intervention. (9 reports, 1992-2019)
- Increase the number of workers whose sole purpose is to support the well-being of families. (2 reports, 2008-2009)

THEME 5: REIMAGINE "HEALTHY FAMILIES" THROUGH A STRENGTHS-BASED AND CULTURALLY RESPONSIVE LENS

- Amend child welfare legislation to recognize culturally diverse approaches to caregiving, in particular traditional Indigenous caregiving practices. (6 reports, 2016-2019)
- Adopt assessment tools that are holistic, strengths-based, trauma-informed and culturally responsive. (9 reports, 2008-2019)
- Recognize the validity and value of culturally diverse caregiving practices. Acknowledge that mainstream ideas about "good" parenting are biased and do not reflect the diversity of families (in particular families with Indigenous, Black and 2SLGBTQ+ caregivers). (3 reports, 2006-2018)
- Take a broad view of the caregiving system when completing assessments and establishing care plans. (1 report, 2018)
- Acknowledge that caregivers are the experts on their own families. Wherever possible, work collaboratively with them to identify the challenges their families are facing, explore solutions, and build on strengths to support their children's well-being. (2 reports, 2016-2018)

THEME 6: EMPOWER AND FUND MARGINALIZED COMMUNITIES TO RESPOND TO NEGLECT

Partner with communities, particularly Black and Indigenous communities, and those with lived experience in the child welfare system, in making decisions on any policy and programming changes that will affect them. (6 reports, 2016-2019)

In recognition of Indigenous nations' inherent sovereign right to oversee child welfare services in their own communities, support and fund Indigenous communities in developing child welfare services. (10 reports, 1992-2019)

Provide sustainable funding for community-based, culturally responsive prevention and family support programs in Indigenous, Black, and other marginalized communities. (6 reports, 1992-2019)

Ensure that child welfare staff reflect the diversity of service users. (8 reports, 2010-2019)

About this Report

The Beyond Neglect initiative is an undertaking of the Child Welfare League of Canada in partnership with the Children's Aid Foundation of Canada. The project was established in 2019 with the goal of deepening our understanding of the factors that contribute to the risk of child neglect and how to best respond to it. A series of cross-sectoral panel events and webinars held in 2021 brought together stakeholders and community members to examine questions such as; "What is a healthy family?", "What is 'neglect'?" and "How can we use resources to effectively support child and family well-being?".[c]

This report builds on these consultations by collating recommendations made by child welfare advocates that address the way we assess, intervene in, and prevent neglect at the policy, agency, and worker levels. We identify 32 reports authored by Canadian governmental and community organizations between 1992 and 2019 that make such recommendations.[d] Many of the recommendations we encountered in these reports were made numerous times over the nearly three decades of literature we reviewed. However, little action has been taken towards their implementation. In this report, we present the combined recommendations from our review, which are supported by the input we sought from numerous child welfare stakeholders and experts. We call on governments, child welfare agencies, and child welfare workers to implement these outstanding recommendations in order to move beyond neglect and towards wellbeing for all children and families on Turtle Island.

UNDERSTANDING THIS REPORT

We have organized our findings into six overarching themes. Within these themes, recommendations are color-coded according to the target audience and related level of implementation, as follows:

Recommendations that appear in teal address policy makers.
Recommendations that appear in orange address child welfare agencies.
Recommendations that appear in blue address at child welfare workers[e]

c Summaries of the findings from these events can be accessed at https://www.cwlc.ca/beyond-neglect. Webinar recordings are also available at https://vimeo.com/user155921923.
d Reports were compiled using a snowballing technique. Only reports that made specific mention of neglect, as distinct from other forms of child maltreatment, were available online, and included recommendations were included in the review, although additional reports, as well as academic publications, were used to provide context and background for the recommendations. For a full list of reports reviewed refer to Appendix A.
e Although these recommendations are aimed primarily at child welfare workers, many of them also apply to mandated reporters.

In addition, we highlight examples of the recommendations from the reports we reviewed.

> *Recommendations in italics represent key calls to action from the reports we reviewed which were collated to establish the recommendations in this report.*

Finally, we have also outlined a promising practice that addresses some of the recommendations contained in each theme. Some of these promising practices entail broad service delivery frameworks, while others comprise innovative programs developed by child welfare agencies.

The promising practices which appear in yellow boxes have been demonstrated to be effective in addressing neglect-related concerns in Canadian child welfare or social service agencies.

Background

WHAT IS 'NEGLECT'?[F]

Understandings of what child neglect is and who is responsible for it vary culturally and historically.[1] In general, neglect refers to situations in which a caregiver does not provide for a child's relational and/or material needs.[g2] In Canada, child welfare policies are determined at the provincial and territorial level. In general, Canadian policies on neglect emphasize unmet material needs over relational ones.[3] Legal definitions of neglect tend to focus on a failure by caregivers to provide for these needs which include "physical and supervisory care, medical care, psychological/psychiatric treatment (where warranted), and in some provinces, school attendance[4]. In reality, the labeling of these conditions as "neglect" by the mainstream child welfare system obscures the much more complex difficulties experienced by children and families on Turtle Island.[h5] The recommendations offered in this report point to ways in which neglect could be redefined to better reflect and respond to this reality.

NEGLECT INCIDENCE

Neglect, along with exposure to intimate partner violence, is the most common principal concern in substantiated child welfare investigations,[i] representing 34% of cases according to the 2008 Canadian Incidence Study of Reported Child Abuse and Neglect (CIS-2008) [j6]. In that year, nearly 30,000 children were determined to have experienced neglect and – in 28% of cases – neglect was the single type of maltreatment identified.[7] As documented in the CIS-2008, neglect is generally a chronic condition and involves multiple incidents.

f For a more detailed discussion on this question, refer to the briefing paper for the CWLC's webinar "What is 'neglect'? Challenging and redefining discriminatory concepts", available online at https://www.cwlc.ca/_files/ugd/f54667_f91c1ab5b7e7410aa064b9ed8c11c402.pdf

g "Material needs" refers to the provision of nutrition, housing, clothing, healthcare, etc. "Relational needs" refers to provision of supervision, interaction and connection by a child's caregivers.

h Throughout this report, the term neglect is used to refer to all situations labelled as neglect by the child welfare system. We acknowledge that often this the term neglect is misused or represents an oversimplification of the complex challenges experienced by children and families.

i A child welfare case is deemed 'substantiated' when an assessment or investigation confirms that a child has been maltreated.

j The Canadian Incidence Study of Reported Child Abuse and Neglect is a national surveillance program of the Public Health Agency of Canada which examines incidence and characteristics of reported child maltreatment across all 13 provinces and territories.

Recommendations

THEME 1: IDENTIFY AND ADDRESS THE ROOT CAUSES UNDERLYING NEGLECT

Mainstream approaches to neglect tend to attribute the problems faced by children and families to caregiver failure. However, what policy makers and service providers conceptualize as neglect often involves a range of unmet material and service needs that are rooted in structural and systemic factors such as poverty and discrimination. The majority of reports included in our review recommended intervening at the level of these root causes in order to effectively respond to the problems underlying neglect.

GOVERNMENTS

Acknowledge that Federal, Provincial and Territorial Governments have allowed the needs of children - in particular, First Nations, Inuit, and Métis children – to go unmet, by failing to provide resources and services essential to their development and well-being. (1 report, 2010)

Progress on child poverty in Canada is stalling, particularly in Indigenous and racialize communities.[k8] In their 2021 Report Card on Child and Family Poverty in Canada, Campaign 2000 points to numerous policy and structural factors that contribute to keeping Canadian youth and families in poverty: Low wages, precarious employment, and the limitations of Employment Insurance, they state, all prevent families from achieving financial stability. The market-based childcare model and housing crises place a heavy burden on low income families. Income support programs such as the Canada Child Transfer are insufficient to lift families out of poverty and have not increased at a rate commensurate to the rising cost of living.

The limited income supports and services available to families are insufficient "to allow parents to support their children with food, housing, clothing, and recreation in accordance with community standards."[9]. What's more, the majority of child welfare investigations for neglect involve children whose families are experiencing poverty-related needs.[10] Caregivers who are unable to meet these needs due to structural forces that keep them in poverty are at risk of being labeled neglectful.

k According to Campaign 2000, as of 2019, nearly one in five Canadian children were living in poverty. Census data from 2016 indicates that more than one quarter of racialized children and more than one third of immigrant children lived in poverty. Status First Nations children living on, and off reserve are more than twice as likely as other Canadian children to live in poverty (53% of children on reserve and 41% off reserve). Non-Status First Nations, Inuit, and Métis children also experienced elevated poverty levels.

The report For the Good of Our Children and Youth by the Saskatchewan Child Welfare Review Panel recommends that Canadian governments explicitly acknowledge how policies that keep families in poverty contribute to the unmet material and services needs which are often labeled as neglect by the child welfare system. In order to address the problems underlying neglect, policy makers must take responsibility for the decisions that negatively shape the living conditions of children and families, particularly in First Nations, Inuit and Métis communities.

> *"Acknowledge at all levels of government that poverty-related conditions drive child neglect and other social problems..."*
>
> - For the good of our children and youth: A new vision, a new direction, 2010[11]

GOVERNMENTS

Fully implement Jordan's Principle and ensure the equitable funding and delivery of services to Indigenous children living on and off reserve.

Poverty-related conditions that are labeled as neglect are a primary cause of the overrepresentation of Indigenous children in the Canadian child welfare system.[l] First Nations children "often live in communities that are without comparison in Canada when it comes to the impoverishment of services and infrastructure".[12] Failure to resolve jurisdictional funding discrepancies has stalled progress on resolving these inequities, particularly for Indigenous children living on reserves, who lack access to safe water, quality education and adequate housing.[m13] These factors – poverty, inadequate housing,[n] and limited access to services – have been established as "the driving factors underlying the over-representation of cases of child neglect involving Aboriginal children in the Canadian child welfare system."[14]

One of the most frequently recurring recommendations in the reports we reviewed was the call to fully and immediately implement Jordan's Principle[o] Jordan's Principle is a child-first policy

l Indigenous children on Turtle Island continue to be overrepresented at every stage in the child welfare service continuum, according to the 2019 First Nations/Canadian Incidence Study of Reported Child Abuse and Neglect (FN/CIS-2019). The study determined that investigations of neglect were the primary driver of the overrepresentation of First Nations children in child welfare, with neglect representing the primary concern in 44% of cases involving First Nations families. Substantiated neglect investigations also represented the largest disparity between First Nations and non-First Nations child in that study, with First Nations children 8.5 times more likely to be the subject of such an investigation.

m Whereas health and social services for Canadian children are generally the responsibility of Provincial governments, the provision of services to First Nations living on reserves falls under the jurisdiction of the Federal government. In their 2013 report Poverty or Prosperity, the Centre for Policy Alternatives reports that since 1996 funding for serves on reserves has increased by only 2% per year, without regard for population growth and need

n Throughout this report the terms "inadequate housing" and "inadequately housed" are used to refer to families whose housing in unsafe or unsanitary, overcrowded, unaffordable, or precarious..

o Jordan's Principle was established to resolve the jurisdictional disputes regarding funding for services for First Nations children. It is named for Jordan River Anderson of Norway House Cree Nation, a child born with complex medical needs, who died in hospital at age five having never had the opportunity to live in his family home as the federal and Manitoba governments engaged in a protracted battle over which should pay for his at home care. Jordan's

which aims to ensure that First Nations children in Canada have access to the same health and social services available to non-First Nations child. Full implementation of Jordan's Principle would help ensure that the unmet needs that bring many families to the attention of the child welfare system are preempted by other health and social services, and represent a critical step towards achieving equitable outcomes for Indigenous youth.

> *"Canada must fully and immediately implement Jordan's Principle across all government services to ensure that no First Nations child is denied or fettered access to government services available to all other children..."*
>
> - Reconciliation Means Not Saying Sorry Twice: How inequities in Federal Government child welfare funding, and benefit, on reserves drives First Nations children into foster care, 2011[15]

GOVERNMENTS

Establish and fund programs and services within and outside of child welfare agencies that address the root causes of neglect, including poverty, inadequate housing, lack of affordable childcare, substance misuse, and mental illness.

Given that the conditions labeled as neglect are very often a manifestation of poverty, policy changes are needed to accelerate the rate at which Canadian families are lifted out of poverty. The reports we reviewed recommend a range of programmatic and policy changes to reduce child and family poverty and its impacts, and better support under-resourced families. These include raising rates of supplemental financial assistance for families with children[16], increasing the availability of affordable family housing units[17]; expanding access to quality, affordable childcare[18], substance abuse and mental health treatment[19], and food security programs[20]. It is critical that all of these programs be culturally responsive and established in partnership with the communities they will serve. Care should be taken to promote awareness of and access to these programs among marginalized families who experience disproportionate rates of poverty and who face greater barriers to accessing existing services.

> *"The Government of Alberta, in collaboration with its service delivery partners, continue to take action on addressing root causes for child intervention involvement, including: direct, long-term poverty-reduction strategies, family violence*

Principle stipulates that in order to ensure expedient and equitable service delivery, services requested for a First Nations child are paid for by the government of first contact and payment disputes are resolved afterward. Although it was passed unanimously at the House of Commons in 2007, in 2016 the Canadian Human Rights Tribunal (CHRT) determined that Jordan's Principle had not been fully implemented and issued its first non-compliance order. Since 2016, the CHRT has issued more than 15 additional orders against the Canadian Government related to Jordan's Principle, while First Nations children continue to experience discrimination in service provision. For more information about Jordan's Principle, visit https://fncaringsociety.com/jordans-principle.

prevention, and access to meaningful, culturally congruent family supports"

- Walking as One: Ministerial Panel on Child Intervention's Final Recommendations to the Minister of Children's Services, 2018[21]

CHILD WELFARE WORKERS

When unmet material and service needs are identified, connect families with resources within your agency and community that can help fill these needs, being attentive to cultural relevance and supporting access by offering guidance and accompaniment. (2 reports, 1992-2008)

The interventions prescribed by mainstream child welfare agencies and workers rarely center fulfillment of unmet material and service needs in their service plans. One study found that even when the only concerns in a neglect case were poverty-related, "families were as likely to receive rehabilitative referrals as those designed to address concrete need."[22]. Such referrals not only fail to address the presenting problem, they can also impose additional stresses on the families they are intended to support. For example, attending parenting programs may cost resource-limited families time and money, exacerbating the underlying issues that contribute to neglect. This may point to one reason why families involved in child welfare cases where neglect is a concern are more likely than any other families to be re-referred to child welfare agencies[23] - the needs that brought them to the attention of the child welfare system in the first place remain unmet even after their cases are closed.

The reports *Liberating Our Children, Liberating Our Nation and Broken Promises* recommend that child welfare workers support caregivers in establishing strategies to overcome structural challenges. Workers must expand their toolkit to include interventions that focus specifically on fulfilling families' unmet material and service needs that contribute to neglect-related concerns. This may involve assisting families in accessing services within and outside of their agencies. By providing accompaniment and advocacy, child welfare workers can support marginalized families in overcoming barriers to navigating and accessing health and social services. Fulfillment of this recommendation is contingent on the establishment and funding of a robust range of well-funded health and wellness programs, as discussed in further detail elsewhere in this report.

"Protecting the safety of children and youth must include resolving risk at the level of the child, family, and community. Without redress of structural risks, there is little chance that the number of Indigenous children and youth in care will be reduced."

- Reconciliation in Child Welfare: Touchstones of Hope for Indigenous Children, Youth, and Families, 2006[24]

Promising practice: Poverty Reduction Program

– Jewish Family & Child Service of Greater Toronto

Jewish Family & Child Service of Greater Toronto (JF&CS) is a multi-service agency offering wraparound programming for children and families. Through their Poverty Reduction Program, JF&CS takes a holistic approach to achieving family financial stability and sustainability in the immediate- and long-term.[25] The Program aims to address the interconnected factors that result from and contribute to keeping families in poverty. These include personal challenges (such as poor mental and physical health, intergenerational trauma, and limited education), and structural ones (such as discrimination and unaffordable housing). To address these challenges, JF&CS adopted the Sustainable Livelihoods Framework (SLF). The SLF is a holistic approach which consists of six domains: basic needs, physical health, mental health and trauma, money and finances, skills and employability. Depending on their needs, clients receive a "unique basket of benefits" to support growth and stability across these domains[26]. These may include financial aid, housing support, psychoeducational groups, financial literacy and empowerment training, and assistance navigating government benefits.

Because JF&CS takes an integrated approach to service delivery, when poverty-related concerns are identified families can benefit from its Poverty Reduction Program as a part of the child welfare response. Assessment of families referred to the agency for child welfare concerns involves consideration of their proximal context, but also brings systemic factors into the clinical picture. The "unit of analysis" for these assessments is not the child in isolation, but the entire family unit. The worker conducting the assessment is tasked with establishing a holistic understanding of the factors that contribute to or hinder a family's well-being and determine what JF&CS programs would be most supportive. When poverty-related challenges are identified, a family's assigned child welfare and Poverty Reduction workers collaborate to address the root causes of these challenges using a seamless service delivery approach. Caregivers are not punished or pathologized for their inability to meet children's material needs, but assisted in meeting those needs in the immediate and long term.

By integrating poverty reduction into their approach to child and family welfare, JF&CS is able to address the individual and systemic root causes of neglect head on. In 2020-2021, nearly 600 families receiving child welfare services also received other supportive services through JF&CS, and there were nearly 600 instances of financial support being provided to child welfare client families.[27] Families who participated in the Poverty Reduction Program saw significant improvements in meeting basic needs and becoming stably housed, both important contributors to neglect-related concerns. In the same year, nearly 99% of children receiving child welfare services were able to remain in the care of their family/community.

THEME 2: RECOGNIZE THAT NEGLECT IS USUALLY A RESULT OF SYSTEMS FAILURE, NOT CAREGIVER FAILURE

Neglect is generally regarded by the mainstream child welfare system as a "deliberate withholding of care".[28] It is important to recognize that a small number of caregivers may deliberately withhold care from their children. However, as discussed above, neglect is more often the result of circumstantial and structural factors that make it difficult or impossible for caregivers to meet children's needs. It is essential to shift the way that neglect is conceived at the policy, agency, and worker levels to one that recognizes and addresses the ways in which social structures and institutions fail young people and families.

GOVERNMENTS

Enshrine in legislation a distinction between cases in which a caregiver neglects a child's needs, and cases in which a caregiver is unable to meet those needs because they lack access to essential resources and services such as stable housing, affordable childcare and a livable income. (1 report, 2018)

Child welfare policies and agencies tend not to distinguish between situations in which caregivers are "unwilling" and "unable" to meet these needs. Indigenous child and youth advocate Cindy Blackstock states that "too often, child welfare codifies poverty as a personal deficit instead of addressing the social problems that disadvantage families"[29]. At present, Quebec is the only province to stipulate in its child welfare legislation that caregivers' resources should be taken into account when assessing for neglect related to unmet material needs[30]. In addition to acknowledging the role of government in perpetuating the root causes of neglect, the report Transforming Child Welfare in Manitoba recommends that child welfare legislation be amended to explicitly differentiate between caregivers who are unwilling to meet children's needs and those who are unable to do so due to structural and circumstantial factors.

> *"The [Child and Family Services] act should be revised to emphasize the need of a family to receive assistance when there is no immediate safety threat necessitating child protection services, without the implication or finding that the parent has caused their child to be in need of protection..."*
>
> - Transforming Child Welfare Legislation in Manitoba: Opportunities to Improve Outcomes for Child and Youth, 2018[31]

GOVERNMENTS

Mandate that no child be removed from a caregiver on the basis of poverty, inadequate housing or unmet service needs.

Five of the reports we reviewed recommended that it be entrenched in child welfare statutes that children cannot be apprehended from their caregivers on the basis of poverty, inadequate housing, or any other unmet service need[32]. Rather, they must be provided with the necessary supports to keep their safe children at home, such as the expanded supplemental income, housing, childcare and mental health programs discussed above.

> *"We call upon all governments to prohibit the apprehension of children on the basis of poverty and cultural bias..."*
>
> - Reclaiming power and place: The final report of the National Inquiry Into Missing and Murdered Indigenous Women and Girls, 2019[33]

CHILD WELFARE AGENCIES

Update assessment protocols to clearly differentiate between cases in which a caregiver neglects a child's needs, and cases in which a caregiver is unable to meet those needs because they lack access to essential resources and services. Require workers to stipulate how they will address such structural barriers in their service plans. (3 reports, 1992-2010)

The current approach to assessment in child welfare agencies is not conducive of establishing a nuanced understanding of how structural and circumstantial factors influence family life and contribute to neglect. Child welfare assessments generally focus on the nuclear family, placing less emphasis on the web of social systems in which the family is embedded. Workers are not encouraged to zoom out and consider the circumstances that impact caregiving capacity and contribute to or hinder child safety and well-being.

Three of the reports we reviewed recommend that in order to cultivate a nuanced understanding of children's and families' challenges and their underlying causes, child welfare workers need assessment tools that are holistic and designed to assess families' immediate and broad social circumstances[34]. These tools should support workers in distinguishing whether caregivers are unwilling or unable to provide for children's needs by promoting attentiveness to factors such as economic circumstances and availability of support services in their community.

> *"The risk assessment tool should be replaced with individualized strength-*

based needs assessment. Social workers need to be able to use their professional judgment in working with families to consider the following factors in assessing risk: the strengths of the parents, the parents' present situation, and the systemic barriers that limit some parents' ability to safely care for their children."

- Broken Promises: Parents Speak Out About B.C.'s Child Welfare System, 2008[35]

CHILD WELFARE AGENCIES

Provide workers with additional training and ongoing educational opportunities to understand the challenges faced by the families they serve, including:

- **Training to understand historic and structural factors, such as poverty, trauma, racism and colonialism and the impact they have on families.**
- **Nation-specific Indigenous cultural competency training based on the region in which agencies are situated and the population workers interact with.**
- **Opportunities to explore their own social position and cultivate an awareness of how their experiences and identity inform their perspective/contribute to biases. (8 reports, 2008-2019)**

In some jurisdictions, policies already stipulate that children may not apprehended on the basis of poverty or inadequate housing alone.[36] However even where such policies exist, they may not be enough to prevent such apprehensions from taking place. Because neglect policies are often vague, their implementation depends to a great extent on the understanding and interpretation of child welfare workers[p]. It is therefore essential to ensure that child welfare workers are trained to recognize the systemic factors that contribute to situations in which children's needs go on met, and to differentiate these situations from neglect. Many of the reports we reviewed recommended that child welfare workers be provided with additional training on how to recognize how poverty, inadequate housing, intergenerational trauma, and other structural failures impact Canadian families, and First Nations, Inuit and Métis families in particular, and to distinguish these challenges from neglect so that their assessments are not confounded by factors outside of caregivers' control[37]. Additional training on anti-Black and anti-Indigenous racism is also recommended[38].

p A 2009 study by Chau et al. found that although Ontario's Child and Family Services Act stipulates that housing problems are not sufficient grounds to consider a child in need of protection, workers at the Children's Aid Society of Ontario reported that a family's housing situation impacted the decision to place a child in foster care or to delay their return home following placement in one in five cases.

> *"Recommendation: That workers be specifically trained on the multigenerational impacts of residential schools and on the role of poverty, poor housing, substance abuse and other social and economic factors in assessments of child neglect."*
>
> - The Legacy of Phoenix Sinclair: Achieving the Best for All Our Children, 2013[39]

In addition to poverty, another critical factor underlying the rate of neglect investigations in Indigenous communities is the legacy of forced child removal, including the residential school system and Sixties Scoop. The intergenerational trauma caused by these events can set off a cycle of neglect[40]. "The burdens carried by [residential school] survivors," writes Grand Chief Ed John in his report on child welfare in British Columbia, "including a lack of parenting skills and scars from having witnessed or directly experienced abuse, have had a profound effect on the ability of many Indigenous peoples to care for families"[41]. However, child welfare workers tend to receive little training on how to recognize the impacts of intergenerational trauma, and how this should impact their assessments and interventions. In fact, as of 2010 child welfare workers in the Northwest Territories received only a half day of training to address the topics of substance misuse, residential schools, and mental health combined[42]. This lack of critical context impedes child welfare workers ability to understand the root causes of neglect in First Nations, Inuit, and Métis communities and to formulate suitable, trauma-informed service plans. Five reports recommend that child welfare workers undergo training on the history of child removal in Indigenous communities and its ongoing impacts, including intergenerational trauma.

CHILD WELFARE WORKERS

When completing assessment and services plans, address factors outside of a caregiver's control that contribute to situations in which a child's needs are unmet. Consider any historic and structural factors that can create barriers to effective caregiving, including:

- **Lack of access to essential resources and services, such as a livable income; safe and stable housing; affordable, quality childcare; mental health care; and treatment for substance misuse.**
- **Trauma and intergenerational trauma, including, trauma experienced by Indigenous communities in residential schools, through the 60s scoop, and beyond.**
- **Caregivers who were raised in the child welfare system, and who lacked models for healthy caregiving. (6 reports, 2006-2019)**

Six reports recommend that child welfare workers consider the way structural and historical factors outside of caregivers' control contribute to the unmet needs they may label as neglect when conducting assessments and interventions. Several of the reports we reviewed recommended that child welfare workers' assessments and service plans should clearly differentiate between an unwillingness to care for children satisfactorily, and an inability to do so due to factors outside caregivers' control[43]. Workers must be prepared to offer appropriate interventions which meaningfully address the underlying issues rather than pathologizing or punishing caregivers in both the former and the latter situation

> *"Social workers must learn to differentiate between structural (also known as distal) risks and family risks to a child or youth, and develop meaningful responses to both."*
>
> - Reconciliation in Child Welfare: Touchstones of Hope for Indigenous Children, Youth and Families, 2006[44]

Promising practice: Family Group Conferencing

The Family Group Conferencing[q] (FGC), model originated in New Zealand and was established in response to concerns regarding the suitability of existing child welfare assessment tools for use with Māori families[45]. Based on traditional tribal practices, FGC is a partnership-based model that is rooted in the belief that families are the experts on themselves[46], and that their strengths and resources can be mobilized and enhanced to keep children safe and well cared for[r47]. While it is solution-focused, the process itself can be a healing experience that strengthens the family unit[48].

Before the conference takes place, the third-party conference coordinator works with family members to adapt the FGC model to their needs by establishing who should be invited to the conference, where it should be held, and what cultural or spiritual elements should be included. Participation in FGC is not limited to the nuclear family and may include relatives, friends,

q Also referred to as Family Group Decision Making.
r FGC is intended as a consensus-based model for child welfare assessment in which families participate voluntarily. However it has at times been subject to model drift and been positioned as a compliment to, rather than a replacement for, adversarial child welfare assessment or investigatory protocols. It has also been implemented with little recognition of or fidelity to its Indigenous roots. There is a risk that FGC can become coercive rather than collaborative by creating the illusion that families are being meaningfully consulted while in reality proceeding with "business as usual". If implementation is not accompanied by a shift in organizational culture that recognizes the strength of families, allows child welfare workers to practice with flexibility, creativity, and discretion, and centers decolonization, the power of the partnership at the core of this model is eroded.

Promising practice: Family Group Conferencing continued

and community members and anyone who plays an important role in the child's life[s]. Children themselves are also included in decision making. During the conference, child welfare workers and other service providers present the concerns they hope will be addressed. The family group members establish a plan to address these concerns and keep the child safe, which they review with the rest of the group to ensure that safety concerns are addressed to all parties' satisfaction[49]. The conference ends when all attendees agree to the roles they will play in achieving child safety and well-being.

FGC has been used by select Canadian child welfare agencies for over 20 years with promising outcomes. The Family Group Conferencing Project of Toronto, launched in 1998, reported many successes over its first seven years, including a substantially lower number of investigations following an initial referral, and a large majority of children remaining with/being returned to their family homes[50]. The Ma Mawi Wi Chi Itata Centre (Ma Mawi), an Indigenous community organization in Winnipeg, Manitoba established an FGC program in 2000s. Ma Mawi reports that the use of FGC contributes to very high prevention and reunification rates for child welfare involved families. By surrounding the family in a circle of support. Ma Mawi states that they are able to effectively understand and address the root causes driving child welfare concerns[51]. Family Group Conferencing offers an opportunity to reconceptualize neglect by engaging with family members not as the cause of the problem, but as participants in the solution. By partnering with them to understand their challenges, child welfare workers can rewrite the narrative that blames caregivers for structural barriers to effective caregiving, instead working with them to build on strengths and co-create solutions.

THEME 3: IDENTIFY AND ACKNOWLEDGE THE REAL RISKS POSED BY NEGLECT

The risks posed to children by neglect are generally not immediate risks to safety, but longer -term risks to development and well-being. This is not to say that they are not serious – in fact, neglect is recognized as having some of the most significant impacts on children's development of any type of maltreatment[52]. However, because these risks are generally caused by a chronic conditions and systemic inequities, they need to be understood and addressed differently than the risks associated with other forms of maltreatment. Recognizing this distinction is critical to establishing effective solutions that promote family preservation.

s As it does not limit participation to the nuclear family, FGC is also aligned with the Inuit principle of tajiitaqiingniq which stipulates that all members of a family or community who will be impacted by a decision should be involved in the formulation of that decision (Government of Ontario, 2018).

CHILD WELFARE AGENCIES

Amend assessment tools and practices to distinguish between immediate danger to a child and long-term risk to their development, with the understanding that the latter is much more common in cases of neglect. (4 reports, 1992-2018)

In child welfare cases involving neglect, there is usually not a direct or immediate threat of harm posed by the caregiver to the child[t]. Rather, the child's well-being is endangered because their material, developmental, or emotional needs remain unmet over an extended period[53]. "The concern," as the Phoenix Sinclair Report states "is not that conditions are at risk of escalating, but that they are at risk of continuing as they are"[54]. It is important, as four of the reports we reviewed point out, that assessments in child welfare differentiate between immediate danger to a child and long-term risk if conditions remain the same, in order to plan appropriate interventions[55]. Given that the risk posed by neglect is generally a chronic one, the type of interventions required is not urgent and invasive, but sustained and cooperative.

Some reports also point to the importance of differentiating between present and future risk, stating that child welfare decisions, particularly those regarding the removal of a child, should be made based on the presence of immediate danger, not on projections[56]. Child welfare agencies should focus their assessments on understanding the current situation rather than on predicting possibilities for the future. The goal of assessment must be to identify current risk and protective factors so that workers can generate service plans that support families in achieving safety and stability.

> *"The child welfare system must respond in different ways to cases requiring child protection due to an immediate safety threat and cases where risk factors necessitate supports to improve a child's well-being."*
>
> - Transforming Child Welfare Legislation in Manitoba: Opportunities to Improve Outcomes for Children and Youth, 2018[57]

CHILD WELFARE AGENCIES

End reliance on actuarial tools to predict risk posed by a caregiver to a child, as there is little evidence demonstrating that these tools produce accurate or reliable projections. (2 reports, 2013-2018)

t It is undeniable that there exist a small number of extreme neglect cases in which a child is placed in immediate and acute danger. It is critical that child welfare workers be trained to identify to these cases and to respond appropriately and expediently. However these cases represent the exception rather than the rule, and should not be the basis for formulating the child welfare response to all neglect cases.

Many child welfare agencies rely on actuarial assessment tools to predict the occurrence of child maltreatment, including neglect. Whereas consensus-based assessment tools rely on the clinical judgment of child welfare workers to determine which characteristics of families to explore to assess the risk or safety of a child, actuarial tools prescribe specific characteristics to be assessed "based on research showing a strong statistical relationship with future maltreatment"[58]. The use of such tools may appear to lend credibility to assessments. However, the predictions generated using them are generally unreliable, and their apparent objectivity can promote a sense of false confidence that dissuades workers from relying on their professional judgement and experience. Two reports, *Transforming Child Welfare in Manitoba and The Phoenix Sinclair Report* therefore recommend that their use be avoided. It is important to adopt flexible assessment tools that encourage workers to use these assets and to focus on the present circumstances, rather than attempting to predict future risk which actuarial tools cannot reliably do.

> *"Assessment tools must be used as an aid to, and not as a substitute for, the exercise of a worker's clinical judgment."*
>
> - The Legacy of Phoenix Sinclair: Achieving the Best for All Our Children, 2013[59]

CHILD WELFARE AGENCIES

Counteract the culture of fear in child welfare agencies and increase risk tolerance to allow workers to use their professional judgement and creative problem solving. (2 reports, 2010-2018)

Two of the reports we reviewed mentioned that child welfare agents work in a climate of fear. Changes to child welfare policies and practices tend to be driven by child death reviews and other extreme but rare events[60]. While incidents resulting in serious harm to a child present a grave concern and must be addressed seriously and thoroughly, these represent a very small minority of neglect cases. Basing the overall approach to addressing neglect on these cases leads to culture in which, fearful that they will overlook something or making a mistake, workers default to the use of invasive interventions including child removal[61]. The lack of risk tolerance in child welfare agencies discourages workers from relying on their professional judgement, and impedes the use of minimally invasive solutions. In this atmosphere, the focus is always on the risk of not doing enough. Rarely is the risk of doing too much through the use of on drastic and invasive measures acknowledged. The report Transforming Child Welfare Legislation in Manitoba highlights the need to implement measures, such as granting workers protection from liability for actions undertaken or omitted in good faith, in order to increase the risk tolerance in child welfare agencies and allow them to make decisions that best respond to the needs of

children[62].

> *"[The Ministry of Health and Social Services] needs to evaluate the issue of "the climate of fear" in the organization so that fear is not one of the primary drivers of social worker decision making."*
>
> - I Want to Grow Up in My Community: A Review of the Child and Family Services Act, 2010[63]

Promising practice: Safe Care

SafeCare is a brief, evidence-based program for caregivers of children ages 0-5[64]. The goal of the SafeCare program is to keep children safe at home and address risk factors for neglect by building caregivers' skills[65].

The SafeCare program consists of three modules. In the parent-child interaction module, parents learn skills for providing stimulating activities, increasing positive interactions, and managing challenging behaviors to build healthy relationships with their children[66]. In the safety module, they learn about preventing unintentional injuries through childproofing and providing age-appropriate supervision. Finally in the health module, they learn about how to appropriately respond to childhood illness or injuries. SafeCare modules are delivered in the family's home by a trained facilitator. Completing the program usually requires a total of 18 one-hour sessions, although the number of sessions is adjusted according to the skills-based criteria for program completion.

The SafeCare program was piloted in Ontario in 2014, when a group of 33 child welfare workers across 6 agencies were trained as SafeCare facilitators in order to study the program's efficacy in the Canadian context[67]. Findings from that pilot indicated that completion of the SafeCare program resulted in decreases in neglectful caregiving behaviors and more positive child-parent relationships[68]. Workers reported that being trained in SafeCare enhanced their skill set for supporting families with neglect, and providers noted that program completion resulted in higher rates of family reunification and lower rates of child removal[69]. The efficacy of SafeCare in reducing future instances of child maltreatment has also been demonstrated through a number of randomized control trials around the world[70].

Some of the challenges identified by caregivers who have completed the SafeCare program are important to keep in mind when implementing the model. In the Ontario pilot, caregivers noted that they were not provided home safety supplies such as latches as part of the program and

Promising practice: Safe Care continued

had to purchase these materials themselves[71]. Some also reported that the amount of time the program took to complete proved challenging. SafeCare is a promising model for addressing child neglect, but must be implemented in ways that makes completion achievable for resource-strained families.

THEME 4: SHIFT FROM A LENS OF CHILD PROTECTION TO ONE OF FAMILY WELL-BEING

The conditions that create risk for neglect – poverty, inadequate housing, intergenerational trauma – do not affect children in isolation. These problems are experienced by the entire family. "Protecting children" as the Pivot Legal Society report Broken Promises states, "cannot be separated out from protecting mothers and families, which includes ensuring that we live in a society where all people are provided with a decent standard of living"[72]. Moving beyond neglect means investing in the well-being of not only children, but their entire families and communities.

GOVERNMENTS

Shift the funding model for child welfare from one that emphasizes threshold-based protection services to one that invests in universal and holistic prevention and support services, both within child welfare agencies and at the community level. (12 reports, 2008-2019)

Several of the reports we reviewed recommend shifting from a threshold-based child welfare service delivery model towards a universal one[73], and many of them recommended increasing the funding for prevention and early intervention programs[u74]. Because of their threshold-based mandate, child welfare agencies must essentially wait until a family's situation reaches a breaking point to provide services, at which time options for intervention are limited by the urgency and acuity of the situation and more likely to be invasive and adversarial in nature. Twelve of

u Generally child welfare services in Canada have a "threshold-based" or "residual" model. This is to say that families are evaluated and are offered services only if the presence of maltreatment is established. Based on these criteria, many families who have unmet service needs are ineligible for the support of child welfare agencies. When families that have existing challenges are found not to meet the threshold for access, the opportunity for child welfare to intervene before the risk increases or a child is actually harmed is lost.

the reports we reviewed recommend that the emphasis of child welfare policy and funding shift toward universal prevention and support programs which should be available to all families on a voluntary basis (while maintaining targeted programs for families with more acute service needs). Prevention and support programs must be culturally responsive, trauma-informed, and rooted in an understanding of how structural conditions shape family life. By investing in prevention, the child welfare system and other health and social services can prevent the conditions that lead to neglect from worsening, rather than intervening only once neglect has already occurred.

> *"In order to ensure that parents seek out the help they need, access to support services that are available only through Ministry of Children and Family Development...should be available to all parents. Access to services should not be dependent on a child being labelled "at risk"."*
>
> - Broken Promises: Parents Speak Out About B.C.'s Child Welfare System, 2008[75]

CHILD WELFARE AGENCIES

Establish multiple lines of intervention according to the level of risk to the child (i.e. Differential Response), starting with prevention. Mandate cooperative and minimally invasive approaches be used whenever possible, and urgent protection measures, such as apprehension to be used only when there is an imminent risk of serious harm to a child. (4 reports, 2009-2013)

In a threshold-based model, interventions are generally protection-oriented because they are not mobilized until the point where there is a significant risk of harm to a child. Protection-oriented interventions are focused on protecting children from their caregivers, rather than addressing the support needs of the family as a whole[76]. Four of the reports we reviewed recommend a shift in the focus of child welfare agencies from protection to prevention and support[77]. This shift could be accomplished through the implementation of a Differential Response (DR) model, which is recommended in several of the reports we reviewed[78]. A DR model involves the establishment of multiple service streams into which families are channeled according to the nature and intensity of their needs. DR is premised on the idea that by offering services to all families to promote well-being most neglect and maltreatment concerns will be addressed earlier on, diverting many would-be child protection cases from ever entering the more intensive service streams. Implementing a DR model would allow child welfare agencies to offer minimally invasive services to families on a voluntary basis before their problems become acute, while remaining prepared to engage protection measures when presented with an immediate threat to child safety[79]. GGiven that families encounter different challenges throughout their life cycle,

DR also allows them to transition smoothly between streams in the service continuum, preventing gaps in services[80]. A DR model has already been implemented in a number of Canadian jurisdictions, including Ontario, Alberta, and British Columbia[81].

> *"Implement fundamental changes to the child welfare system: create an easily accessible preventive family support stream for all families who need it and a much smaller formal child welfare stream for families where the authority of the courts is required."*
>
> - For the Good of Our Children and Youth: A New Vision, A New Direction, 2010[82]

GOVERNMENTS

Establish policy structures that allow agencies to share information and jointly deliver services, thereby promoting an integrated approach to child and family well-being. (7 reports, 2009-2019)

Families where neglect is a concern often face complex and systemic challenges such as poverty and inadequate housing. Child welfare agencies are assigned the role of intervening in these families but lack the resources, expertise and mandate to address the underlying issues. Families need supplemental income, affordable housing mental health care, and other social services. They also need supports that are culturally responsive and connected to their communities. Seven of the reports we reviewed recommended that child welfare agencies engage in inter-agency collaborations to meet these needs. This may take the form of collaborations with other public agencies, community organizations, or partnerships between mainstream and Indigenous child welfare agencies.

Presently, regulations on sharing of information and resources between agencies can create barriers to collaborative service delivery. When agencies are unable to communicate with one another directly about a case, families must jump through bureaucratic hoops to access the services they need, often being repeatedly subjected to stressful and invasive evaluations. A number of the reports we reviewed made recommendations regarding the establishment of policy structures to allow for smoother communication and information sharing between child welfare and other agencies[83]. With these changes child welfare agencies, as the first point of contact for many families, could facilitate the delivery of wraparound services to support their wellbeing.

> *"[The Minister of Child and Youth Services] should commit to enhanced service integration between child welfare and other services for vulnerable children and families and promote structures and processes that lead to more coherent*

and effective child and family services in Ontario's communities."

- Clarifying the Scope of Child Welfare Services: Report and Recommendations, 2012[84]

CHILD WELFARE AGENCIES

Collaborate with governmental and community organizations to provide wraparound services that address the problems underlying "neglect." Ensure that workers are familiar with service delivery partners and equipped to provide culturally responsive referrals and community connections. (8 reports, 2008-2019)

Eight reports recommend that child welfare agencies increase efforts to engage in joint service delivery. The *Phoenix Sinclair Report* recommends that agencies should be in regular communication with community organizations to better understand the community's needs and establish plans for collaboration[85]. It is particularly important that child welfare agencies engage in dialogue with organizations representing marginalized communities to enhance their understanding of the specific challenges these communities face. The One Vision One Voice report recommends that agencies ensure workers are familiar with these organizations and up to date on the services they offer, so that they can assist families in accessing the resources most suited to them when their needs are beyond the scope of child welfare services[86]. The report also recommends that child welfare agencies purchase culturally appropriate services from African Canadian organizations and providers to help keep African Canadian children safe at home. Another report makes a similar recommendation regarding purchasing of services from Inuit service providers[87]. This same strategy could be used by child welfare agencies to meet the needs of other marginalized families by purchasing services from their communities.

"Recommendation: That child welfare agencies meet regularly with community-based organizations that serve their clients, to discuss how they can best work together to meet the community's needs."

- The Legacy of Phoenix Sinclair: Achieving the Best for All of Our Children, 2013[88]

CHILD WELFARE AGENCIES

Create conditions that allow workers to invest the time and resources required to establish trusting relationships with families and to use holistic approaches to assessment and intervention. (9 reports, 1992-2019)

Many of the reports we reviewed identified the working conditions of child welfare agents as a barrier to achieving a more holistic approach to child and family well-being. Child welfare workers are overwhelmed with large caseloads that prevent them from investing the time and energy required to build meaningful relationships with children and families, understand their needs and work collaboratively towards solutions. Many reports recommend reducing the caseloads of workers to allow them to focus more on each family they work with[89]. Only one report specified the maximum number of cases that should be assigned to each worker[90]. As recommended by the report Enabling First Nations Children to Thrive, a study must be undertaken to assess case complexity to determine appropriate caseloads in various community contexts[91].

Other strategies to manage the workload of child support workers included reducing their administrative burden by updating technology and data management systems,[92] and increasing funding for the hiring of administrative support staff[93]. Several reports also recognized that workers require additional time with supervisors to seek support and consult on challenging cases[94]. The One Vision One Voice report recommends that supervision be used to support engagement in critical reflective practice and to challenge staff's biases using an anti-Black racism lens[95]. Consultation with supervisors as well as peers and interdisciplinary teams represent important occasions for child welfare workers to deepen their understanding of the challenges faced by families and to contemplate minimally invasive solutions.

> *"Support mentorship of staff by supervisors through critical reflective practice. Use supervision meetings to increase staff understanding of disproportionality and disparities as well as anti-racism / anti-oppressive practice, with a focus on anti-Black racism."*
>
> - One Vision One Voice: Changing the Ontario Child Welfare System to Better Serve African Americans, 2016[96]

To support the well-being of their clients, workers' well-being must also be taken seriously. Workers who are struggling with work-related challenges such as vicarious trauma, burnout, and moral distress do not have the capacity to build strong connections with families. The structural issues experienced by families can also impact the well-being of professionals with whom they are engaged, and therefore the way these issues impact workers' well-being requires careful consideration[97].

CHILD WELFARE AGENCIES

Increase the number of workers whose sole purpose is to support the well-being of families. (2 reports, 2008-2009)

Two reports recommend increasing the number of workers whose sole role is to provide family support. It is challenging for child welfare workers to establish trusting and cooperative relationships with caregivers when workers are also responsible for surveilling families and making decisions about their children. Given their dual role as service providers and investigators, child welfare workers often find themselves in an adversarial position vis-a-vis caregivers[98]. Caregivers, who are aware of the power that child welfare workers have over them and their children, may be reluctant to cooperate with workers as a result. Some of the reports we reviewed recommended that by increasing the number of staff who engage with families solely in a supportive capacity, child welfare agencies could promote the establishment of more trusting and cooperative relationships with their clients[99]. Workers themselves understand that the services they are able to offer presently are insufficient given the challenges their clients are facing, leading to moral distress. Freeing up workers to spend more time building relationships with and supporting families will also improve their working conditions and well-being.

> *"We recommend the infusion of workers to the system to provide supportive and preventative services as described in the section of this report on differential response"*
>
> - Strengthen the Commitment: An External Review of the Child Welfare System, 2009[100]

Promising practice: Integrated Service Delivery

An Integrated Service Delivery (ISD) model promotes the delivery of wraparound services to children and families facing individual and structural challenges[101]. In an ISD framework, interdisciplinary service teams from various agencies pool their expertise and resources to enhance the quality and continuity of care. Service delivery partners work together using common case plans, and sharing information, responsibilities and decisions, to seamlessly deliver programs that promote holistic child and family well-being[102].

Current support for youth and families involves a patchwork of services. With their individual intake procedures and eligibility requirements, these services can be challenging and time consuming to navigate[103]. In an ISD framework, the responsibility for service navigation is shifted from the family to the integrated service team[104]. Services are available to all families, and their nature and intensity is adjusted to meet each family's needs as they evolve over time.

ISD is a strengths-based and collaborative framework. Service teams cooperate with children

Promising practice: Integrated Service Delivery continued

and families to cultivate a shared understanding of their strengths and challenges, and to develop care plans[105]. The ISD framework is also culturally responsive and adaptable to each community where a service team is located. Through partnership with Indigenous communities and service providers, ISD can be adapted to reflect Indigenous approaches to well-being[106]. It also allows for co-delivery of services by Indigenous and non-Indigenous agencies.

In ISD model was introduced in New Brunswick beginning in 2010 to address gaps in youth mental health services[107]. A 2017 report on the implementation process found that the ISD framework resulted in greater cohesion and flexibility within and among service agencies, in the interest of effectively addressing youth and families confronted with mental health concerns. Wait times for mental health services drastically decreased, and the number of youth receiving treatment increased significantly. Both caregivers and children reported high levels of satisfaction with the services they received from integrated teams. An ISD service framework has also been applied to address child and youth mental health and substance use needs in British Columbia since 2019.

Applying an ISD framework to child welfare is an opportunity to strengthen families by delivering holistic services to address the root causes underlying neglect. An interdisciplinary approach to family well-being would allow child welfare agencies and their service delivery partners to fulfill unmet material and service needs expertly and expediently, and to smoothly transition families between services as their needs evolve.

THEME 5: REIMAGINE "HEALTHY FAMILIES" THROUGH A STRENGTHS-BASED AND CULTURALLY-RESPONSIVE LENS

The mainstream child welfare system generally takes a "one-size-fits-all" approach to defining what constitutes good parenting and what constitutes maltreatment. The assumption that these look the same across cultural, economic and social contexts results in the misattribution of the label "neglectful" to competent caregivers whose childrearing ways simply diverge from the norms by which child welfare workers render their judgements. To move beyond neglect, child welfare policies, agencies and workers must expand their understanding of what a healthy family looks like and embrace diverse ways of raising, nurturing and loving children.

GOVERNMENTS

Amend child welfare legislation to recognize culturally diverse approaches to caregiving, in particular traditional Indigenous caregiving practices. (6 reports, 2016-2019)

Child welfare workers and agencies are bound to act in the "best interests" of children, but how these best interests are defined reflects culturally-specific values and beliefs[108]. Several of the reports we reviewed recommend amending child welfare statutes to reflect a broader understanding of family and recognize the validity of culturally diverse caregiving practices[109]. This includes explicitly recognizing the value of First Nations, Inuit and Métis approaches to caregiving, and adopting a definition of "best interests" of the child that aligns with Indigenous traditions and worldviews[110]. Some reports state that policies should reflect the fact that the well-being of First Nations, Inuit and Métis children is contingent on their connection of extended family, community, and culture[111]. As the report *Transforming Child Welfare in Manitoba* states, the best interests that guide child welfare decision making should be based on the values of each child's own community[112]. This requires child welfare policies that are flexible and empower child welfare workers to adapt their assessment criteria according to cultural context.

> *"The Government of Alberta should review the child welfare legislation for the Aboriginal context by: A. Respecting the right of Aboriginal families to their own approaches for raising children and recognizing these approaches for their inherent strengths."*
>
> - Voices for Change: Aboriginal Child Welfare in Alberta, 2016[113]

CHILD WELFARE AGENCIES

Adopt assessment tools that are holistic, strengths-based, trauma-informed and culturally responsive. (9 reports, 2008-2019)

Child welfare agencies should also adapt their assessment protocols such that they are flexible and adaptable enough to capture the experience of a family through the lens of the family's own cultural reality[114]. The current use of actuarial risk assessment tools reflects a belief that a single evaluation framework can capture the experiences of all Canadian families. Using these tools, child welfare agencies assess all families according to the same standards, regardless of whether those standards accord with the cultural and historical context of those families. The use of standardized risk assessment tools in child welfare discriminates against Indigenous peoples and other cultural minorities[115], while obscuring the assumptions and biases that permeate the assessment process by creating the appearance of objectivity[116]. Several of the

reports we reviewed recommend that assessment tools be adapted to be consistent with First Nations, Inuit and Métis worldviews and to recognize the validity of culturally-specific caregiving practices in Indigenous and other communities[117]. It is important that these tools differentiate between caregiving practices that put a child in real danger, and ones which simply do not align with the values of the mainstream child welfare system.

> *"[The Ministry for Children and Family Development] should work with community-based groups to develop safety and risk assessment tools that are adapted in order to recognize the unique cultures and ways of life of Indigenous communities across [British Columbia]."*
>
> - Pathways in a Forest: Indigenous Guidance on Prevention-Based Child Welfare, 2019[118]

In order to plan interventions, child welfare workers rely on their assessments to generate a representative picture of the risk and resiliency factors experienced by a family. It is critical that the root causes and circumstances that contribute to neglect, namely unmet material and service needs, be considered among these factors. However, the assessment tools employed by mainstream child welfare agencies generally take a myopic view of the family unit, failing to include structural factors in their frame of analysis despite the role they play in contributing to or buffering against neglect. The reports we reviewed recommend that child welfare agencies replace these tools with holistic approaches to assessment that consider not only the family system, but the surrounding and intersecting social, cultural and economic systems that shape children's lives.

Child welfare agencies should also embrace a strengths-based approach to assessment. Current approaches to assessment are generally deficit-focused - they center a family's problems and shortcomings. In one report, mothers noted that they felt as though child welfare assessments focused heavily on the negative, without granting equal consideration to their strengths or ability to cope with challenging circumstances[119]. Workers should be encouraged to recognize the strengths and resilience of families in keeping their children safe, in spite of challenges such as poverty, poor housing, trauma and mental illness. They should celebrate these families' successes and progress, rather than focusing solely on deficits. Understanding the coping strategies, skills and resources that contribute to these families' resilience is a critical aspect of assessment[120]. They are protective factors that buffer against the escalation of neglect-related concerns. If child welfare workers identify these strengths in their assessments, they can be leveraged and built upon to keep children safe at home.

CHILD WELFARE WORKERS

Recognize the validity and value of culturally diverse caregiving practices. Acknowledge that mainstream ideas about "good" parenting are biased and do not reflect the diversity of families (in particular families with Indigenous, Black and 2SLGBTQ+ caregivers). (3 reports, 2006-2018)

It is also important for child welfare workers to adapt the way they conduct their assessments according to the cultural and social contexts of their clients. Workers can begin by cultivating a critical self-awareness and introspecting on how their personal and professional experiences shape their understanding of what constitutes "good" parenting and "neglect". As the *One Vision One Voice* report states, workers need to interrogate their own biases through an anti-racist lens with the support of their supervisors[121]. Workers should also reflect on the position of power they occupy relative to the families they work with and how this power imbalance influences their assessments[122]. When completing assessments, they must ask themselves whether any culturally- or context-specific caregiving practices they observe are actually harmful to a child, or if they merely clash with the ideals that they or the mainstream child welfare system hold. When caregivers practice parenting rooted in their own cultural values and traditions, child welfare workers should recognize this as a strength, not a risk factor.

> *"Indigenous ways of knowledge must be given full credence when child welfare work is carried out with Indigenous children, youth, and their families, and Indigenous interventions used as a first priority."*
>
> - Reconciliation in Child Welfare: Touchstones of Hope for Indigenous Children, Youth, and Families, 2006[123]

CHILD WELFARE WORKERS

Take a broad view of the caregiving system when completing assessments and establishing care plans. (1 report, 2018)

Assessments and interventions in mainstream child welfare reflect a belief in the "primacy of parental responsibility"[124] - the idea that caregiving responsibilities should be fulfilled entirely by a child's parents. As a result, they can fail to accurately capture the strength and breadth of a child's caregiving network. For Indigenous peoples, the community, not just the biological parents, plays an important role in raising children[125]. The report *Voices for Change* states that "Aboriginal children may have many different homes in a community from time to time, and the community collectively ensures that children are looked after"[126]. Risk assessments may result in parents being labeled as negligent because they render a significant portion of a child's care-

giving system invisible. It is therefore important that child welfare workers expand their lens to include any family and community members that play an important role in caring for a child. Workers should recognize the interdependence of the family and community system in raising Indigenous children as a strength that buffers against neglect, not a risk factor for it. When assessing for neglect and establishing service plans, workers should consider the involvement of anyone who plays a role in the physical, emotional, developmental, and spiritual care and growth of the child, including extended family and community members.

> *"...The concept of family needs to be broadened beyond biological ties, and include a child's "family of choice," which includes persons who are considered to be a close relative, whether or not they are related by blood."*
>
> - Transforming Child Welfare in Manitoba: Opportunities to Improve Outcomes for Children and Youth, 2018[127]

CHILD WELFARE WORKERS

Acknowledge that caregivers are the experts on their own families. Wherever possible, work collaboratively with them to identify the challenges their families are facing, explore solutions, and build on strengths to support their children's well-being. (2 reports, 2016-2018)

As discussed above, caregivers sometimes perceive child welfare workers as their adversaries, given the power and authority they wield, making it challenging to work together towards improving children's well-being. It is important that child welfare workers take the view that caregivers have their children's best interests in mind. Workers should imagine their relationships with caregivers as collaborative partnerships, with the caregiver as the expert on the family and the worker as a resource to build upon families' existing strengths and skills. Child welfare workers should invest in establishing open and trust communication with client families and seek out their perspectives on their strengths and challenges. These perspectives should be reflected in workers' assessments and service plans.

> *"Adopt a methodology of restorative practice to promote family participation in decisions that affect them, including family assessment, case planning and child placement."*
>
> - Walking as One: Ministerial Panel on Child Intervention's Final Recommendations to the Minister of Children's Services, 2018[128]

Promising practice: Signs of Safety

Signs of Safety (SOS) is an intervention model developed in Australia in the 1990s that combines ideas from brief therapy with child protection practice[129]. SOS is a collaborative, strengths-based model which aims to build upon existing periods of safety, while also identifying and mitigating any risk factors in a child's environment. A core tenant of SOS is the partnership between the child welfare worker and family, who work as a team to keep children out of harm's way.

At the center of the SOS process is an assessment and planning protocol that consists of three questions: What are we worried about? What's working well? What needs to happen? These questions are used to explore what is placing the child at risk and what strengths and resources the family has to mitigate these risks, and to set goals for the future that build on these strengths. Importantly, a clear distinction is drawn between past harm and future danger. Caregivers are not pathologized or punished for past behavior, but given opportunities to demonstrate their ability to keep children safe at home with the right supports. The family group works alongside the child welfare worker to establish a safety plan that is feasible, responds to their circumstances, and satisfies child welfare requirements.

As is the case in Family Group Conferencing, the assessment process in SOS involves all stakeholders, including family and community members and professionals[130]. It maps the circumstances surrounding a child, considering not only the immediate family, but other members of the child's ecosystem that contribute to the child's safety or vulnerability. The child is also included in the assessment process through developmentally appropriate activities that support them in making sense of the SOS proceedings, voicing their opinion and understanding the safety plan. The SOS assessment is not seen as a one-off event, but rather a dynamic and ongoing process that can be revisited as necessary to promote continuous growth.

To date, SOS been successfully implemented in several Canadian jurisdictions. One year after the program's roll out at the Children's Aid Society of Toronto, findings indicated that SOS led to increased client and worker satisfaction. A five-year, province-wide implementation plan is also underway in Alberta. Two of the reports we reviewed noted the suitability and adaptability of SOS as a model for child welfare engagement with Indigenous families[131]. Following the 2008 implementation of SOS at Ktunaxa Kinbasket Child and Family Services, a mandated Indigenous child welfare agency in the Kootenay region of British Columbia, the agency saw a significant decrease in children entering care, and a reduced number of child protection re-notifications[132]. In Inuit communities where it has been implemented, the strengths-based, harm reduction approach of SOS has proven an effective lens for understanding the impacts of intergenerational trauma and working with families' natural support systems to address safety concerns[133].

THEME 6: PROVIDE MARGINALIZED COMMUNITIES THE RESOURCES REQUIRED TO RESPOND TO AND PREVENT NEGLECT AND PROMOTE FAMILY WELL-BEING

GOVERNMENTS

Partner with communities, particularly Black and Indigenous communities, and those with lived experience in the child welfare system, in making decisions on any policy and programming changes that will affect them. (6 reports, 2016-2019)

Given the overrepresentation of marginalized groups including racialized and Indigenous communities in the child welfare system and in neglect-related cases in particular, it is critical that voices representing these communities be heard on any changes[134]. Policy makers must open lines of communication to understand these communities' needs, challenges, and experiences with the child welfare system. As it is these communities who have been most harmed by the child welfare system to date, six reports recommend that representatives be consulted on any policy and programmatic changes to ensure their interests are reflected moving forward. Discussions with First Nations, Inuit and Métis communities in particular should take the form of nation-to-nation partnerships, as Grand Chief Ed John states in the report *Indigenous Resilience, Connectedness, and Reunification*[135]. Policy makers should reach out to leaders and Elders to initiate these discussions, and should ensure that they include Indigenous women, LGBTQ2S people, and people with disabilities in their outreach, as the *Report on Children and Families First* states[136]. It is also important that decisions about child welfare involve young people. Youth, particularly current and former youth in care and Indigenous youth, should have a seat at the table when it comes to decisions that impact them. At the individual case and policy level youth should be granted the opportunity to express what it means to them to have a healthy family, and what good and neglectful caregiving looks like from their perspective.

> "Ensure First Nation, Métis and Inuit peoples and communities have opportunity and adequate resources for meaningful participation in developing culturally relevant policy and legislation to serve and care for their children"
>
> - Walking as One: Ministerial Panel on Child Intervention's Final Recommendations to the Minister of Children's Services, 2018[137]

GOVERNMENTS

In recognition of Indigenous nations' inherent sovereign right to oversee child welfare services in their own communities, support and fund Indigenous communities in developing child welfare services. (10 reports, 1992-2019)

Many of the reports reviewed made recommendations related to Indigenous control and delivery of child welfare services in Indigenous communities. As self-determining nations, many reports state, First Nations, Inuit and Métis peoples have an inherent sovereign right to oversee their own child welfare services. Some specify that the right to deliver child welfare services to Indigenous children extends to those living on and off reserve[138], and those with and without status[139]. A plan should be established to transfer full jurisdiction over Indigenous child welfare to all Indigenous communities who wish to assume this responsibility[140]. This plan should be a joint undertaking of policy makers, mainstream child welfare agencies, and Indigenous governments and leadership.

The transition to Indigenous control of child welfare services must be accompanied by sufficient support and equitable funding. As discussed earlier in this report, services for Indigenous youth are drastically underfunded. The shift to community control of Indigenous child welfare must include provision of adequate resources for the undertaking of service provision that responds to the cultural, social and geographic circumstances of each community. Funding must, as some of the reports we reviewed stipulate, extend to prevention/early intervention efforts and programs that promote family well-being.

> *"We call upon on all governments, including Indigenous governments, to transform current child welfare systems fundamentally so that Indigenous communities have control over the design and delivery of services for their families and children. These services must be adequately funded and resourced to ensure better support for families and communities to keep children in their family homes."*
>
> - Reclaiming Power and Place: Final Report of the National Inquiry into Missing and Murdered Indigenous Women and Girls, 2019[141]

GOVERNMENTS

Provide sustainable funding for community-based, culturally responsive prevention and family support programs in Indigenous, Black, and other marginalized communities. (6 reports, 1992-2019)

Just as caregivers and children know their families' strengths and challenges best, communities hold the knowledge and tools to respond to their own challenges, though they may lack the resources to mobilize these assets. Many of the reports we reviewed recommended governments increase funding to First Nations, Inuit and Métis communities for delivery of culturally specific prevention and well-being programs[142]. Governments must establish sustainable funding streams for community-driven programs in Indigenous, Black, and other marginalized communities that respond to the problems underlying neglect, including intergenerational trauma, substance misuse, and mental illness. Funding should be provided to Indigenous communities for supports outside of the formal child welfare system, such as land-based activities and cultural and linguistic programming[143].

> *"Aboriginal Nations and communities must have the ongoing financial resources to implement a wide range of preventative services that are wholistic and unfragmented. The services must be available in a culturally appropriate manner, as determined by the specific Aboriginal Nation or community, and delivered by people from that community."*
>
> - Liberating Our Children – Liberating Our Nation, 1992[144]

CHILD WELFARE WORKERS

Ensure that child welfare staff reflect the diversity of service users. (8 reports, 2010-2019)

Child welfare workers who share their clients' cultural and social experiences are uniquely positioned to understand clients' experience and establish an effective working relationship. In addition to training all staff to be more culturally responsive, eight reports recommend that child welfare agencies undertake efforts to increase the proportion of their staff who identify as Black, Indigenous, and people of colour (BIPOC). Several of the reports point out that increasing the number of BIPOC child welfare workers will require agencies and policy makers to encourage BIPOC individuals to enter the field and to address barriers to entry including facilitating access to educational programs[145]. The report *One Step Forward, Two Steps Back* also recommends redefining the job qualifications for Indigenous candidates to take into account community experience outside mainstream institutions[146]. Other changes are required at child welfare agencies to allow BIPOC workers to thrive and eliminate barriers to their full participation. Recommendations from the reports we reviewed include cluster hiring for BIPOC staff so they are able to support one another[147] and addressing aspects of organization culture that prohibit staff from advocating for change[148]. It is important that BIPOC staff be represented among workers interfacing directly with service users, but also at all levels of child welfare agencies, including leadership. Some of the reports we reviewed recommended programs, such as peer mentor-

ship, to promote the advancement of BIPOC staff to leadership roles.

> *"Implement an Employment Equity Program that is consistent with the requirements of the federal Employment Equity Act, to ensure that the organization is reflective of the diversity of service users and that barriers to their hiring, advancement, and full participation in the agency are identified and removed."*
>
> *- One Vision One Voice: Changing the Ontario Child Welfare System to Better Serve African Canadians, 2020*[149]

Promising practice: Native Child and Family Services of Toronto

Native Child and Family Services of Toronto (NCFST) is a multi-service agency with the mandate of decolonizing child welfare[150]. NCFST's approach to service delivery is trauma-informed and grounded in an Indigenous worldview. Through its holistic wraparound services, NCFST aims to "parent the parent", providing support and resources to help caregivers keep their children safe at home.

NCFST recognizes that a mainstream definition of neglect may not be an appropriate lens through which to assess its client families. The agency centers culturally specific Indigenous caregiving ways and workers are trained to conduct assessments through an Indigenous lens. They are also encouraged to consider the colonial legacy of child welfare intervention in Indigenous communities and its ongoing impact on caregiving capacity.

In addition to its child welfare mandate, NCFST provides preventative and early intervention services to promote family well-being and preservation. In fact, approximately half of the agency's budget is devoted to prevention programming and holistic services[151]. These programs and services include individual and family counselling, a Head Start program and childcare centers, and housing support[152]. Healing programs for children and caregivers experiencing mental health challenges, substance misuse, and intergenerational and complex trauma are also available. These services are centered in the knowledge that culture is healing. The agency also supports access to land-based practices, medicines, and ceremonies. As a multi-disciplinary agency, NCFST can easily refer families to the programs needed to address any unmet material and service needs underlying neglect-related concerns in a culturally and trauma-sensitive manner.

All of NCFST's programming is part of a culture-based service model developed through

Promising practice: Native Child and Family Services of Toronto continued

ceremony by Elders, Knowledge Keepers, and community leaders[153]. Half of the agency's staff self-identify as Indigenous, and training for all staff is grounded in cultural teachings[154]. Through their work in child welfare and family wellbeing, NCFST centers Indigenous values and knowledge and advances self-determination for children and families.

Conclusion – Moving Beyond Neglect

The reports we reviewed, in combination with our Beyond Neglect webinars and conversations with stakeholders and advocates, represent 30 years of calls from across the child welfare field to change the way neglect is addressed. In taking up the recommendations we present here, policy makers, child welfare agencies and workers can address the root causes of neglect by going to the heart of this problem – the well-being of families. By transitioning from a threshold-based, adversarial model of child welfare policy and practice to an integrated, prevention-focused and culturally responsive approach, we can go beyond neglect and help ensure that the material, emotional, and developmental needs of young people are fulfilled, and all families are lifted up.

The outstanding recommendations highlighted in this report address some of the problems associated with current approaches to neglect more thoroughly than others. Although we conducted an extensive review of the literature on neglect, there were some questions which we found were not adequately addressed in the materials we uncovered. Many of the communities who are overlooked or harmed by child welfare policy and practice - Black and racialized families, immigrant families, and people who struggle with substance misuse or mental illness – are also not mentioned in most of the reports we reviewed. Next steps should include creating opportunities to hear voices from these communities on how current approaches to neglect and child welfare fail them. Implementation of the recommendations in this report will also require that policy makers, child welfare agencies and workers engage in dialogue with their clients and communities to determine how to apply the recommendations in their unique context.

To support implementation of the recommendations in this report, we have produced three summaries which contain the calls to policy makers, child welfare agencies, and child welfare workers respectively. These summaries and additional information about the Beyond Neglect project are available on the CWLC's website.

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