



2023-2024 Annual Report

Director of Child and Family Services

2023-2024 Rapport Annuel

Directrice des services à l'enfance et à la famille

Le présent document contient un sommaire en français

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French

Kīspin ki nitawihitīn ē nīhīyawihk ōma ācimōwin, tipwāsinān.
Cree

Tɿɿchɔ yati k'èè. Di wegodi newɔ dè, gots'o goneɗe.
Tɿɿchɔ

ʔerihł'is Dēne Sųłiné yatı t'a huts'elkēr xa beyáyatı theɁ Ɂat'e, nuwe ts'ēn yółti.
Chipewyan

Edi gondi dehgáh got'je zhatié k'ée edati'éh enahddhę nide naxets'é edahli.
South Slavey

K'áhshó got'jne xədə k'é hederı ɬedjhtl'é yerınıwę nídé dúle.
North Slavey

Jii gwandak izhii ginjik vat'atr'ijahch'uu zhit yinothtan ji', diits'at ginokhii.
Gwich'in

Uvanittuaq ilitchurisukupku Inuvialuktun, ququagluta.
Inuvialuktun

Inuktitut

Hapkua titiqqat pijumagupkit Inuinnaqtun, uvaptinnut hivajarlutit.
Inuinnaqtun

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Message from the Territorial Executive Director of Child and Family Services

October 1, 2024



The Honourable Lesa Semmler
*Minister of Health and Social Services
Government of the Northwest Territories*

Dear Minister Semmler,

I am pleased to provide you with the 2023-2024 Annual Report of the Director of Child and Family Services (CFS).

The Annual Report provides a detailed summary of CFS supports and services that are available to children, youth, and families in the Northwest Territories (NWT). The Report also highlights trends that can help to identify key areas where the CFS system can be improved, and where there have been positive and meaningful changes.

It is important to acknowledge that the data included in this report reflects the lived experiences of children, youth, and families in the NWT. In this light, the Annual Report will continue to be used as an important pathway towards a more culturally safe CFS system – a system that promotes family unity and provides support to children and youth in ways that promote their overall safety and wellbeing, while honouring their culture and heritage.

Throughout the upcoming year, guided by the Child, Youth and Family Services Strategic Direction and Action Plan, I look forward to continuing to improve service delivery by building on the actions taken to engage and collaborate with Indigenous governments and other partners, the continued enhancement of prevention services, and changes to practice that promote children and youth's connection to family, community, and culture.

I would like to extend my gratitude to the CFS staff, caregivers, care providers, community partners, and community leaders for their commitment to the wellbeing of children, youth, and their families. Lastly, I would like to thank Colette Prevost for her passion, dedication, and many contributions to the CFS system during her time as the Territorial Executive Director over the past five years.

Sincerely,

Arijana Haramincic

*Territorial Executive Director of Child and Family Services
(Statutory Director)*

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Acronyms

CFS	Child and Family Services
CFSA	<i>Child and Family Services Act</i>
CSAR	Cultural Safety and Anti-Racism
CSSW	Community Social Services Worker
CWLC	Child Welfare League of Canada
Department	Department of Health and Social Services
ESSA	Extended Support Services Agreement
Federal Act	<i>Federal Act respecting First Nations, Inuit and Métis children, youth, and families</i>
GNWT	Government of the Northwest Territories
HRHSSA	Hay River Health and Social Services Authority
IAB	Indigenous Advisory Body
NTHSSA	Northwest Territories Health and Social Services Authority
NWT	Northwest Territories
POCA	Plan of Care Agreement
SCOSD	Standing Committee on Social Development
SDM	Structured Decision Making®
SSA	Support Services Agreement
Statutory Director	Statutory Director of Child and Family Services
TCSA	Tłı̨chǫ Community Services Agency
VSA	Voluntary Services Agreement

Executive Summary

The 2023-2024 Annual Report of the Director of Child and Family Services (CFS) provides a detailed summary of services delivered in the Northwest Territories (NWT) between April 1, 2023, and March 31, 2024. Services include adoption services, family preservation, prevention supports, and protection services, which are available and provided to each of the 33 communities in the NWT.

Information within the report provides an opportunity for NWT residents to see the types of supports and services delivered through CFS. This report also highlights trends that can help to identify key areas where the CFS system can be improved, and where there have been positive and meaningful changes.

In 2023-2024, 1,067 children and youth received either prevention and/or protection services through CFS. Seventy-six percent (76%) of these children/youth remained in their family of origin home. During the same period, 61% of Indigenous children/youth who required support outside their home were living with an Indigenous caregiver.

Prevention services represented 51% of the services delivered through CFS. The Family Preservation Program served 112 families and 32 youth during 2023-2024. During the same period, 22 of 26 adoptions in the NWT were custom adoptions.

Over the past five years, 79% of young persons (33) in the permanent custody of the Director signed an Extended Support Services Agreement when they reached the age of majority. This voluntary agreement provides additional support (financial and non-financial), service navigation, and connections to other supports/services to young people as they transition to adulthood.

In 2023-2024, for the first time in five years, the number of children and youth receiving Out-of-Territory specialized services with their families surpassed the number of children and youth in the individual/group

An important context to this report is that several communities were evacuated due to floods and wildfires between May 2023 and September 2023.

In August 2023, an unprecedented level of evacuations due to wildfires caused almost 70% of NWT residents to be displaced from their homes, with most residents being displaced outside the NWT. Regardless of their geographical locations, the NWT CFS system continued to provide services to children and youth with existing care statuses under the NWT *Child and Family Services Act* (CFSA). The Department of Health and Social Services worked closely with provincial counterparts to provide support and coordinate response to any child protection matters if required. The Health and Social Services Authorities assumed a lead role in the development, implementation, and coordination of services and supports to children, youth, and families throughout the duration of the evacuations.

treatment program. This is noteworthy because family treatment is a more holistic approach that promotes family connectedness and preservation, which moves the CFS system towards cultural safety.

Despite these positive trends, the data continues to reveal areas that require our collective attention and highlights the importance of integrating services beyond CFS to better serve children, youth, and families. Financial and housing insecurity are two of the most common reasons why families and youth are requesting voluntary services.

In 2023-2024, 99% of children and youth receiving CFS identified as Indigenous (either First Nations, Inuit, or Métis), despite only representing 57% of the overall child/youth population in the NWT.

In March 2024, the vacancy rate for the CFS workforce was 24.7%. Twenty-eight (28%) of the CFS workforce identified as Indigenous. Creating a workforce that is representative of the children, youth, and families that we serve is a priority for CFS, along with addressing the high rates of vacancies and staff turnover.

In October 2023, the Child, Youth and Family Services Strategic Direction and Action Plan (2023-2028) was released to fundamentally shift the CFS system towards a culturally safe system. The Action Plan is intended to help address the overrepresentation of Indigenous children and youth in prevention and protection services.

Progress on key actions between 2023-2024 includes:

- Increased daily rates for foster care and adoption subsidies, effective retroactively from March 1, 2024.
- Piloted a cultural wellness camp for youth with complex needs in November and December 2023. The pilot project included two 14-day camps for youth aged 12-18 years followed by three months of individualized, community-based after care support.
- Tailored existing Cultural Safety and Anti-Racism (CSAR) Training to address harmful historical and current CFS policies that contribute to anti-Indigenous racism and systemic barriers. Delivered in November 2022 and November 2023.
- Launched a Working Group titled “Care Rooted in Indigenous Practices” in February 2024 to guide the “Redesigning of Care Models” initiative.
- Piloting two Family, Community, and Culture Connection Worker positions to work directly with families and inform the development of the Family, Community, and Culture Connection project.

- Participating in the Child Welfare League of Canada's pilot project to support equitable transitions to adulthood for youth in care.
- Sent letters in January 2024 to Indigenous governments across the NWT, inviting them to nominate additional Custom Adoption Commissioners to support and enhance cultural, community, and regional representation.

An online progress tracker is being launched in July 2024 to remain accountable and transparent in the implementation of the Action Plan. This Annual Report provides more detailed status reporting on key initiatives as well as service level trends. To better understand the extent to which the Action Plan is meeting its intended medium-term outcomes, the following measures were added to this Annual Report:

- Representation of Indigenous employees in the CFS Workforce
- Vacancy and turnover rates for employees in the CFS Workforce
- Rate of Indigenous children/youth requiring protection services

In addition to the Action Plan, amendments to the NWT *Child and Family Services Act* (CFSA) are underway, to support the transformation of the CFS system. The Standing Committee on Social Development initiated their review of the CFSA during the 19th Legislative Assembly. The results of the Department's public engagement on the proposed amendments were posted online in the form of a *What We Heard Report* on May 2, 2023. The proposed amendments, which will be introduced in the House during the 20th Legislative Assembly, align with the federal *Act respecting First Nations, Inuit and Métis children, youth, and families*.

It is important to acknowledge that data reflects the lived experiences of children, youth, and families in the NWT. The way information is analyzed and presented is a powerful tool in countering deficit narratives by refocusing on required structural changes¹. CFS is committed to being a good custodian of data about children, youth, and families by creating pathways to include them in decisions about CFS programs and services that directly impact their lives and communities.

¹British Columbia's Office of the Human Rights Commissioner. (2020). Disaggregated demographic data collection in British Columbia: The grandmother perspective. Retrieved from: https://bchumanrights.ca/wp-content/uploads/BCOHRC_Sept2020_Disaggregated-Data-Report_FINAL.pdf.

Sommaire

Le Rapport annuel 2023-2024 de la directrice des Services à l'enfance et à la famille (SEF) présente un résumé détaillé des services fournis aux Territoires du Nord-Ouest (TNO) entre le 1^{er} avril 2023 et le 31 mars 2024. Parmi ceux-ci, on compte les services d'adoption, les services de préservation des familles, les services de soutien à la prévention et les services de protection, qui sont accessibles et fournis dans chacune des 33 collectivités des TNO.

L'information contenue dans ce rapport permet aux résidents des TNO de voir les types de soutiens et de services offerts par l'entremise des SEF. Le rapport met également en lumière les tendances au niveau des services qui peuvent aider à déterminer les aspects clés du système des SEF à améliorer ainsi que ceux qui ont connu des changements positifs et significatifs.

En 2023-2024, 1 067 enfants et jeunes ont reçu des services de prévention ou de protection par l'intermédiaire des SEF. Soixante-seize pour cent de ces enfants et jeunes vivent encore chez eux. Durant cette même période, 61 % des enfants et des jeunes autochtones qui avaient besoin d'un soutien en dehors de leur foyer familial vivaient avec un aidant autochtone.

Les services de prévention ont représenté 51 % de tous les services offerts par les SEF. Le Programme de préservation des familles a aidé 112 familles et 32 jeunes en 2023-2024. Durant cette même période, 22 des 26 adoptions réalisées aux TNO étaient des adoptions selon les coutumes autochtones.

Au cours des cinq dernières années, 79 % des jeunes (33) placés de façon permanente ont signé un accord de services de soutien étendu à l'âge de leur majorité. Cet accord volontaire offre aux jeunes adultes un soutien additionnel (financier et non financier), des services d'orientation, et des liens vers d'autres services ou soutiens pendant leur transition vers l'âge adulte.

Ce rapport tient compte d'un contexte important, à savoir que plusieurs collectivités ont été évacuées entre les mois de mai et de septembre 2023 en raison d'inondations et de feux de forêt. En août 2023, un nombre inédit d'évacuations dues aux feux de forêt a entraîné le déplacement de 70 % des Ténos qui, non seulement ont dû quitter leur domicile, mais également les TNO pour la plupart d'entre eux. Dispersés géographiquement, les membres du système des SEF des TNO ont continué d'offrir des services aux enfants et aux jeunes ayant été pris en charge en vertu de la *Loi sur les services à l'enfance et à la famille* des TNO. Le ministère de la Santé et des Services sociaux a travaillé en étroite collaboration avec ses homologues provinciaux pour offrir du soutien et coordonner son intervention dans les dossiers de protection de l'enfance, au besoin. Les administrations des services de santé et des services sociaux ont joué un rôle de chef de file dans l'élaboration, la mise en œuvre et la coordination des services et du soutien offerts aux enfants, aux jeunes et aux familles, tout au long des évacuations.

En 2023-2024, pour la première fois en cinq ans, le nombre d'enfants et de jeunes bénéficiant de services spécialisés hors du territoire en compagnie de leur famille a dépassé le nombre d'enfants et de jeunes inscrits au programme de traitement individuel ou en groupe. Ceci est digne de mention puisque le programme de soutien familial adopte une approche plus holistique qui favorise les liens familiaux et la préservation des familles, permettant au système des SEF de se rapprocher de la notion de respect de la culture.

Malgré ces tendances positives, les données continuent de mettre en évidence des problématiques qui requièrent notre attention collective et soulignent l'importance d'intégrer les services au-delà des SEF de manière à mieux servir les enfants, les jeunes et les familles. L'insécurité liée aux finances et celle liée au logement sont deux des causes les plus fréquentes pour lesquelles les familles et les jeunes font d'eux-mêmes appel à des services de soutien.

En 2023-2024, 99 % des enfants et des jeunes bénéficiant des SEF étaient des Autochtones (Premières Nations, Inuit ou Métis), bien qu'ils ne représentent que 57 % de la population globale d'enfants et de jeunes aux TNO.

En mars 2024, le taux de postes à pourvoir dans le système des SEF était de 24,7 %. Vingt-huit pour cent du personnel des SEF s'identifient comme autochtones. La création d'une main-d'œuvre représentative des enfants, des jeunes et des familles que nous servons est une priorité pour les SEF, tout comme de s'attaquer aux hauts taux de postes vacants et au roulement élevé du personnel.

En octobre 2023, l'orientation stratégique et plan d'action 2023-2028 des services aux enfants, aux adolescents et aux familles a été publié pour réorienter fondamentalement le système des SEF vers un système respectueux de la culture. Ce plan d'action vise à s'attaquer à la surreprésentation des enfants et des jeunes autochtones au sein des services de prévention et des services de protection.

Progrès concernant les principales mesures entre 2023 et 2024 :

- Augmentation des allocations quotidiennes pour les foyers d'accueil et les adoptions subventionnées, avec effet rétroactif à partir du 1er mars 2024.
- Mise à l'essai d'un camp de mieux-être culturel pour les jeunes ayant des besoins complexes en novembre et en décembre 2023. Ce projet pilote comprenait deux camps de 14 jours pour les jeunes de 12 à 18 ans, suivis de trois mois de soutien individualisé et communautaire après le camp.
- Adaptation de la formation de deux jours sur le respect des valeurs culturelles et la lutte contre le racisme pour aborder les politiques actuelles et passées des SEF qui ont contribué à alimenter le racisme à l'égard des Autochtones et les obstacles systémiques. Cette formation a été offerte en novembre 2022 et en novembre 2023.
- Lancement en février 2024 d'un groupe de travail intitulé « Fournir des soins ancrés dans les pratiques autochtones » pour guider l'initiative « Redesigning of Care models » (Refonte des modèles de soins).

- Création de deux postes pilotes d'agent de liaison familiale, communautaire et culturelle pour travailler directement avec les familles et contribuer au développement du projet de liaison familiale, communautaire et culturelle.
- Participation au projet pilote de la Ligue pour le bien-être de l'enfance du Canada visant à soutenir des transitions équitables vers l'âge adulte pour les jeunes pris en charge.
- Envoi de lettres en janvier 2024 aux gouvernements autochtones de l'ensemble des TNO, les invitant à nommer des commissaires à l'adoption selon les coutumes supplémentaires afin de favoriser la représentation culturelle, communautaire et régionale.

Dans un souci de responsabilité et de transparence à l'égard de la mise en œuvre du plan d'action, un outil de suivi en ligne sera lancé en juillet 2024. Le présent rapport annuel présente un état d'avancement plus détaillé des principales initiatives et des tendances au niveau des services. Pour mieux comprendre à quel point le plan d'action atteint les résultats escomptés à moyen terme, les mesures qui suivent ont été ajoutées à ce rapport annuel :

- La représentation d'employés autochtones au sein du personnel des SEF
- Le taux de postes vacants et le taux de roulement au sein du personnel des SEF
- Le taux d'enfants et de jeunes autochtones qui nécessitent des services de protection

En plus de la mise en œuvre du plan d'action, des modifications sont en voie d'être apportées à la *Loi sur les services à l'enfance et à la famille* pour soutenir la transformation du système des SEF. Le Comité permanent des affaires sociales a commencé son examen de la *Loi sur les services à l'enfance et à la famille* pendant la 19e Assemblée législative. Les commentaires sur les modifications proposées, recueillis par le ministère lors de sa séance d'échanges avec le public, ont été affichés en ligne sous forme de Rapport sur ce que nous avons entendu le 2 mai 2023. Les modifications proposées, qui seront présentées à la Chambre lors de la 20e Assemblée législative, s'harmonisent avec la *Loi concernant les enfants, les jeunes et les familles des Premières Nations, des Inuits et des Métis du gouvernement fédéral*.

Il convient de souligner que les données présentées dans ce rapport illustrent les expériences vécues par les enfants, les jeunes et les familles des TNO. La façon dont l'information est analysée et présentée constitue un outil puissant pour contrer les approches fondées sur les faiblesses en se recentrant sur les changements structurels requis¹. Les SEF s'engagent à bien consigner les données sur les enfants, les jeunes et les familles, en créant des voies pour les inclure dans la prise de décisions liées aux programmes et services des SEF qui ont des répercussions directes sur leur vie et leur collectivité.

¹Bureau du commissaire aux droits de la personne de la Colombie-Britannique, Disaggregated demographic data collection in British Columbia: The grandmother perspective, 2020. Source : https://bchumanrights.ca/wp-content/uploads/BCOHR Sept2020_Disaggregated-Data-Report_FINAL.pdf.

Introduction

The Child and Family Services (CFS) system plays an important role in promoting the safety and wellbeing of children and youth in the Northwest Territories (NWT), through services such as prevention supports, family preservation, protection services, and adoptions.

The 2023-2024 Annual Report of the Director of Child and Family Services provides a summary of services delivered in the NWT under the *Child and Family Services Act* (CFSA), *Adoption Act*, *Aboriginal Custom Adoption Recognition Act*, and the federal *Act respecting First Nations, Inuit and Métis children, youth, and families* (Federal Act) between April 1, 2023, and March 31, 2024. This report provides an opportunity to examine the types of supports and services delivered through CFS. Monitoring data and service level trends can help to identify key areas where the CFS system can be improved, and where there have been positive and meaningful changes.

We continue to create ways for children, youth, and families to participate in decisions that impact their lives, including shaping service design and delivery. In this light, the Annual Report serves as a pathway to reflect the lived experiences of children, youth, and families through service level-trends.



Embedding Cultural Safety and Anti-Racism Principles

Indigenous people have always cared for their children using their own systems of care. Canada's history and ongoing legacy of racism and colonialism - enacted through cultural genocide, the residential school system, the Sixties Scoop, and the modern-day child and family services systems - intentionally interrupted and denied communities from accessing Indigenous systems of care². Systemic racism, which is racism that manifests within organizations through policies and practices, maintains inequities for Indigenous families. One key indicator of systemic racism is the overrepresentation of Indigenous children and youth in the CFS system in the NWT and across Canada. In 2023-2024, 99% of children and youth receiving prevention and protection services in the NWT identified as Indigenous, despite only representing 57% of children and youth in the NWT. Community members have voiced their concerns about the historical and current delivery of CFS, and the overrepresentation of Indigenous children and youth in the CFS system, particularly within protection services.

The NWT health and social services system is committed to addressing and eliminating systemic racism by promoting cultural safety and anti-racism. To ensure a unified approach, CFS is working closely with the Cultural Safety and Anti-Racism (CSAR) Division leading this work to embed cultural safety and anti-racism principles throughout its service design and delivery, including the development of this Annual Report.



²Blackstock, C., Cross, T., George, J., Brown, I., & Formsma, J. (2006). Reconciliation in Child Welfare: Touchstones of Hope for Indigenous Children, Youth, and Families. Ottawa, Canada: First Nations Child & Family Caring Society of Canada/Portland, USA: National Indian Child Welfare Association, p.6.

Evacuations Summer 2023

Between May 2023 and September 2023, several communities were impacted by evacuation orders due to floods and wildfires. Some NWT residents were displaced from their home communities ranging from a week to over a month. The community of Hay River faced multiple evacuations over the summer.

Regardless of where children/youth were located during the evacuations, the NWT CFS system remained accountable and responsible for children and youth with existing care statuses under the NWT CFSA.

While NWT communities have regularly experienced evacuation alerts and orders, the situation last summer was unlike any other experienced by NWT residents.

In August 2023, an unprecedented level of evacuations due to wildfires caused almost 70% of NWT residents to be displaced from their homes, with most residents being displaced outside the NWT.

This had significant impacts on the way CFS were delivered and demanded a rapid response to preserve the safety of children, youth, families, caregivers, and staff while maintaining legislated responsibilities under the CFSA. The Department of Health and Social Services (Department) facilitated the CFS Planning Table to ensure a quick and proactive response throughout the duration of the evacuation orders. The Table included the Northwest Territories Health and Social Services Authority (NTHSSA), Tłıchq Community Services Agency (TCSA), Hay River Health and Social Services Authority (HRHSSA) as well as the Executive Director of HomeBase YK and Foster Family Coalition of the NWT.

The Department worked closely with provincial counterparts to provide support and coordinate responses to any child protection matters as required. The Authorities assumed a lead role in the development, implementation, and coordination of services and support to children, youth, and families during the evacuations. Examples of support included:

- Emergency support payment (\$500) provided for all evacuated children/youth in care. This funding was intended to support their needs including clothing, food, recreational activities, etc.
- Emergency number established to enable youth, families, and foster caregivers to reach out if they have concerns or need additional support.
- Collaboration and coordination with Yellowknife NGOs to provide cultural and clinical supports to vulnerable youth throughout the duration of the evacuation. This included aftercare support to promote a safe transition back to the community.

- Placed CFS Staff in the most densely populated evacuation centers to support children, youth, families, and foster caregivers; and to be available by phone and virtually where needed.
- Responded to and supported service navigation around requests related to accommodations, clothing, food, activities, and other basic necessities.
- Monthly payments provided to evacuated foster caregivers earlier than the typical date.
- Coordinated with other Government of the Northwest Territories (GNWT) Departments to establish a phased re-entry plan for the CFS system that aligned with other programs and services. Several CFS staff returned early to the NWT to prepare logistics to provide support for the arrival of children, youth, and families, and foster caregivers. Several staff remained in the most populated evacuation centers to support and coordinate those who were travelling by ground or air transportation.

We are grateful and appreciative for the families, foster caregivers and staff who went above and beyond to continue to care for children/youth during a very stressful time. The NTHSSA, HRHSSA, TCSA along with the Department have gathered lessons learned from CFS to inform our 2024 approach in responding to emergencies. Work is well underway for the preparedness phase to ensure that the CFS system is best positioned to support children, youth, families, foster caregivers, and staff in the event of future emergencies.



Section 1: Northwest Territories' Child and Family Services System

The CFS system is responsible for delivering services to ensure the best interests of children, youth, and families; maintain family unity; and promote the strength of communities. Services include adoptions, prevention supports, family preservation, and protection services, which are available and provided to each of the 33 communities in the NWT.

Children, youth, and families receive services and supports from foster caregivers as well as frontline CFS staff including Community Social Service Workers (CSSWs), Foster Care and Adoption Workers³, Case Aides, and Family Preservation Workers. Specialized training is provided to all staff to ensure they have the required knowledge and Statutory Appointments to provide these services.

Approximately 133 staff supported children, youth, and families through CFS in 2023-2024.

The CFS system includes staff from the Department, NTHSSA, HRHSSA, and the TCSA.

CHILD AND FAMILY SERVICES SYSTEM

Department of Health and Social Services	Northwest Territories Health and Social Services Authority
Develops practice standards and training curriculums	Tłıchǫ Community Services Agency
Monitors overall system performance and compliance to legislated responsibilities	Hay River Health and Social Services Authority
Supports access to out-of-territory specialized services	Provides direct services to children, youth, and families
Facilitates and registers departmental, private, and step-parent adoptions	Responsible for staff recruitment and retention activities
Facilitates the appointment, training, and compensation (via honorarium) of Custom Adoption Commissioners	Provides ongoing support and training to staff
	Monitors system performance

³CSSWs receive specialized training to become statutorily appointed as "Child Protection Workers" under the CFSA. Foster Care and Adoption Workers are also Community Social Services Workers who receive specialized training and are appointed under the Adoption Act.

RECRUITMENT AND RETENTION STAFF

As highlighted in the Child, Youth and Family Services Strategic Direction and Action Plan, staff recruitment and retention continue to be priorities for the CFS system, particularly with high turnover (**Figure 1.1**) and vacancy rates (**Figure 1.2**) and the importance of continuity of services for the population CFS serves. These are significant challenges in the NWT and across Canada.

In March 2024, the NWT vacancy rate for CFS employees was 24.7%, which has steadily increased since May 2020, as demonstrated in **Figure 1.2** below. The vacancy rate is inversely related with the employee turnover rate but directly (positively) related to the rate of new hires. The high vacancy rates may be related to stressors experienced during the COVID-19 pandemic, 2023 wildfire evacuations, and shortage of housing and childcare options in communities.

FIGURE 1.1: RATES OF NEW HIRES AND EMPLOYEE TURNOVERS BETWEEN 2020-2024

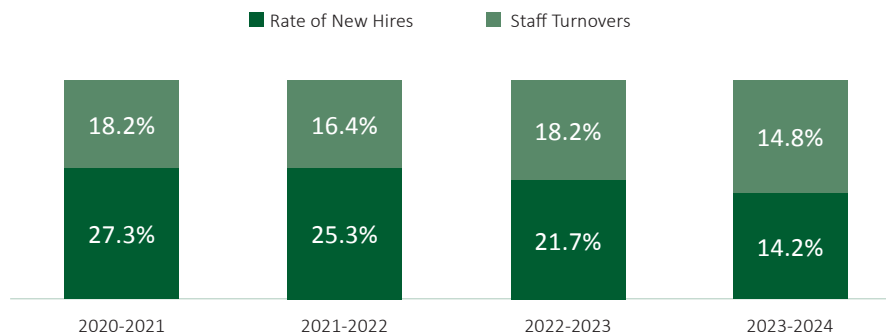
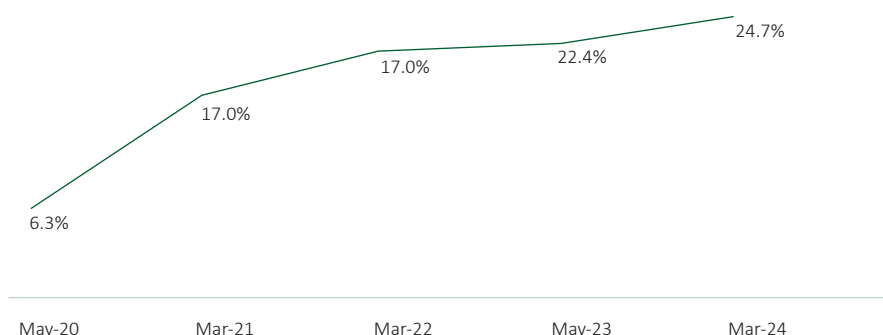


FIGURE 1.2: VACANCY RATE FOR THE CHILD AND FAMILY SERVICES WORKFORCE (POINT IN TIME RATE)



REPRESENTATIVE WORKFORCE

A representative workforce has direct impacts on the support provided to children, youth, and families. Immediate, and creative solutions are required in the recruitment and retention of CFS employees across the NWT. This includes examining and addressing systemic racism in the CFS system generally, including impacts and barriers specific to the recruitment and retention of Indigenous employees.

While 99% of individuals served through CFS identify as Indigenous, only 28% of the CFS workforce identified as Indigenous in November 2023.

Addressing systemic racism experienced by Indigenous employees in the CFS workforce will strengthen capacity building, reduce staff turnover, and improve service delivery. In alignment with the Mandate of the GNWT (2023-2027), the CFS system is committed to training and supporting Indigenous employees to pursue careers in health and social services, while recruiting and retaining qualified professionals to the NWT.



Section 2: Pathways to Child and Family Services

There are two pathways to service access: prevention and protection services. Both are available for children, youth, family, or expectant parent(s); who are experiencing stressors that exceed their natural support systems.

1. PREVENTION SERVICES

The CSSW collaborates with the child, youth, family, or expectant parent(s) to identify the supports that will best meet their needs. The aim of prevention services is to support the strengths of children, youth, families, and expectant parent(s) to preserve family unity. Prevention services may include connections to other service providers, wellness programs, or activities that support wellbeing.

**In 2023-2024,
189 requests for
prevention services
were made.**

During the initial meeting, the CSSW strives to use a holistic approach to identify culturally safe and relevant services that reinforce the individual/family's resilience and strengths.

Examples of requests under prevention services include but are not limited to:

- Housing advocacy
- Short-term financial assistance
- Support in accessing wellness services
- Referrals to prenatal services

2. PROTECTION SERVICES

Protection services are guided by the principles that family wellbeing should be supported and promoted; and children have the right to live a life free from abuse, harm, and neglect.

When there is a concern that a child/youth may be at risk of maltreatment, a report must be made to a CSSW⁴. Based on the conversation with the reporter, the CSSW will determine if the information meets the threshold for further action to support the safety and wellbeing of the children/youth.

**In 2023-2024,
Child and Family Services
received 1,458 reports of
suspected maltreatment.**

If further action is required, the CSSW will speak with the child(ren), youth, parent(s), and any other individuals that can contribute to a better understanding of the family's situation. Based on the information gathered by the CSSW, children/youth, and families may be offered prevention supports or may require protection services to promote their safety and wellbeing.

⁴The CFSA requires any person who has information of the need of protection of a child or youth shall, without delay, report the matter to their local CFS office, peace officer or authorized person.

Section 3: Types of Services for Children, Youth, and Families

Between April 1, 2023, and March 31, 2024, there were 1,067 children and youth who received prevention and/or protection services through CFS.

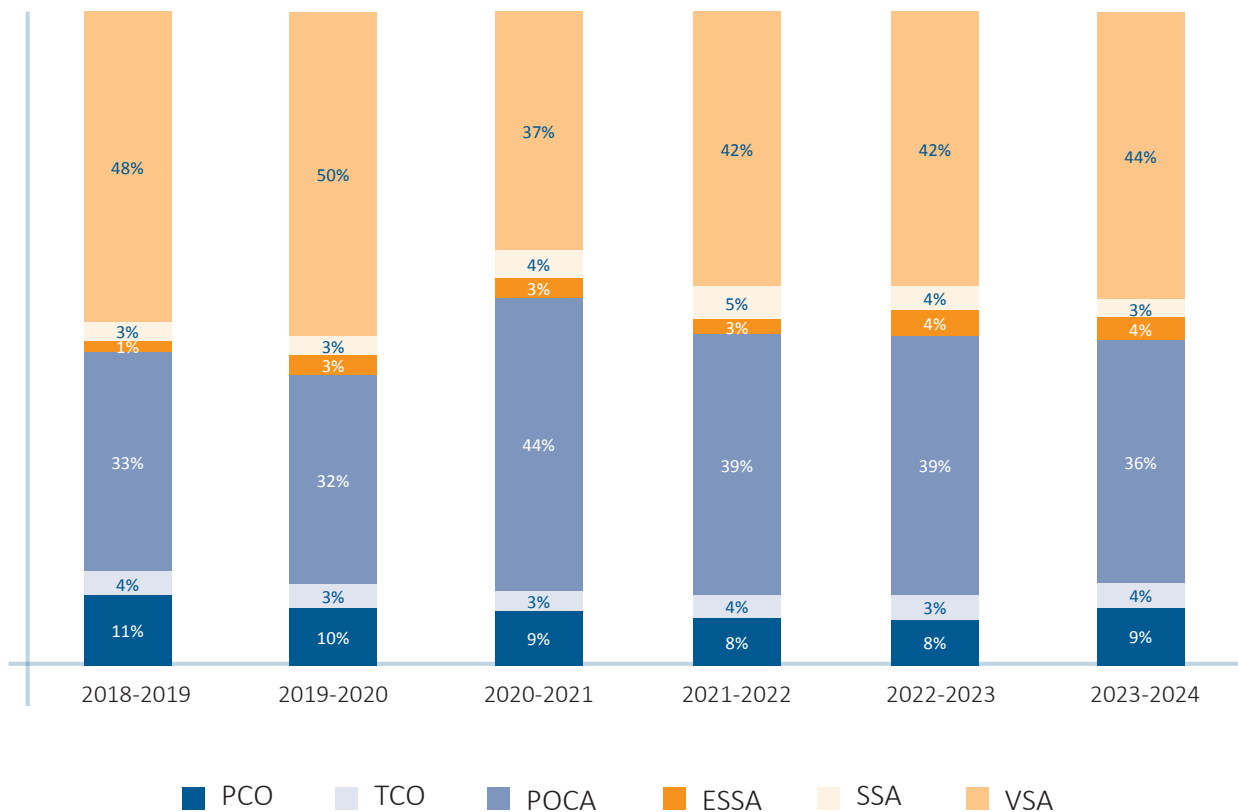
Prevention Services	Protection Services
• Voluntary Services Agreements (VSA): Support families with children/youth between the ages of 0-18 (inclusive) and expectant parent(s) who would benefit from support as identified by the individual/families. • Support Services Agreements (SSA): Support youth, ages 16 to 18 (inclusive) to offer support and guidance in their transition to adulthood. • Extended Support Services Agreements (ESSA): Support young persons in their transition to adulthood. This service is offered to young persons who were in the permanent care and custody of the Statutory Director of Child and Family Services (Statutory Director) on their 19th birthday and until they turn 23.	• Plan of Care Agreement (POCA): Provides an alternative to the court process when there is an ongoing protection concern involving children under 16 years of age. POCAs collaboratively identify the strengths and unmet needs of the family. Supports and services are offered as an approach to family preservation. Depending on the situation, the child may remain in the family of origin⁵ home or be cared for outside the home. • A Supervision Order (SO) is an order that is made by the court when a child needs protection and when it is in the child's best interests to remain in (or be returned to) the care of their parent(s) or care provider(s). The child is supervised by a Child Protection Worker in accordance with any terms or conditions that the court considers necessary. Supports and services continue to be provided to the family while the SO is in place. SOs do not apply to youth. • Temporary Custody Order (TCO): Transfers custody of the child/youth temporarily to the Statutory Director. Work is continued with the family to reunite the child/youth in their family of origin home. Parents are supported to maintain a meaningful relationship with their child(ren)/youth. • Permanent Custody Order (PCO): Transfers the custody and care of the child/youth permanently to the Statutory Director. Depending on each unique situation, the child may continue to live with foster caregivers, extended family or be adopted.

⁵Family of origin home can be inclusive of birth or adoptive parents, siblings, and other relatives, depending on the child's or youth's living situation at the time of their involvement with CFS.

Overall, the proportion of children/youth receiving services under an ESSA, SSA, PCO, and TCO is consistent between 2018 and 2024 (Figure 3.1).

However, in 2020-2021, the proportion of VSAs decreased while POCAs increased. The past three years (2021-2024) showed that services are trending towards similar proportions from 2018-2020, which showed approximately 50% of services were prevention focused (VSA, SSA, and ESSA). Subsequent years of data will need to be monitored to determine what might be influencing changes in service use.

FIGURE 3.1 TYPES OF SERVICES PROVIDED TO CHILDREN, YOUTH, AND FAMILIES

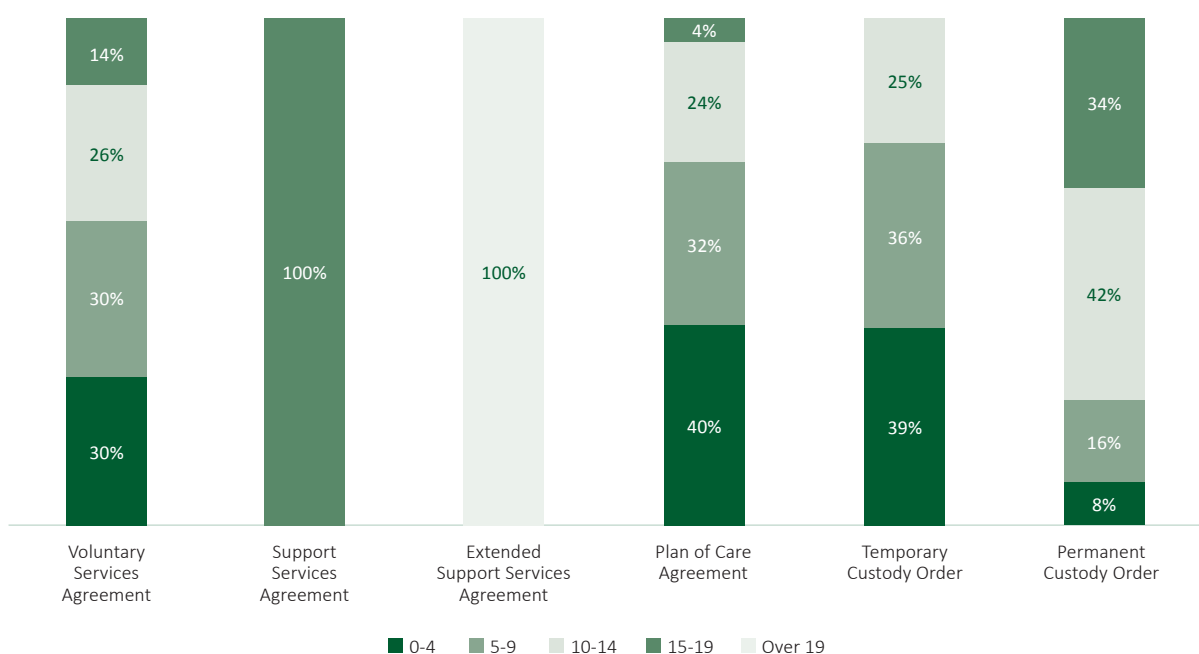


Section 4: Children and Youth Who Receive Child and Family Services

HOW OLD ARE CHILDREN/YOUTH RECEIVING SERVICES?

The type of service provided through CFS depends on the child/youth's age and family situation. **Figure 4.1** shows the percentage of children/youth in different age groups and the type of services they received through CFS.

FIGURE 4.1 CHILD AND FAMILY SERVICES PROVIDED ACCORDING TO AGE



WHERE ARE CHILDREN AND YOUTH LIVING WHEN RECEIVING SERVICES?

Children and youth achieve better outcomes when given access to supports in their home community. To promote wellbeing and family preservation, the CFS system aims to provide local supports and services to children, youth, and families.

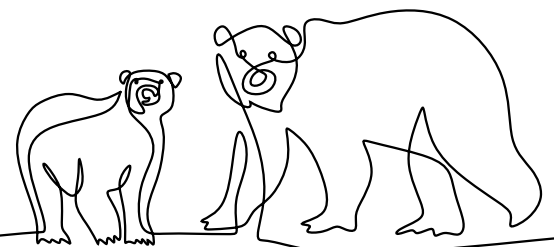
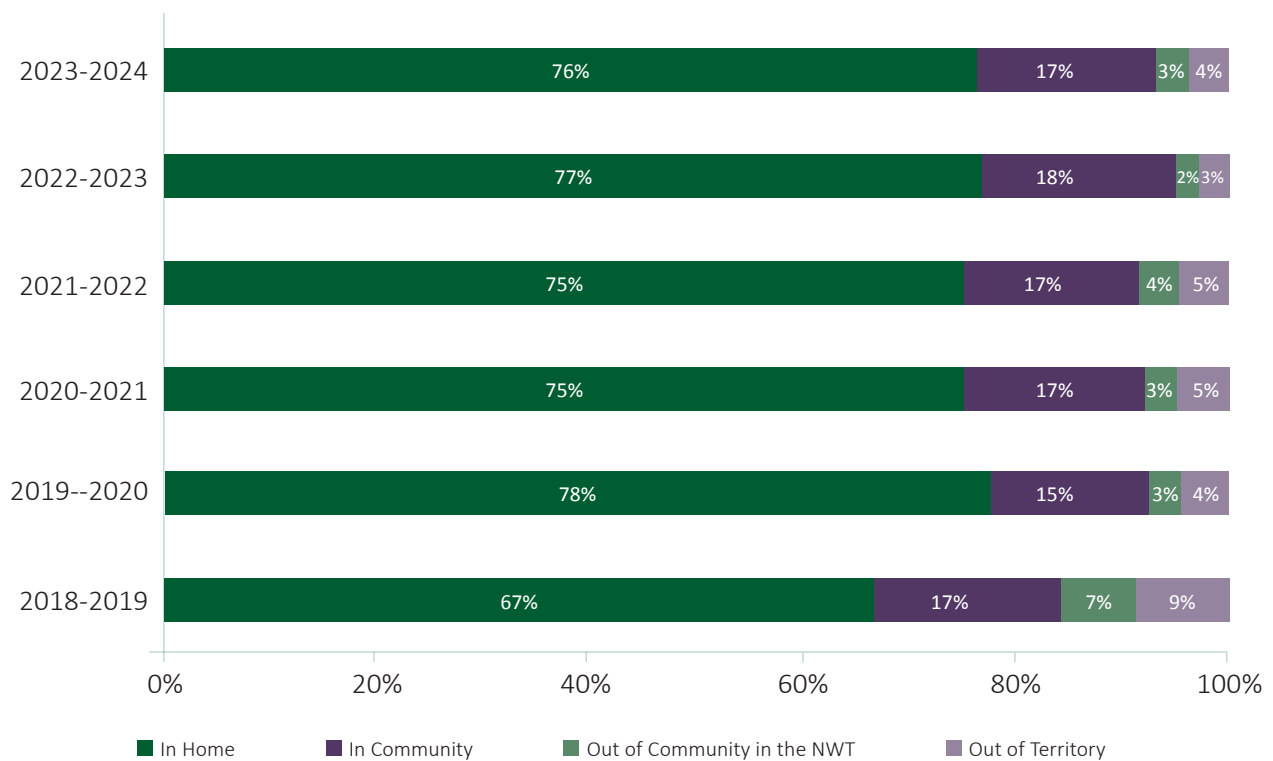
Whenever possible, children/youth are supported to live in their family of origin home or within their home community. Maintaining connections with culture, community, friends, and family promotes the overall wellbeing and healthy development of children and youth.

In 2023-2024, 93% of children/youth who received CFS were residing in their family of origin home or within their home community.

76% of children/youth received services while living with their family of origin home.

17% of children/youth received services within their home community.

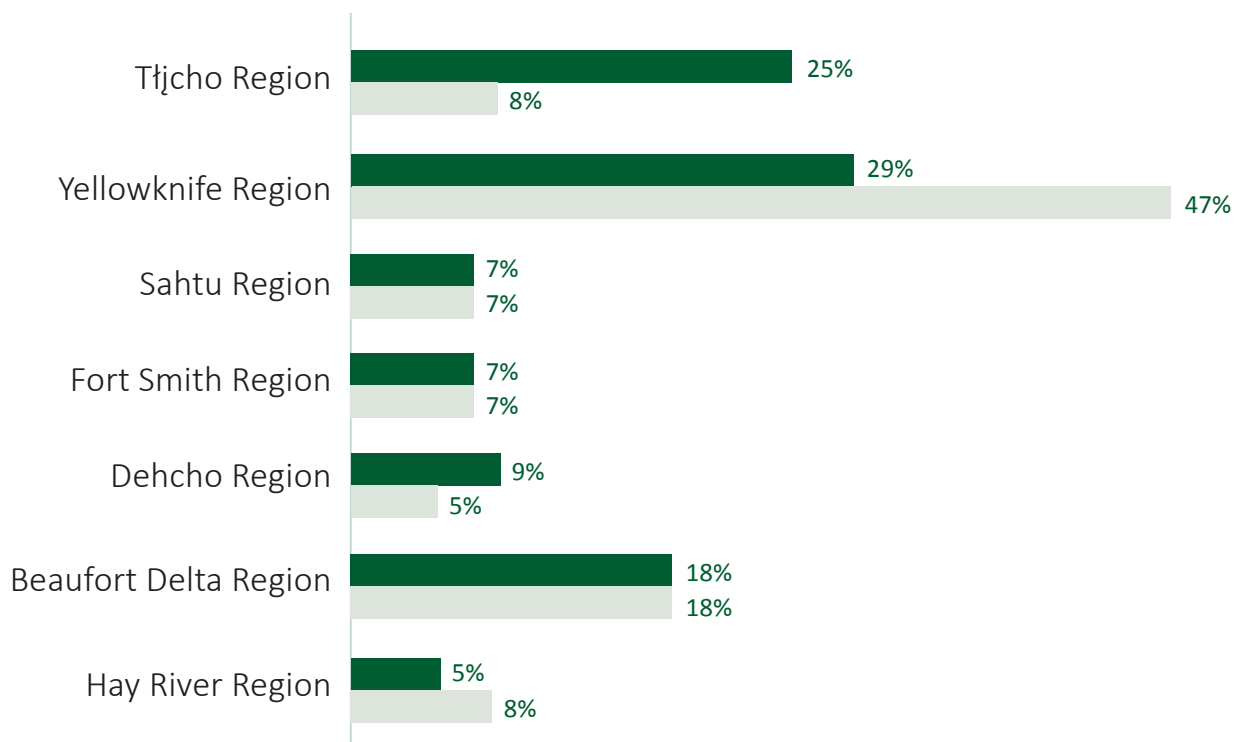
FIGURE 4.2 LOCATIONS OF WHERE CHILDREN/YOUTH RECEIVED CHILD AND FAMILY SERVICES



CHILDREN AND YOUTH RECEIVING SERVICES BY REGION

Understanding the level of services in each region can help to develop and enhance community-based programs that support children, youth, and families. Services can then be tailored to address regional priorities, community differences and reflect community strengths. **Figure 4.3** shows the percentage of the total territorial children/youth population residing in each region and compares it to the percentage of children/youth receiving CFS in each region.

FIGURE 4.3 COMPARISON OF THE PERCENTAGE OF TERRITORIAL CHILDREN/YOUTH POPULATION IN EACH REGION WITH THE PERCENTAGE OF CHILDREN/YOUTH RECEIVING CFS IN EACH REGION



■ Percentage of Territorial Child/Youth Population ■ Percentage of Child/Youth Receiving Services

Data includes children and youth ages 0-18 years (excludes 19+ years).

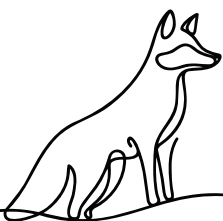
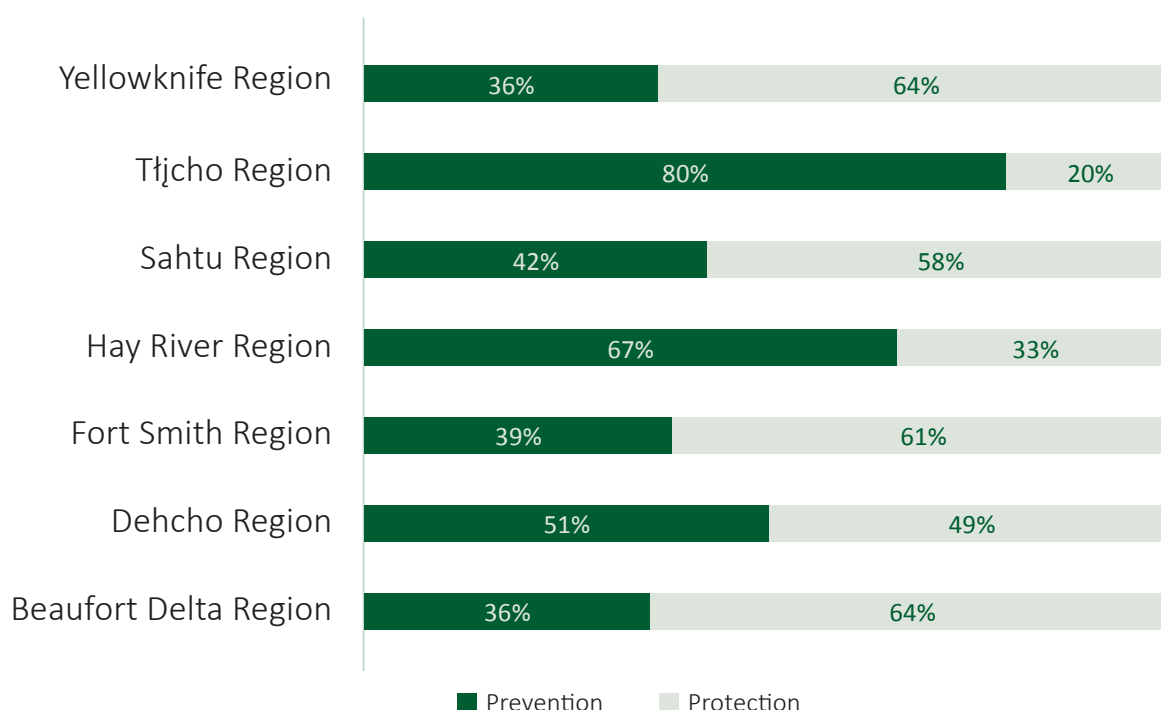


Figure 4.4 demonstrates the types of services delivered within each region – prevention services and protection services. This information helps with the understanding of regional differences in terms of service delivery as well as community needs.

FIGURE 4.4 TYPES OF SERVICES DELIVERED BY REGION



Data includes children and youth ages 0-19 years.

REDUCING THE NUMBER OF CHILDREN AND YOUTH IN CARE

CFS in the NWT includes both prevention services and protection services. In 2023-2024, 99% of children and youth receiving CFS identified as Indigenous (either First Nations, Inuit, or Métis), despite only representing 57% of the overall child/youth population in the NWT.

The overrepresentation of Indigenous children and youth in the CFS system in the NWT and across Canada serves as evidence for the need to shift service delivery. It is important to address the ongoing impacts of colonial systems and systemic racism that maintain inequities for Indigenous families. As such, creating and sustaining meaningful

change within the CFS system means that careful efforts must be made to repair relationships and build trust with Indigenous people and communities.

Provisions under the CFSA and Federal Act are intended to invite the participation of Indigenous governments and organizations in supporting children/youth. An integrated approach that involves families and communities is essential in supporting the wellbeing of children and youth.

To provide more context to the overrepresentation of children and youth receiving services, the rate of Indigenous children/youth in protection services has been added to this Annual Report (Figure 4.5).

Children and Youth Receiving Services:

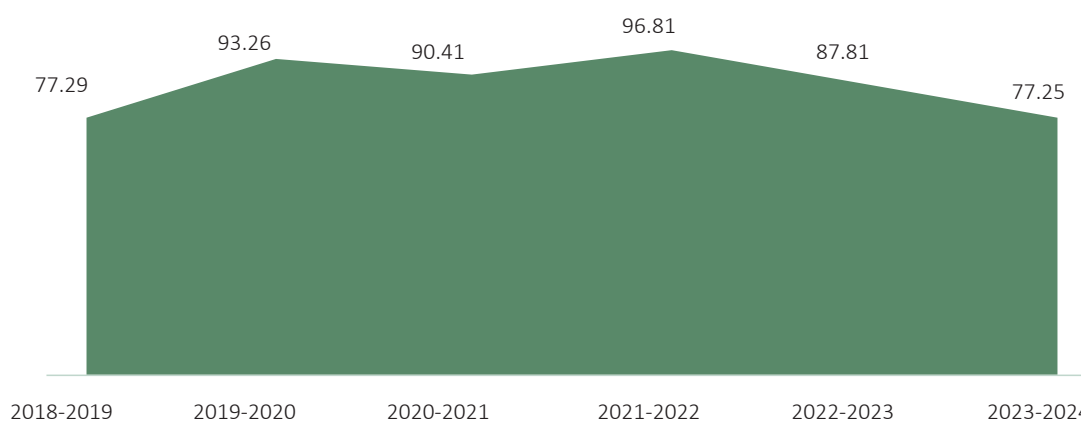
First Nations- 78%

Inuit- 19%

Métis- 4%

Non- Indigenous- 1%

FIGURE 4.5 RATE OF INDIGENOUS CHILDREN AND YOUTH IN PROTECTION SERVICES, PER 1,000



The inclusion of this measure is a commitment from the Child, Youth and Family Services Strategic Direction to show the degree to which the collective activities under the Action Plan are achieving its intended goals. Fluctuations in this measure may reflect community level efforts or the impacts of other programs and services. Therefore, it is important to continue to analyze CFS information in different ways to inform service delivery improvements. Continuous reflection on how we examine data is equally important to ensure decisions are grounded in the lived experiences of the children, youth, and families we serve.

Section 5: Promoting Wellbeing

Strong and consistent support systems promote the wellbeing of families. Early intervention and prevention services can offer crucial support during challenging times, particularly when families are challenged with not having the foundational support they deserve.

CFS supports the delivery of early intervention and prevention services through voluntary support services and connections to other programs/services (e.g., Family Preservation Program). These services are available to children, youth, families, and expectant parent(s). The aim is to build on the strengths and resilience of families, and support connections to resources, community and culture that promote family unity and wellbeing.

VOLUNTARY SUPPORT SERVICES

Voluntary support services are available when there are no child or youth protection concerns. Three types of agreements fall under voluntary support services:

- **VSA:** Support families with children/youth between the ages of 0-18 (inclusive) and expectant parent(s) who would benefit from support as identified by the individual/families.
- **SSA:** Support youth, ages 16 to 18 (inclusive) to offer support and guidance in their transition to adulthood.
- **ESSA:** Support young persons in their transition to adulthood. This service is offered to young persons who were in the permanent care and custody of the Statutory Director on their 19th birthday and until they turn 23 (for more information refer to **Section 10: Extended Support Services Agreements**).

These agreements are tailored to the unique needs of each youth, family, or expectant parent(s). Youth, families, and expectant parent(s) may be encouraged to involve their Indigenous government(s) and/or cultural organization in case planning to integrate Indigenous knowledge, traditions and supports.

In 2023-2024, **583 children/youth*** were receiving prevention services in the NWT.

95% of children/youth receiving services were through a **Voluntary Services Agreement**.

5% of youth receiving services were through a **Support Services Agreement**.

**This refers to the number of unique children/youth who received prevention services (VSAs & SSAs) in 2023-2024.*

Main Reason for Voluntary Services Agreement Requests

26%

Services to Improve Financial Situation

13%

Other Requested Services

10%

Services to Improve Housing Situation

10%

Support in Accessing Counselling Services

8%

Services to Improve Mental/Physical Development

7%

Parenting Programs

Main Reasons for Support Services Agreement Requests

21%

Services to Improve Financial Situation

16%

Services to Improve Housing Situation

13%

Support in Accessing Counselling Services

13%

Other Requested Services

12%

Support with Education

9%

Services to Improve Mental/Physical Development

*Note the percentages above do not add up to 100% as only the top six reasons are presented.
These data also show if multiple types of services identified within one request.*

FAMILY PRESERVATION PROGRAM

The Family Preservation Program continues to work towards the adaptation and implementation of a team-based planning process that provides coordinated care to families. Through an approach that promotes family choice, family ownership, and family self-determination, services are tailored to meet the distinct needs of each family. The family is the active decision maker – invited to define their own strengths and needs, to define their goals and priorities, and when ready, to gather trusted team members (i.e., community members, extended family, and Elders) to be part of their circle of support.

The core services offered through the Family Preservation Program include:

1. Wraparound supports centered in community and culture.
2. Support and service navigation related to self-identified needs, such as housing, food security, etc.
3. Parenting and familial support, such as culturally informed parenting education and family support, service coordination, and informal counselling.

**In 2023-2024,
112 families and 32
youth were supported
by the Family
Preservation Program.**

Section 6: Reporting and Investigating Suspected Maltreatment

The safety and wellbeing of children and youth is a shared responsibility of all residents of the NWT. When a person suspects that a child/youth's safety may be at risk as a result of maltreatment, it is their responsibility and legal obligation to report this concern to their local CFS office or to their local RCMP detachment. The contact information for CFS offices throughout the NWT is available on the Department's website at www.hss.gov.nt.ca/report-child-neglect.

MALTREATMENT, ABUSE AND NEGLECT

The term "maltreatment" is an overarching term that covers both "abuse" and "neglect." In the NWT, most suspected cases of abuse and neglect are based on reports made by service providers or members of the community. Based on the CFSA, harm to a child/ youth is categorized into five main areas:

- Physical abuse
- Emotional abuse
- Sexual abuse
- Exposure to family violence
- Neglect

In 2023-2024, the most common sources of reports of suspected child maltreatment were community members, custodial parents, family members, RCMP, and school staff.

NEGLECT

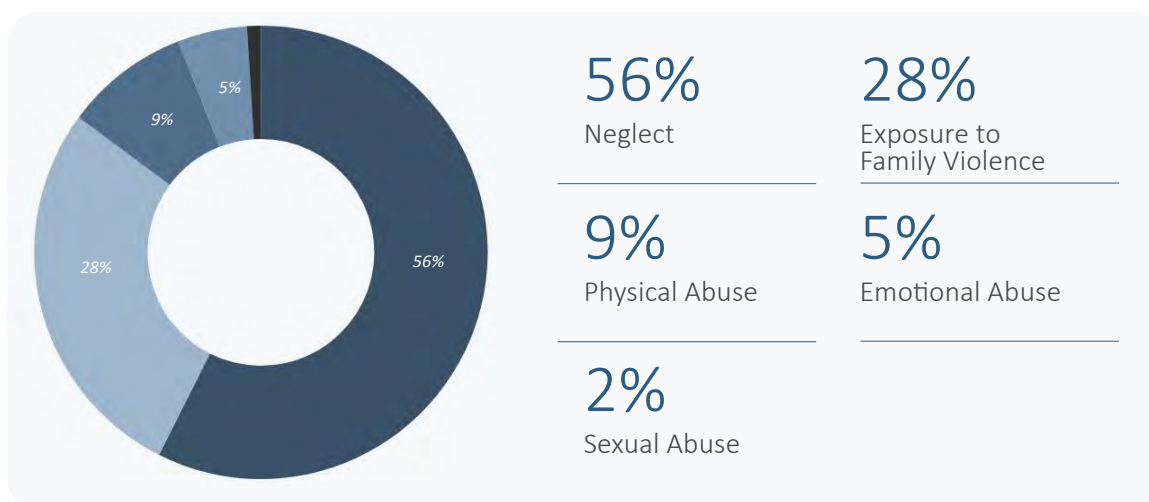
An important distinction within CFS is being able to assess child/youth protection concerns due to neglect versus the inability of a family to meet the basic needs of a child/youth due to socio-economic conditions.

Socio-economic conditions, such as poverty, are not necessarily reflective of an issue of maltreatment but rather a statement of the equitable access to resources necessary for the care of children/youth, and, therefore, warrants different supports and services.

When an initial report is made about child abuse or neglect, a CSSW collects the referral information and uses the Structured Decision Making® (SDM®) Screening and Response Priority Assessment tool to determine if an investigation, a non-investigatory intervention, or no further CFS involvement is required.

In instances where an investigation is needed to further assess the immediate safety to the child/youth, the CSSW will complete the investigation and use the SDM® Risk Assessment tool to determine, through consultation with the family, what supports (if any) they may require ensuring the child/youth's safety and wellbeing. The process is shown on the following page.

FIGURE 6.1 REPORTS OF SUSPECTED MALTREATMENT (BY TYPE) IN 2023-2024)



In 2023-2024, neglect was the most reported form of maltreatment in the NWT, followed by exposure to family violence (Figure 6.1).

Concerns related to “Neglect” and “Exposure to Family Violence” are often the result of complex intersections of the social determinants of health⁶, including systemic racism, and intergenerational trauma resulting from colonialism experienced by parents/caregivers. Awareness and knowledge of the root causes impacting child maltreatment is a key step towards developing interventions that better promote the safety and wellbeing of children and youth. Additionally, CFS recognizes the importance of supporting individuals who have experienced intimate partner violence as an integral part of preventing child/youth maltreatment. For example, CFS will often act as a bridge to other support service providers, such as the RCMP and counsellors.

⁶Social determinants of health can be described as non-medical factors that influence health outcomes.

WHAT HAPPENS WHEN A REPORT OF SUSPECTED CHILD MALTREATMENT IS BROUGHT FORWARD TO CHILD AND FAMILY SERVICES?

1

A concern about suspected child maltreatment is received by Child and Family Services.

In 2023-2024, 1,458 unique reports were received with 2,040 suspected child maltreatment concerns*.

2

The Community Social Services Worker will collect screening information to determine if an investigation should be opened.

In 2023-2024, 1,224 investigations were opened.

3

During an investigation, the Community Social Services Worker will visit the family home and interview the children/youth, parents and any other individuals that may have information for the investigation.

In 2023-2024, 941 unique households and 2,976 unique children/youth were interviewed.

4

Child and Family Services will support children/youth and families by offering services to ensure the safety and wellbeing of the children and youth.

*2,040 suspected child maltreatment concerns reported differs from the total number of unique child maltreatment reports received (1,458) as: 1) More than one person may report suspected maltreatment concerns they have about a specific child or youth and 2) There can be multiple children or youth involved and more than one type of child maltreatment within one report.

RECURRENCE OF MALTREATMENT

Recurrence refers to the re-opening of a child protection file within twelve-months. Based on the investigation process, recurrence is measured through three indicators:

- Recurrence of Reports of *Suspected* Maltreatment⁷
- Recurrence of Investigations
- Recurrence of Confirmed (Substantiated) Investigations

Reports of Suspected Maltreatment

Of the **1,012** children who were the subject of **reports of suspected maltreatment** in 2022-2023

40.6% were subject to **another report of suspected maltreatment** within 12 months of the initial report.

Investigations

Of the **990** children who were the subject of **investigations** in 2022-2023

40.5% were subject to **another investigation** within 12 months of the initial report.

Confirmed Investigations

Of the **516** children who were the subject of **confirmed investigations** in 2022-2023

30.2% were subject to **another confirmed investigation*** within 12 months of the initial report.

**Where at least one allegation was confirmed*

High recurrence of child maltreatment may mean the family was not provided with adequate supports to meet their unique needs and situations. It may also mean the family did not have the right supports in place after they stopped receiving services through CFS.

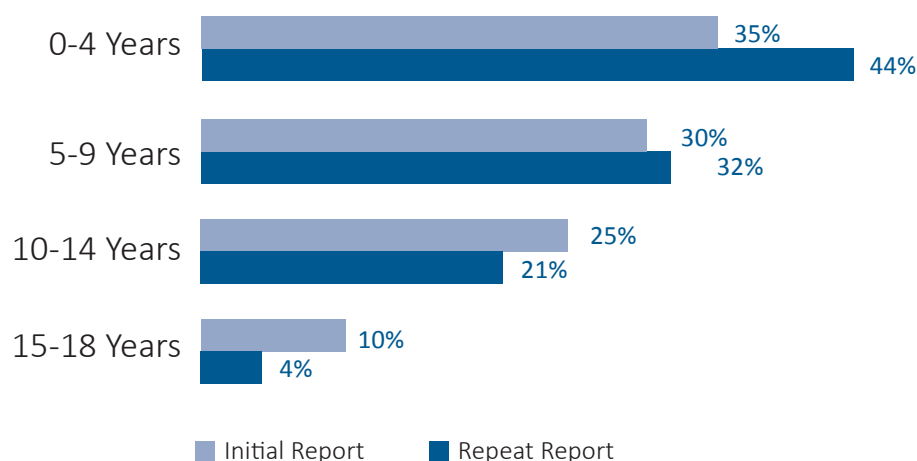
Initial and repeat reports of suspected maltreatment were analyzed by gender, age, and maltreatment types. Understanding these differences helps to tailor interventions and be more responsive to the needs of families.

⁷The term "maltreatment" is an overarching term that covers both "abuse" and "neglect." Based on the CFSA, harm to a child/ youth is categorized into five main areas: physical abuse, emotional abuse, sexual abuse, exposure to family violence, and neglect.

Female and male genders were almost equally represented in initial and repeat reports of suspected maltreatment. Non-binary identities were also considered, but the numbers were too low to be reported as this may inadvertently identify the individual(s).

Younger children between the ages of zero and ten years old were more likely to be the subject of a report of suspected maltreatment (Figure 6.2). This is consistent between initial and repeat reports. People may be more alert to the risk of maltreatment for young children when compared with adolescents. Given their age, younger children are more vulnerable to abuse and/or neglect than older children/youth.

FIGURE 6.2 RECURRENCE OF REPORTS OF SUSPECTED MALTREATMENT BY AGE



Socio-economic factors, such as poverty, housing insecurity, and financial instability can at times be interpreted by concerned observers as situations of neglect. Anyone who suspects child abuse and/or neglect has a responsibility to report these concerns to their local CFS office. The CSSWs are guided by practice standards to determine if the suspected maltreatment has occurred.

Socio-economic factors may also intersect with the impact of intergenerational trauma, which can contribute to the overrepresentation of Indigenous children and youth in both prevention and protection services. It is important that CFS re-examines how we can better support families through prevention and family preservation services, outside of a child protection context.

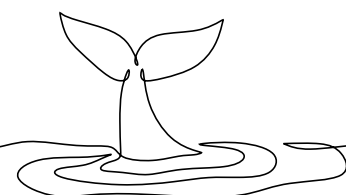
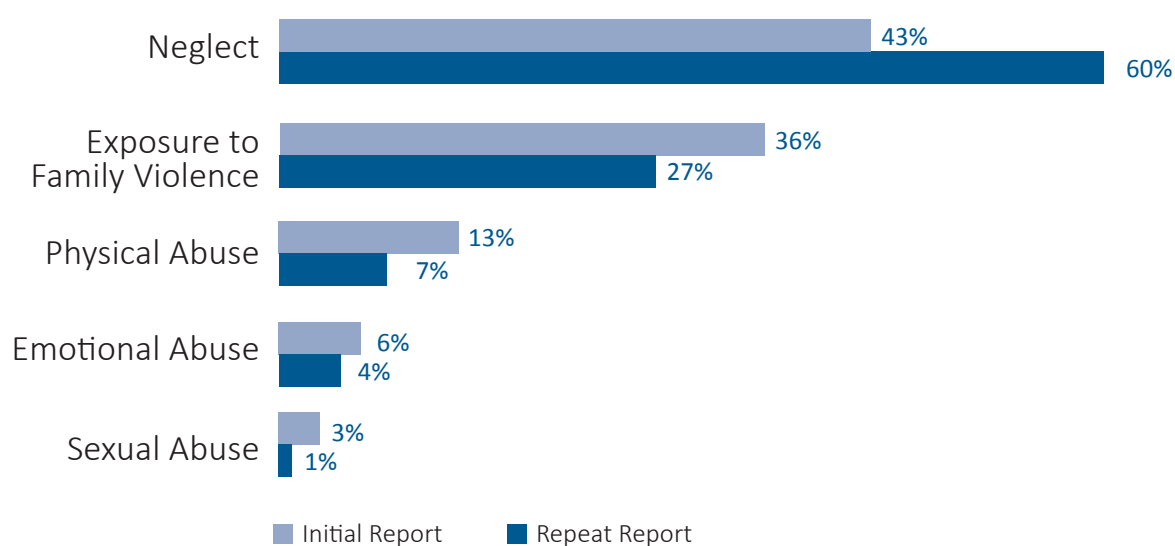
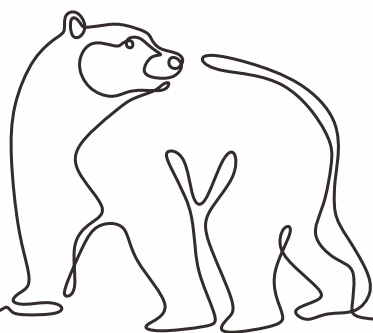


FIGURE 6.3 RECURRENCE OF REPORTS OF SUSPECTED MALTREATMENT BY TYPE



Suspected neglect and exposure to family violence were more likely to be re-reported to CFS (Figure 6.3). This speaks to the complexity of addressing underlying causes, such as social determinants of health, socio-economic factors, and intergenerational trauma, further highlighting the need to support families using an integrated and holistic approach through a variety of social supports and services.



Section 7: Plan of Care Agreements

In cases of substantiated maltreatment, families are provided with the option of a POCA, a less intrusive approach than a formal court process. A POCA supports family unity and provides the family an opportunity to identify the supports necessary for healing. Families who enter a POCA are still entitled to legal counsel.

POCAs bring together the family, the CSSW, and any other individuals/organizations identified by the family to agree on supports and services that build on the strengths and needs of the family. This group of participants are known as the “Plan of Care Committee.”

When possible, and in line with the best interests of the child, the priority is for children to continue to live in their family of origin home while the family receives services.

**In 2023-2024,
461 children* had a Plan of
Care Agreement.**

**76% Plan of Care
Agreement – Children
remained in their family
of origin home.**

**24% Plan of Care
Agreement – Children
cared for outside of their
family of origin home.**

**This refers to the number of unique children with a POCA in 2023-2024.*

PLAN OF CARE AGREEMENTS – PLACING THE CHILD OUT-OF-HOME

CFS makes every effort to provide services in the child/youth’s family of origin home. In some cases, a child/youth cannot reside safely within the family of origin home and an out-of-home placement is needed. In this instance, a CSSW discusses appropriate placement options with the parent(s) and the child/youth in attempt to find a home where the child/youth feels comfortable and secure. In alignment with the Federal Act, CSSWs follow “Placement Priorities” to ensure all efforts are made to preserve the connection between a child/youth and their family, community, and culture (for more information refer to **Section 9: Placement Resources**).

RIGHTS OF PARENTS, CAREGIVERS, CHILDREN AND YOUTH

Parents, legal caregivers, children, and youth are entitled to be informed of their right to be represented by legal counsel throughout the protection process, including the Plan of Care stage. These rights are protected under the CFSA. To the extent that it is practicable, the Statutory Director is also required to facilitate access to legal counsel and, where appropriate, the services of an interpreter. Similarly, children and youth can seek independent counsel through the Office of the Children's Lawyer.

Additionally, a CSSW may enter into or offer referrals to mediation services to parents, legal caregivers, children, and youth in an effort for dispute resolution outside of the formal court system. Through mediation, parents, legal caregivers, children, and youth can decide their own solutions based on a collaborative and non-adversarial approach. In general, these processes are intended to ensure that the rights of the parents, legal caregivers, children, and youth are upheld and protected during the Plan of Care process.



Section 8: Temporary Custody Orders and Permanent Custody Orders

In certain circumstances, it may be required to care for children/youth outside of their family of origin home for longer periods of time, especially when families are experiencing numerous/complex challenges and barriers to wellness.

When supports and services for parents do not adequately address safety concerns, a child may be placed in the temporary or permanent care and custody of the Statutory Director to preserve their safety and wellbeing.

Children/youth who are brought into temporary or permanent care reside with alternative caregivers in another home. The CSSW follows placement priorities to help maintain cultural and familial connections (for more information refer to **Section 9: Placement Resources**). The goal is to provide children and youth with nurturing homes that offer holistic connection and supports to thrive. In instances where reunification with the family of origin home is not possible, the child/youth may continue to live with foster caregivers, extended family or be adopted, depending on each unique situation. More information related to adoptions is found in **Section 12: Adoptions**.

In the NWT, 151 children/youth were in permanent or temporary care in 2023-2024.

106 (70%) children/youth were in **Permanent Care**.

45 (30%) children/youth were in **Temporary Care**.

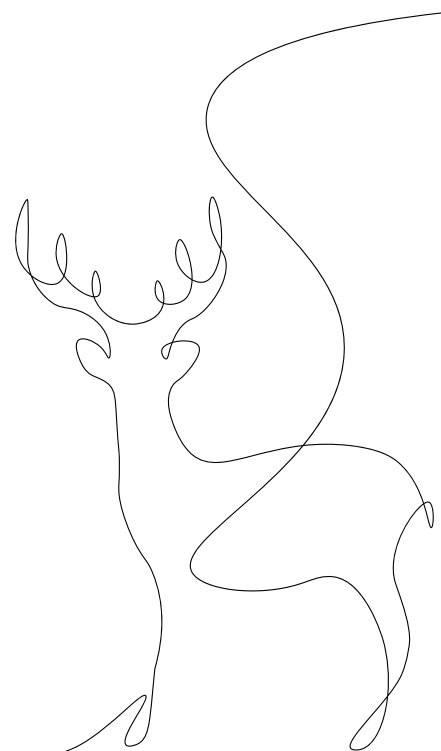


FIGURE 8.1 CHILDREN/YOUTH IN PERMANENT CARE BY AGE:

2023-2024	0-4	5-9	10-14	15-18
%	7%	16%	31%	46%

Seventy-seven percent (77%) of children/youth in permanent care were over the age of ten (**Figure 8.1**). As children/youth grow up in care, it is important to adapt supports to meet their needs to maintain connections to family, community, culture, language, and identity.

Number of Children and Youth in Permanent Care Over Time

175

Children/Youth from 2014-2015

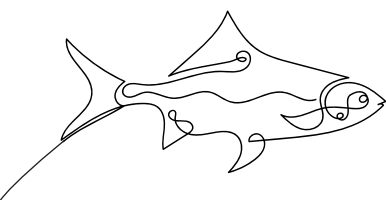
106

Children/Youth from 2023-2024

39%

decrease in the number of children/youth in permanent care over the past 10 years

The decrease in the number of children/youth in permanent care speaks to the resiliency of families and communities and a shared dedication to maintaining nurturing and supportive environments in which a child/youth can grow. When children/youth stay in the care of their family and extended support network, it allows them to remain rooted in their community and culture. The reduction in the number of children/youth in permanent care may be representative of the broader system changes currently being undertaken by CFS. It can also suggest the changes in practice which promote family unity and the collaboration of community members, Indigenous governments, and families in the care and support of children/youth.



Section 9: Placement Resources

Home, family, community, and cultural connections are all important parts of a person's identity and wellbeing. CFS recognizes that efforts must be made to protect and promote the social and cultural rights of a child/youth's life. Community ties include extended family, friends, and cultural activities, which form a child/youth's social world. These relationships are best preserved within the child/youth's home community, particularly when services are being provided through CFS.

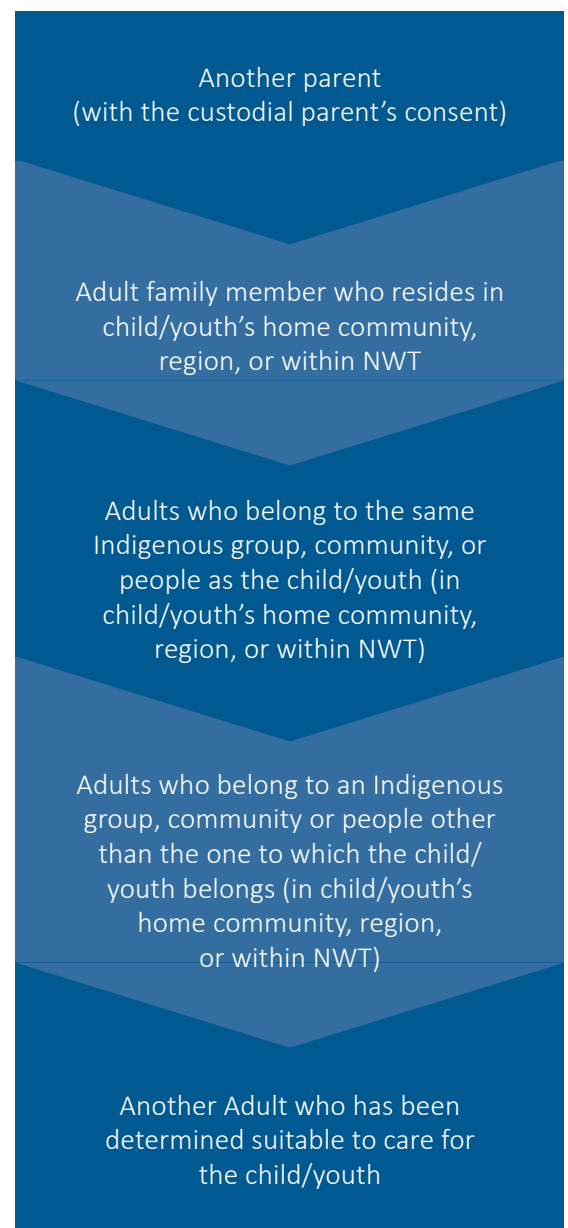
PLACEMENT PRIORITIES

When services are required, CFS makes every effort to provide them in the child/youth's family of origin home. In some cases, a child/youth cannot safely reside in the family of origin home, and an out-of-home placement is needed. In this case, a CSSW discusses appropriate placement options with the parent and the child/youth to find a home where the child/youth feels comfortable and secure.

Placements must be considered in the order of priority, as per **Figure 9.1**. Placement priorities promote the best interest of the child/youth, by ensuring CSSWs make every effort to maintain the connection between a child/youth and their family, community, and culture. Early and diligent outreach to extended family members helps maintain and strengthen important family relationships during out-of-home care. Depending on each unique situation, it may also support the journey towards reunification, placements with extended family, and/or adoption.

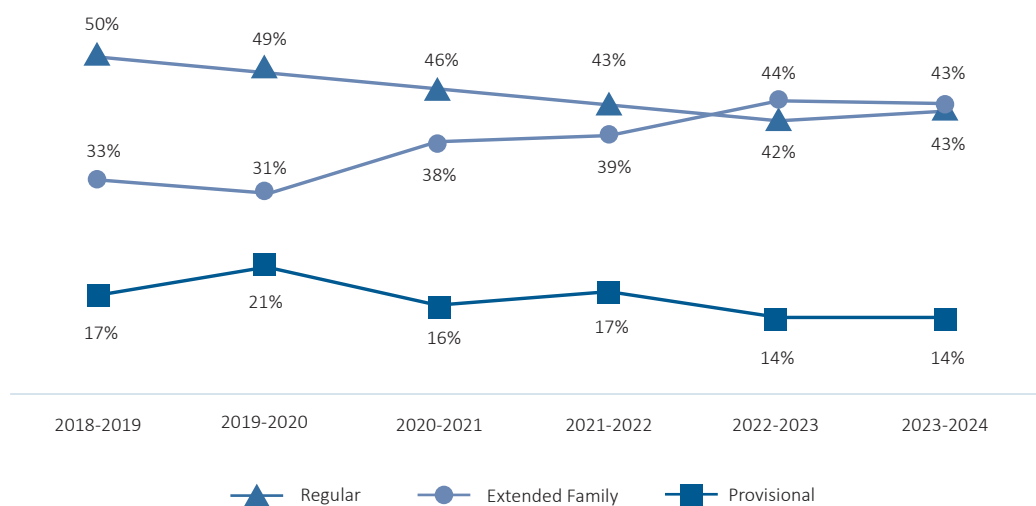
In 2023-2024, there were 144 out-of-home placement resources across the NWT. The proportion of regular placement resources⁸ is steadily decreasing, while the proportion of extended family placement resources is increasing (**Figure 9.3**). When children/youth are placed with extended family members, they can better maintain cultural and familial connections.

**FIGURE 9.1 PLACEMENT CONSIDERATIONS
IN ORDER OF PRIORITY:**



In 2023-2024, 61% of Indigenous children/youth who required support outside their family of origin home were living with an Indigenous caregiver.

FIGURE 9.3 OVERALL PROPORTION OF OUT-OF-HOME PLACEMENT RESOURCES, BY PLACEMENT TYPE



REUNIFICATION EFFORTS

Family reunification is the process of supporting a child/youth, who was in an out-of-home placement, to be in the care of their parent(s) or extended families. This is the main goal for short-term and long-term case planning. As such, it is important to focus on practices that help achieve successful reunification. Parents and extended families are more willing to participate and engage in activities that promote reunification when CSSWs develop meaningful relationships with parents and follow their lead in planning.

⁸A provisional caregiver is a community member that is known to the child/youth/family. A regular caregiver is someone not known to the child/youth/family.

Section 10: Extended Support Services Agreements

Youth in care have the right to positive supports, resources, and safe housing as they transition to adulthood to enable them to thrive as adults.

ESSAs are offered to young persons who were in the permanent care and custody of the Statutory Director on their 19th birthday and until they turn 23. ESSAs are voluntary agreements that can provide supplementary support (financial and non-financial), service navigation, and connections to other supports/services to young people as they transition to adulthood. Young persons may opt in or out of ESSAs at any time.

The ESSA offers reliable, consistent support during this critical period of a young person's life that respects choice and encourages self-determination, while also providing guidance. Therefore, an ESSA gives the young person control to identify how and when they need supports.

Youth between the ages of 15 and 18 (inclusive) represent 46% of those in permanent care. It is important that youth have the support they need to develop a transition plan that incorporates short-term and long-term goals, and resources needed to establish a healthy network of support as they approach their 19th birthday.

The decision to enter an ESSA is unique to each young person. The young person may have established supports elsewhere (i.e., employment, income assistance, student financial assistance, adult services, etc.) and/or they want to seek independence from the CFS system. It is important to note that support offered through an ESSA will continue to be available to these young persons until their 23rd birthday, as they can opt-in and out of these services voluntarily.

Over the past five years, 79% of young persons (33) in the permanent custody of the Director signed an ESSA when they reached the age of majority.

CONSIDERATIONS FOR THE TRANSITION PLAN INCLUDE:

- Social and emotional skills development
- Healthy relationship skills
- Opportunities to make decisions and take risks
- Skills that enhance independent living
- Educational materials and supports
- Skills and resources to find and maintain housing
- Financial literacy and guidance
- Career and education goals
- Mental wellness support
- Preservation of culture
- Connections to community-based programs

A total of 38 young persons received services under an ESSA in 2023-2024.

Section 11: Out-of-Territory Specialized Services

CFS provides a range of specialized services to meet the diverse needs of children, youth, and families. Community-based programming is the first option to assist children/youth with their individual counselling or treatment needs. CFS works with community partners to identify local, northern options for children and youth. If those needs cannot be met in-territory, out-of-territory specialized services may be explored with the child/youth, family, and caregivers, when appropriate.

The Out-of-Territory Specialized Services Program supports children, youth, and families whose needs go beyond the capacity of NWT programs and services. The CFS system holds specialized services contracts for **Individualized/Group Treatment** for children/youth, with service providers located in British Columbia, Alberta, and Saskatchewan. Children and youth are individually assessed and matched with services that best meet their identified level of care and service needs.

The CFS system also has a specialized services contract, specifically for the **Family Treatment Program** located in Saskatchewan, where children and youth are supported with their family with the goal of improving family safety, family functioning, and parent and child well-being.

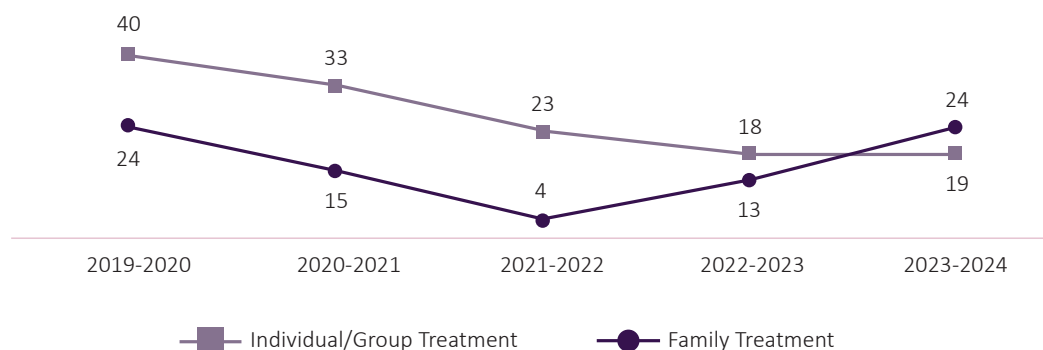
As shown in **Figure 11.1**, in 2023-2024, for the first time in five years, the number of children and youth receiving Out-of-Territory specialized services with their families surpassed the number of children and youth in the individual/group treatment program. This is noteworthy because family treatment is a more holistic approach that promotes family connectedness and preservation, which moves the CFS system towards cultural safety.

In 2023-2024, there were a total of 43 children and youth receiving specialized services outside the NWT.

44% of the children/youth in out-of-territory specialized services were supported through an **Individual/Group Treatment Program**.

56% of the children/youth in out-of-territory specialized services were supported through a **Family Treatment Program**.

FIGURE 11.1 NUMBER OF CHILDREN AND YOUTH IN CONTRACTED OUT-OF-TERRITORY SPECIALIZED SERVICES



Section 12: Adoptions

Adoption refers to the process in which the social and legal care of a child is transferred from the natural parent to the adoptive parent(s). Adoption can take place for several reasons and can look different for every child, depending on their unique situation.

From 2014-2024,
the average number of
adoptions per year is 39.

In the NWT, there are four (4) types of adoption:

- **Custom Adoption** is a long-standing practice amongst Indigenous people of the NWT and is the most common type of adoption. Under the *Aboriginal Custom Adoption Recognition Act*, Custom Adoption Commissioners are nominated by their local Indigenous governments and organizations based on their knowledge of Indigenous customary law.
- **Departmental Adoption** only applies to a child/youth placed in the permanent custody of the Statutory Director through a court order which is granted under the following circumstances:
 - a. The court has determined the child/youth needs protection, has made a declaration that a child/youth needs protection, and has determined it is in the child/youth's best interests. Family reunification is always the first priority, but when that option is not possible, adoption can be one way to meet their essential needs. With the consent of the parent(s) and child (if 12 years of age or older), their Indigenous government(s) and/ or cultural organization would be notified and asked to engage and collaborate in the planning process for the child/youth prior to an adoption being finalized.
 - b. With the consent of a parent, the court has determined it is in the best interests of the child/youth to place the child/youth in the permanent care of the Statutory Director for the purposes of adoption.
- **Step-Parent Adoption** refers to an adoption by a non-biological parent wishing to adopt the children/youth of their spouse or common-law partner.
- **Private Adoption** refers to adoption arranged between two families. In these adoptions, the birth parent(s) choose the adoptive family.

In 2023-2024, 22 of 26 adoptions in the NWT were custom adoptions.

85%

Custom Adoptions

4%

Private Adoptions

0%

Step-Parent Adoptions

12%

Departmental Adoption

Section 13: Continued Transformation of the Child and Family Services System

In October 2023, the **Child, Youth and Family Services Strategic Direction and Action Plan** (2023-2028) was released. Its primary intent is to fundamentally shift the system towards culturally safe services to help address the overrepresentation of Indigenous children and youth in prevention and protection services.

To ensure more families stay together and provide better support to children, youth, and families, the Action Plan focuses on seven priority areas over the next five years:

- Work Collaboratively with Indigenous Governments and Organizations
- Care Rooted in Indigenous Practices
- Support to Care Providers and Caregivers
- Strengthen Youth Supports and Transition to Adulthood
- Specialized Services Closer to Home
- Strengthen Human Resources Recruitment and Retention Efforts for an Inclusive and Representative Workforce
- Reduce Administrative Demands for Increased Opportunities to Connect with Families

Alongside the implementation of the Strategic Direction and Action Plan, **the amendments to the CFSA** are underway, which will also support the transformation of the CFS system. The Standing Committee on Social Development (SCOSD) initiated their review of the CFS Act during the 19th Legislative Assembly. The Department's public engagement on the proposed amendments took place in April 2022, and a *What We Heard* Report was posted online on May 2, 2023. The proposed amendments align with the Federal Act and incorporate recommendations made by SCOSD. The Department is currently working towards drafting a Bill to be introduced in the House during the 20th Legislative Assembly.

WORK COLLABORATIVELY WITH INDIGENOUS GOVERNMENTS

Children, youth, and families receiving CFS are often better supported when there is engagement and pathways for community and Indigenous government participation.

As part of our commitment to open and ongoing dialogue in the delivery of CFS, in July 2024, we will be reaching out to Indigenous governments in the NWT with an offer to meet and discuss the Federal Act, particularly on Section 12 (significant measure notice), and determine pathways that support collaborative planning for children and youth.

The Department has also been participating in coordination agreement discussions with the Inuvialuit Regional Corporation and the federal government since April 2022 to identify how it can support the successful implementation of the *Inuvialuit Qitunrariit Inuuniarnikkun Maligaksat* in the NWT.

Throughout 2023-2024, CFS leadership met with the Indigenous Advisory Body (IAB) to receive guidance on the proposed direction of the Child, Youth and Family Services Strategic Plan and Action Plan, as well as support the nomination process of Custom Adoption Commissioners.

CARE ROOTED IN INDIGENOUS PRACTICES

Home, family, community, and cultural connections are all important parts of a person's identity and wellbeing. Indigenous systems of care enable safe, stable, and nurturing relationships between children/youth and their culture, community, family, and caregivers.

A Working Group entitled "Care Rooted in Indigenous Practices" was launched in February 2024 to guide the design of care models to include Indigenous practices and supports that nurture healing and empowerment. The Working Group is a collaborative effort between Divisions of CFS, CSAR, Community Culture and Innovation (CCI), and NTHSSA's Culturally Safe CFS leads. An in-person gathering will be held in May 2024 to further scope the project and will include key knowledge holders.

Beginning in October 2023 and February 2024, the NTHSSA began piloting two Family, Community, and Culture Connection Worker Positions. These positions are working directly with families and informing model(s) development for the family, community, and culture connection project.

To support and enhance cultural, community, and regional representation of custom adoption commissioners, the Department sent letters in January 2024 inviting Indigenous governments across the NWT to nominate Indigenous community members to become Custom Adoption Commissioners. The Department presented to the IAB in November 2023 to further support the nomination process.

In collaboration with the CSAR Division, a Request for Proposal will be posted in April 2024 to support the creation of videos showcasing Indigenous systems of care. It is anticipated that the contract will be awarded in July 2024. The aim is to communicate important Indigenous practices that contribute to keeping children and youth safe, with a focus on:

- Sharing knowledge of Indigenous support systems;
- Increasing awareness and education about the disruption of these systems;
- Highlighting the impact of custom adoption practices on child and family wellbeing; and
- Increasing the number of Indigenous caregivers and care providers.

SUPPORT TO CAREGIVERS AND CARE PROVIDERS

Care providers and caregivers can profoundly influence the lives of children and youth who are required to enter out-of-home care temporarily or permanently. When children/youth stay in the care of their family and extended support network, they remain rooted in their community and culture.

To offset the rising cost of living, the foster care daily rates and adoption subsidies were increased, retroactively to March 1, 2024. These increases also aim to support the recruitment and retention of foster caregivers, particularly in reducing financial barriers for extended families who expressed interest in caring for their relatives. Moving forward, we will continue to look for opportunities to restructure funding in ways that improve financial support for foster caregivers and adoptive parents.

The Department is implementing the HEART and SPIRIT⁹ training and assessment tools for foster placements and caregivers. In collaboration with the CSAR Division, HEART and SPIRIT tools and manuals will also be reviewed and adapted to meet the needs of caregivers and First Nations, Métis, and Inuit children, youth, and families in the NWT, which will support the revision of foster care standards and forms. The phased implementation of the HEART and SPIRIT training and tools will begin in Fall 2024 and take place over the next three years.

STRENGTHEN YOUTH SUPPORTS AND TRANSITION TO ADULTHOOD

Youth in care have the right to positive supports, resources, and safe housing as they transition to adulthood to enable them to thrive as adults.

The Department is participating in the Child Welfare League of Canada's (CWLC) pilot project on the Equitable Standards for Transitions to Adulthood for Youth in Care. Using the equitable standards evaluation model, we will be able to identify where the system can be enhanced to better support youth in the areas of Finance, Education and Professional Development, Housing, Relationships, Culture and Spirituality, Health and Wellbeing, Advocacy and Rights, and Emerging Adulthood Development.

A Working Group, comprising of a cross-section of frontline, policy, quality, and project management staff, was established in October 2023. The Working Group has completed a baseline assessment of fidelity to the Equitable Standards using the CWLC evaluation tool. Next steps include youth engagement aimed at developing actions to improve programs and services for youth transitioning out of care.

⁹HEART: Helping Establish Able Resource-Homes Together. SPIRIT: the Strong Parent Indigenous Relationships Information

SPECIALIZED SERVICES CLOSER TO HOME

Children and youth are better supported when they can receive specialized services in the NWT, and can remain close to their families, friends, community, and culture.

The NTHSSA piloted a cultural wellness camp for Youth with complex needs in November and December 2023. The pilot project included two 14-day camps for youth aged 12-18 years followed by three months of individualized, community-based aftercare support. The cultural wellness camp for the youth pilot project was completed in March 2024. An evaluation is currently underway. The findings along with guidance from the IAB and NTHSSA Leadership Council will inform next steps.

Work on the development of a framework to guide the continuum of specialized services necessary to support the diverse needs of children, youth, and families, is in progress. This work includes understanding the pathways and intersections within and outside of CFS to enhance services for children, youth, and families. Consideration and careful attention are needed to reduce barriers to services and address stigma associated with receiving prevention-focused services through CFS.

STRENGTHEN HUMAN RESOURCES RECRUITMENT AND RETENTION EFFORTS FOR AN INCLUSIVE AND REPRESENTATIVE WORKFORCE

A representative workforce has direct impacts on the support provided to children, youth, and families. Addressing systemic racism experienced by Indigenous employees in the CFS system will strengthen capacity building, reduce staff turnover, and improve service delivery.

The CSAR Division will be establishing a Community of Practice for Indigenous employees, to provide a supportive peer network, discuss practice issues, and share innovations to address anti-Indigenous racism. This Community of Practice will be inclusive of the Indigenous CFS workforce.

Job descriptions and hiring tools are being reviewed and revised to address systemic hiring barriers experienced by Indigenous candidates interested in working in CFS. The review of all CFS job descriptions and interview questions is on track to be completed by March 2025.

The CSAR Division tailored the existing CSAR Training specifically to focus on harmful historical and present-day CFS policies that have contributed to anti-Indigenous racism and systemic barriers for clients. This two-day CSAR training was delivered in November 2022 and in November 2023. Thirty-five percent (35%) of all CFS system staff have completed the CSAR Training – there are trained frontline staff in every region of the NWT along with CFS Departmental Staff and NTHSSA CFS Operational Staff.

REDUCE ADMINISTRATIVE DEMANDS FOR INCREASED OPPORTUNITIES TO CONNECT WITH FAMILIES

Clear and thorough documentation is important to ensure the accountability of service delivery and to maintain the integrity of historical records for individuals who have received services through the CFS system.

Approaches to the CFS and Adoptions Standards and Procedures Manuals are being modernized to ensure that it is clear, concise, and accessible. In 2023-2024, the standard templates were updated to be more user-friendly; and several standards have since been developed using this new template. A scan of other provinces and territories was completed to support the updates to the NWT Adoptions Standards and Procedures Manual, which is anticipated to be completed by December 2024. Throughout 2024-2025 and beyond, the standards and procedures manuals will continue to be updated to reflect new initiatives, such as the HEART and SPIRIT training and assessment tools.

The possibility of introducing a single electronic file is being explored to reduce the administrative burden of maintaining two filing systems (i.e., electronic, and paper-based). We are undertaking a jurisdictional scan among the provinces and territories to inquire if other jurisdictions have implemented a single electronic file system and what their experiences are. Work on the single electronic file will continue in the next fiscal year. We will also explore other technologies to support staff in case documentation, such as voice-to-text options.



Section 14: Conclusion

The landscape of child and family services across Canada is changing as more Indigenous governments exercise jurisdiction in relation to child and family services. Children, youth, and families receiving CFS are often better supported when there is engagement and pathways for community and Indigenous government participation. We must remain open and flexible to new approaches and innovative ideas. We are committed to working with partners to strengthen the design, delivery, and access of CFS.

While progress has been made, there remains more work to be done in transforming CFS into a culturally safe system that supports children and youth in a meaningful way and ensures that more families stay together. Addressing the overrepresentation of Indigenous children and youth in the CFS system requires a whole-of-government approach, including engagement and pathways for community and Indigenous government participation.

The Child, Youth and Family Services Strategic Direction and Action Plan fits alongside many other GNWT initiatives that also aim to support children, youth, families, communities, and those who serve them. We will continue to seek out new opportunities for integration with NWT and GNWT initiatives; actively participate on existing Interdepartmental Working Groups; and have continued engagement with the IAB. Finding opportunities for knowledge exchange will ensure that CFS is learning and growing based on what we hear from communities, families, and staff.



Appendix A: Glossary

LEGEND

- ◇ *Definition is from the Department of Health and Social Services' Caring for Our People: Cultural Safety Action Plan (2019).*
- * *Definition is in accordance with the federal "Act respecting First Nations, Inuit and Métis children, youth, and families."*
- *Definition is based on the current "Child and Family Services Act," and the CFS Standards and Procedures Manual. Definitions will continue to be examined and updated as we adapt to a changing system, particularly through the implementation of the Child, Youth and Family Services Strategic Direction and Action Plan.*

Anti-racism

Anti-racism is the ongoing action to identify, address and prevent racism in all its form¹⁰.

Applicable Aboriginal¹¹ Organization □

An Indigenous government or organization set out in accordance with the NWT's CFS Regulations. A list identifying applicable Aboriginal organizations is maintained by the Statutory Director and can be found here- www.hss.gov.nt.ca/sites/hss/files/resources/applicable-aboriginal-organizations.pdf

Apprehension □

Apprehension occurs when a child is removed because it has been determined that the child is at risk of immediate harm. A child can be apprehended from the care of the parent/care provider or from the person having care of the child at the time of the apprehension.

Children who are apprehended are placed in the care of the Statutory Director of Child and Family Services.

After an apprehension, a child can transition back into the care of their parent/care provider/person having care of the child without the matter going to court when the protection issue is resolved in less than 72 hours.

Apprehension less than 72 hours □

Apprehension less than 72 hours means that a child transitions back to the care of their parent/care provider/person having care of the child without the matter going to court when the protection issue is resolved in less than 72 hours.

Care Provider*

A care provider means a person who has primary responsibility for providing the day-to-day care of an Indigenous child/youth, other than the child/youth's parent, including in accordance with the customs or traditions of the Indigenous group, community, or people to which the child/youth belongs.

¹⁰Berman, G. & Paradies, Y. (2008). Racism, disadvantage and multiculturalism: towards effective anti-racist praxis. *Ethnic and Racial Studies*, 33 (2), p.214-232. <https://doi.org/10.1080/01419870802302272>.

¹¹The term "Aboriginal" in the context of "applicable Aboriginal organization" reflects the terminology currently used in the Child and Family Services Act and the Adoption Act. The Department will propose that this outdated terminology is revised when each Act is amended in the future.

Caregiver (placement resource) □

A caregiver is an individual providing a service on behalf of the Statutory Director of Child and Family Services, such as a placement resource for the child or youth when they must be cared for outside of the home.

A caregiver can be:

- Extended Family Caregiver: the child/youth's extended family
- Provisional Caregiver: a community member who is known to the child/youth/family
- Regular caregiver: someone who is not known to the child/youth/family

Case Plan □

A Case Plan is a plan that must be established for a child/youth by a Community Social Services Worker.

A Case Plan generally provides details on:

- where and with whom the child/youth will live;
- support services promote the safety and wellbeing of child/youth in the home
- counselling, mental health supports and wellbeing;
- how the child/youth will maintain connection with parent/care provider/person having care of the child/youth where the child/youth will not be living with them;
- the child/youth's education;
- the child/youth's cultural, social and recreational activities; and
- any other matter the Community Social Services Worker considers necessary and in the best interests of the child/youth

Child □

A child means a person who is under 16 years of age (i.e., 0-15 years, inclusive).

Child Protection Order □

Child Protection Order ensures the protection, health and safety of a child by providing care for the child while the parent/care provider(s)/person having care of the child are unable or unavailable to care for the child. The Community Social Services Worker can apply to the courts for a Supervision Order, Temporary Custody Order or a Permanent Custody Order.

Community Social Services Worker □

Community Social Services Workers support children, youth, and families in the NWT.

Community Social Services Workers receive specialized training to become statutorily appointed as "Child Protection Workers" under the *Child and Family Services Act*. Foster Care and Adoption Workers are also Community Social Services Workers who receive specialized training and are appointed under the *Adoption Act*. Once appointed, they have very specific duties and responsibilities when providing child and family services.

Cultural Safety ◇

Cultural safety is defined as an outcome where Indigenous peoples feel safe and respected, free of racism and discrimination when accessing health and social services.

Cultural Support Plan □

The Cultural Support Plan supports a child or youth in reclaiming or maintaining connection with their identified community and/or organizations and clearly identifies goals and responsibilities for cultural support. Furthermore, the Cultural Support Plan contains the child/youth's community/regional history, family and kinship connections, cultural knowledge and traditions.

Director of Adoptions □

Director of Adoptions is appointed by the Minister of Health and Social Services under the NWT's *Adoption Act*. Duties and powers of the Director of Adoptions are set out under the Act.

Director of Child and Family Services □

Director of Child and Family Services is appointed by the Minister of Health and Social Services under the NWT's *Child and Family Services Act*. Duties and powers of the Director of Child and Family Services are set out under the Act.

Equity ♦

Equity in health means that everyone has the opportunity to be healthy and recognize that differences in social determinants of health impact peoples' ability to achieve their highest potential of health. Achieving equity requires allocation of resources and designing policies and programs that target populations with the most disproportionate disparities.

Emotional Abuse □

Emotional abuse is a pattern of negative behaviour, repeated destructive interpersonal interactions, or a single, significant destructive interaction by the parent/care provider/person having care of the child/youth toward the child/youth.

The impact on the child/youth of being exposed to these emotionally harmful behaviours may include depression, significant anxiety or withdrawal, self-destructive or aggressive behaviour, or delayed development.

Extended Support Services Agreement □

Extended Support Services Agreements is a written agreement that supports young persons in their transition to adulthood. This service is offered to young persons who were in the permanent care and custody of the Statutory Director of Child and Family Services on their 19th birthday and until they turn 23.

Exposure to family violence □

Exposure to family violence is considered a form of child/youth maltreatment. Exposure to family violence is considered when there is evidence of family violence between two or more adults in the household, and the child/youth's safety is of immediate concern.

Family*

When providing services to an Indigenous child or youth, family includes a person whom a child/youth considers to be a close relative or whom the Indigenous group, community, or people to which the child/youth belongs considers, in accordance with the customs, traditions, or customary adoption practices of that Indigenous group, community, or people, to be a close relative of the child/youth. This broad definition of “family” is also being applied, where applicable, when providing services to non-Indigenous children/youth.

Family of Origin Home

Family of origin home may be inclusive of birth or adoptive parents, siblings, and other relatives, depending on the child’s or youth’s living situation at the time of their involvement with CFS.

Family Mapping □

A technique used to create a visual representation of a person’s family and relationships between members. This technique helps identify family members who may be able to provide support to the child, youth, and family.

Indigenous Governing Body*

A council, government or other entity that is authorized to act on behalf of an Indigenous group, community or people that holds rights recognized and affirmed by section 35 of the *Constitution Act, 1982*.

Neglect □

Neglect is the lack of action by a parent/care provider/ person having care of the child/youth in providing for the adequate care and attention of the child/youth’s needs, resulting in harm or substantial risk of harm to the child/youth.

Neglect is different than a parent/care provider/ person having care of the child/youth being unable to provide basic needs due to socio-economic conditions, such as poverty or lack of adequate housing.

Out-of-Home Placement Resources □

Out-of-Home Placement Resources provide care for children/youth who are unable to live in their family of origin home. See definition for “caregiver” for more information on the types of placements.

Out-of-Territory Specialized Services □

Out-of-Territory Specialized Services are used to provide children/youth with specialized residential treatment services that are not available in the NWT.

Permanent Custody Order □

Permanent Custody Order permanently transfers the custody, rights and responsibilities of a child to the Statutory Director of Child and Family Services until the child reaches the age of 16, however, with the agreement of the youth, a Permanent Custody Order can be extended to the age of majority (19). When a child is in Permanent Custody, they will remain in a home that offers holistic connection and supports to thrive or be adopted, depending on their unique situation.

The Permanent Custody Order may be extended to the age of majority (19) if the youth is in agreement.

Physical Abuse □

Physical abuse is action by the parent/care provider/person having care of the child/youth that caused or is likely to cause a child/youth to sustain a physical injury.

Plan of Care Agreement □

POCA is a written agreement that provides an alternative to the court process when there is an ongoing protection concern involving children under 16 years of age. Depending on the situation, the child may remain in the family of origin home or be cared for outside the home.

The maximum term of a POCA (including extensions) is two years. The Plan of Care Agreement is for children and cannot be used beyond a child's 16th birthday.

Plan of Care Committee □

Plan of Care Committee prepares a Plan of Care Agreement for a child considered to be in need of protection. The Plan of Care Committee is composed of:

- at least one person who has lawful custody of the child,
- the Indigenous governing body/bodies (when applicable);
- the "Applicable Aboriginal organization/organizations" (when applicable);
- other support individuals identified by the family;
- the child (if 12 years of age or older), and
- one Community Social Services Worker.

Sexual Abuse □

Sexual abuse is any sexual act on a child/youth by the parent/care provider/person having care of the child/youth, adult in the household, intimate partner of a parent/care provider/person having care of the child/youth, or, adult or household member who is unable to be ruled out as an alleged abuser.

Significant Measure (s.12 notice)

Section 12 of the federal *Act respecting First Nations, Inuit and Métis children, youth and families* requires the child and family services providers to provide notice to the child/youth's parent(s), care provider(s), and Indigenous governing body or bodies prior to taking the significant measure with the goal of engaging and collaborating on the planning for the child or youth.

Social Determinants of Health ♦

Social Determinants of Health are economic and social conditions that influence the health of people and communities. These conditions are shaped by the amount of money, power and resources that people have, all of which are influenced by policy choices. Social determinants of health affect factors that are related to health outcomes and include early childhood experiences; level of education; being able to keep a job; the kind of work a person does; having food, or being able to get enough food; access to health services and the quality of those services; housing status and physical environments; amount of money earned; gender; and discrimination and social support.

Supervision Order □

Supervision Order is a court order which directs a Community Social Services Worker to supervise the home of a child according to the terms and conditions of the Order.

The Order may be for a period of up to one year. A supervision order does not apply to youth.

Support Services Agreement □

Support Services Agreements is a written agreement for youth, ages 16 to 18 (inclusive), to offer support and guidance in their transition to adulthood.

Support Services Agreements can be made for six months and can be renewed up until the age of majority (19).

Systemic Racism¹²

Systemic racism describes how mainstream institutions, including the public service, normalize and condone, often unintentionally, long standing racist ideas and beliefs into policies, practices, and norms. This results in a system that inherently privileges the ideas and needs of the dominant white population while disadvantaging non-white racial groups, like Indigenous peoples. In turn, systemic racism contributes to inequities for Indigenous peoples. Within health and social services, these inequities impact access to services and quality of care received by Indigenous clients, resulting in inadequate outcomes. Systemic Racism occurs when institutions, such as health and social services, give space to discrimination whether it is intentional or not.

Temporary Custody Order □

A temporary custody order is when the custody of a child or youth is temporarily transferred by the court to the Statutory Director of Child and Family Services. Temporary Custody Orders are age specific.

A Community Social Services Worker may not make an application for an order for temporary custody of a child/youth that results in a continuous period during which the child/youth is in temporary custody exceeding:

- 12 months, in the case of a child under 5 (five) years of age;
- 18 months, in the case of a child 5 (five) years of age or over but under 12 years of age; or
- 24 months, in the case of a child 12 years of age or over.

Also, a court may not make or extent an order that would result in a child being in the temporary custody of the Director for a continuous period exceeding:

- 15 months, in the case of a child under five years of age when the order was made;
- 24 months, in the case of a child five years of age or over but under 12 years of age when the order was made; or
- 36 months, in the case of a child 12 years of age or over when the order was made.

¹²Government of the Northwest Territories. (2021). Northwest Territories Health and Social Services System Human Resources Plan. Retrieved from: www.hss.gov.nt.ca/sites/hss/files/resources/nwt-human-resources-plan-2021-2024.pdf. (p.13).

Unique child / youth (data)

The term “unique” means that a child/youth is only counted once within a particular dataset. For example, a child/youth may have received different types of services throughout the year; however, only the most recent service type for a child/youth may be included in the analysis. This allows for the determination of the number of individual children/youth who received a service through child and family services in that timeframe.

Voluntary Services Agreement □

Voluntary Services Agreements is a written agreement that supports families with children/youth between the ages of 0-18 (inclusive) and expectant parent(s) who would benefit from support as identified by the individual/families. The child/youth may reside in their own home or elsewhere. The initial term of a Voluntary Services Agreement is for six months, with the option for additional six-month renewals until the child/youth reaches the age of 19 (age of majority).

Youth □

Youth means a person who has attained 16 years of age but not attained the age of majority (i.e., 16 – 18 years, inclusive).

Youth Protection Order (16 - age of majority) □

Youth Protection Order preserves the health and safety of a youth by providing care for the youth while the parent/care provider(s)/person having care of the youth are unable or unavailable to care for the youth.

The Community Social Services Worker can apply to the courts for a Temporary Custody Order or Permanent Custody Order. An apprehension is not required.

Circumstances where a Youth Protection Order may be appropriate, are as follows:

- The youth cannot reside with his or her parent/care provider/person having care of the child/youth(s).
- The youth is unable to care for and protect themselves.
- The youth is unable or unwilling to enter into a Support Services Agreement due to developmental, behavioral, emotional, mental or physical incapacity or disorder, or the effects of the use of alcohol, drugs, solvents or other similar substances.
- The youth is living in circumstances of a child who needs protections under subsection 7(3) of the *Child and Family Services Act*.

For more information, please visit:

www.hss.gov.nt.ca

or email at hsscommunications@gov.nt.ca

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