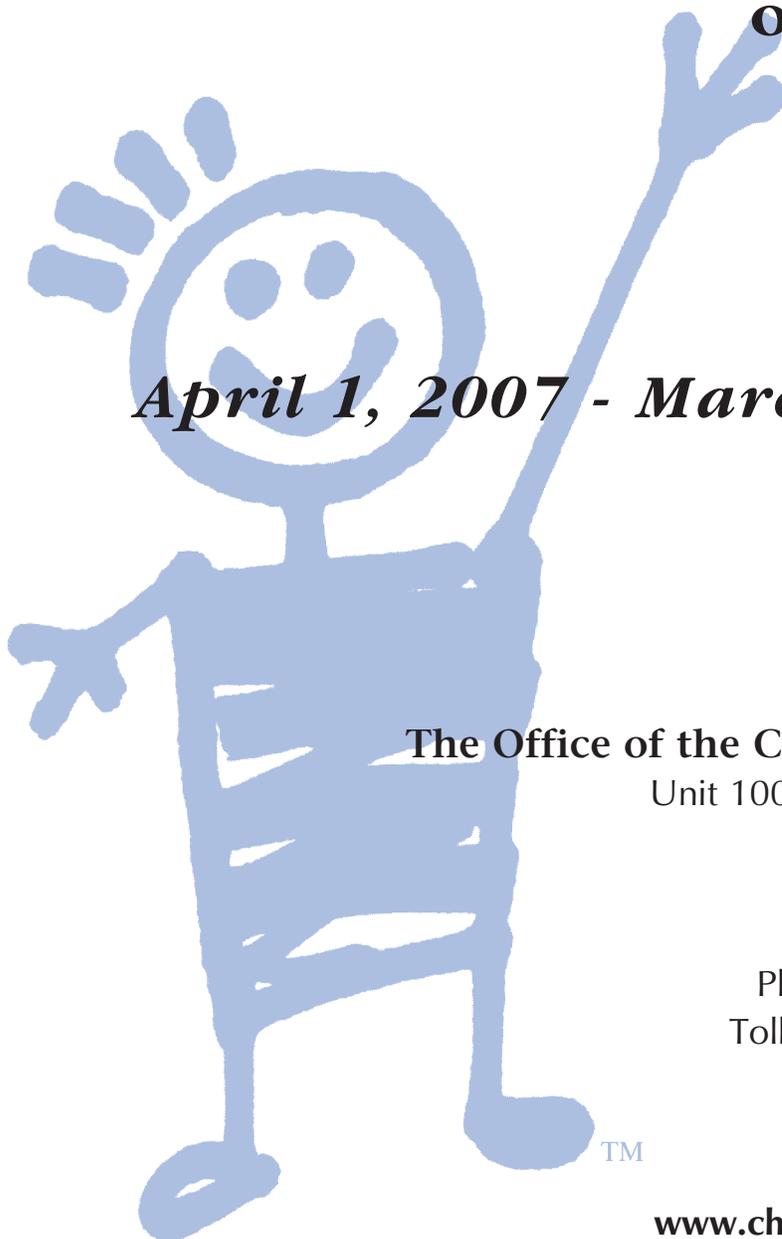


**Annual Report
of the
Office of the
Children's Advocate
of Manitoba**

April 1, 2007 - March 31, 2008



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Acknowledgements

The Children's Advocate wishes to extend acknowledgement and gratitude to:

- the children and youth of Manitoba who continue to have faith that we will help them find their voice and ensure their voices are heard,
- the staff of the OCA who continue to work tirelessly in the best interest of young people,
- the media who diligently ask the questions in an effort to educate themselves and the public on the important matters facing children and youth involved with the child and family services system,
- Mary Ellen Turpel-Lafond and John Gretchner from British Columbia's Office of the Representative for Children and Youth and Marvin Bernstein and John Brand from Saskatchewan's Children's Advocate Office who shared their expertise toward the development of our Special Investigation Review Unit,
- all the caregivers, service providers and community leaders who demonstrate their commitment to value children, and
- my own children who continue to be my greatest teachers.

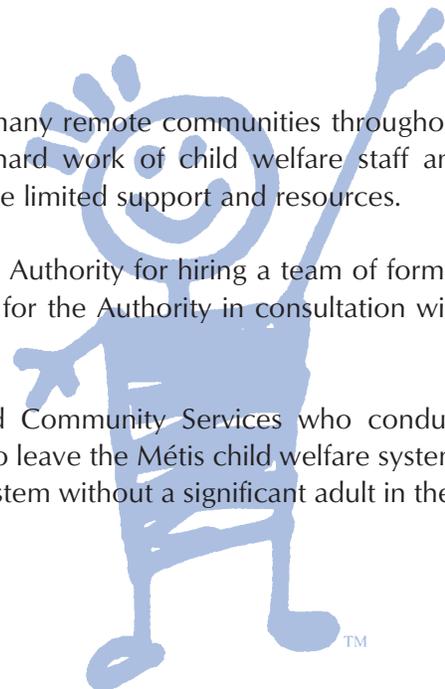
The Children's Advocate and the staff of the Office of the Children's Advocate would like to note, with sympathy, the untimely passing of Manitoba's first Children's Advocate, Wayne Govereau, on May 4, 2007 at the age of 49.

Bright Spots

In the course of our work this year, the OCA has attended many remote communities throughout the province. We wish to recognize and commend the hard work of child welfare staff and caregivers who work for children with great dedication despite limited support and resources.

We wish to commend the General Child and Family Services Authority for hiring a team of former youth in care to help establish a youth engagement strategy for the Authority in consultation with VOICES, Manitoba's Youth In Care Network.

We extend congratulations to the Métis Child, Family and Community Services who conduct celebrations to honour the young people who are preparing to leave the Métis child welfare system. We commend them for ensuring that no youth leaves their system without a significant adult in their life to provide them support.



The History and Role of the Children's Advocate in Manitoba

The Office of the Children's Advocate (OCA) was created under *The Child and Family Services Act* and proclaimed April 1, 1993. The office originally operated under the umbrella of the Department of Family Services and the Children's Advocate reported to the Minister of Family Services. In 1996, consistent with legislative requirements, an all-party committee was established to conduct a review of the office with public hearings commencing in May 1997.

On March 15, 1999, in response to recommendations arising from the review, the Office of the Children's Advocate became an independent office of the Legislative Assembly. It currently operates in an arm's length relationship with the child and family services system. It exists to represent the rights, interests and viewpoints of children and youth who are receiving, or are entitled to receive, services as prescribed under *The Child and Family Services Act* and *The Adoption Act*. The Children's Advocate is empowered to review, investigate, and provide recommendations on matters relating to the welfare and interests of these children. The Children's Advocate prepares and submits an annual report to the Speaker of the Legislative Assembly.

On April 8, 2005, the Lieutenant Governor in Council, on the recommendation of the Standing Committee of the Assembly on Privileges and Elections, appointed Ms Billie Schibler as the Children's Advocate for a three-year term and a reappointment for another three-year term to commence on April 8, 2008.



The Importance of Having an Independent Children's Advocate

Advocates challenge the system. They point out current practices, policies or legislation that are not meeting needs and expectations. Advocates work for change ... and change is not always easy for people to accept. Advocacy can create tension, but can improve the system.

Children especially need advocates. They live in a world where adults make decisions about their lives. They have a voice but they have virtually no legal power to make anyone listen to that voice. Our experiences speaking with children and youth in the child and family services system have shown us they often feel they have no say in what happens to them.

Our mission is to animate their voices and ensure their rights, interests and viewpoints are valued, respected and protected. Our advocacy efforts and services are child-centred, family-oriented and anchored in the community. They are delivered in an ethical, culturally sensitive and respectful manner.



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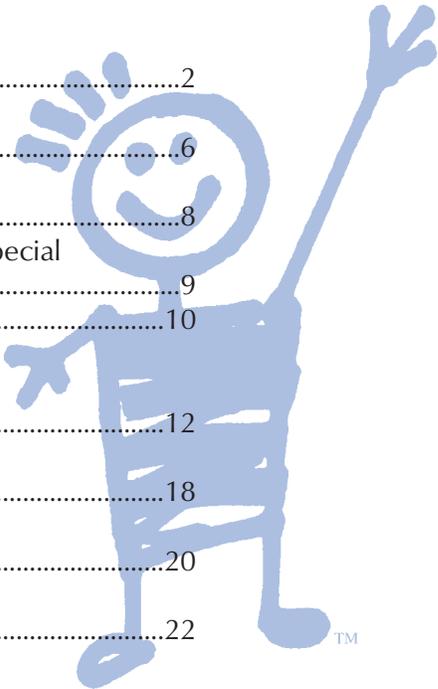
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A Message from the Children's Advocate

In accordance with Section 8.2 (1)(d) of *The Child and Family Services Act*, I respectfully submit this document as my annual report for the time period beginning April 1, 2007 to March 31, 2008.

This annual report concludes my first term as Manitoba's Children's Advocate, a responsibility I continue to perform with gratitude and honour. This report will pose many questions, not just for the child welfare system or for Government, but for all Manitobans.

Most of this year has been devoted to following up on the five reviews the OCA conducted last fiscal year and monitoring progress on the nearly 300 recommendations made to government in these reports. We began preparing ourselves toward assuming responsibility for reviewing publicly funded services around child deaths in Manitoba. With the added responsibilities and increased staff to fulfill a new role, it became necessary to begin searching for a new home for the Office of the Children's Advocate. We determined that it was critical for us to be located centrally within Winnipeg so that any youth entering the city or residing in the city could easily locate us to access our services. We also began a review of the progress that government has made regarding the OCA's 2004 report on the Child & Family Services system's over dependence on the use of hotels and shelters. This review will be submitted to the Minister of Family Services and Housing and made public by the OCA in 2009.

Last year we provided details about the five major reports we completed that were primarily generated from tragedies and the death of children. All eyes are upon Manitoba's child welfare system and the direction in which it is moving. Many provinces are struggling with the same child welfare issues, some of which have entailed horrific offences against children.

Our message stressed the importance of putting children first. Yet, as the child welfare system in Manitoba learns to work together for improved services, and while the provincial government publicly supports this through the introduction of legislation to "Put Children First," this is much bigger than a single system's response.

While the general public is saddened by these tragedies and tries to understand what is going on in Manitoba's child welfare system, they are often looking to find out what has gone wrong with the system. Some are looking to find reasons why devolution may not have been successful. I need to re-emphasize that these matters require more than a system's response. It is something upon which we must all join together to solve.

As a country, we have ratified the *United Nations Convention on the Rights of the Child*. Canada has made a statement to the rest of the world that says we value our children and

we are committed to ensure they have protected rights for quality of life in an environment in which they can prosper.

In a speech made famous by Barack Obama as Illinois Senate Candidate he stated, “For alongside our famous individualism, there is another ingredient...a belief that we are all connected as one people. If there’s a child on the south side of Chicago who can’t read, that matters to me even if it’s not my child.”

I will further that statement for Manitobans and say that if there is a child being sexually exploited on the streets of Winnipeg, that matters to all of us even if it’s not our child.

If there is a young person in Brandon who has left the child welfare system but has no family, no supports, and is struggling to survive, that matters to all of us even if it’s not our child.

If there is a child in Shamattawa who lives in a house with black mold and unsafe drinking water, that matters to all of us even if it’s not our child.

If a youth is living in depressed conditions in Garden Hill where many of their friends are taking their own lives, that matters to all of us even if it’s not our child.

If a mother cannot provide for her baby in Pukatawagan because milk and diapers are unaffordable, that matters to all of us even if it’s not our child.

As a province attempting to put children first, the question becomes how do we get there? What is the responsibility of government, society and other service sectors in helping Manitoba find the way? Will we ever have enough resources of skilled, qualified social workers, caregivers and other service providers to meet these growing demands? Will we ever be able to change our course, make these matters right, and truly put children first?

These are questions that are being asked for the purpose of heightening public awareness. We, at the Office of the Children’s Advocate do not hold all the answers. We will soon be undertaking the review of child deaths related to the child welfare system and other publicly funded services. We will be charged with the task of ensuring that the messages from those children are conveyed with sensitivity so that everyone can learn from their stories and trust that their circumstances are not repeated. In the telling of their story and in “Honouring Their Spirit”, it is our hope that we as a society will continue to work together to find the answers.

Respectfully Submitted by

Billie Schibler
Children’s Advocate



**AN OVERVIEW OF THE MAJOR INITIATIVES
UNDERTAKEN BY THE OCA**

2007 - 2008



MAJOR INITIATIVES

The following are the two primary initiatives undertaken by the OCA in the 2007/08 fiscal year and while this has been the general focus of activity, the high volume of advocacy services provided on a daily basis cannot be understated. A reflection of these services can be found within our statistical analysis at the end of this report.

Bill 11: *The Children’s Advocate’s Enhanced Mandate Act*

As the OCA moved towards a proclamation date of September 15, 2008, our first priority was to recruit staff to work on developing policies and procedures for this program and begin familiarizing themselves with the intricacies of reviewing the service systems involved with a child who dies.

We spent time exploring the services provided by the Child Advocates in Saskatchewan and British Columbia. Both had already undertaken the responsibility of service reviews related to child deaths. From their systems, we adopted what would be relevant to our province, and then created what would be unique to Manitoba.

Section 10 Reviews into Child Deaths Will Move to the Office of the Children’s Advocate (OCA) where they will be referred to as “Special Investigations”

The people, who would become Special Investigators, came to the OCA through secondments and contracts, bringing with them years of experience working in and around the child welfare system. Not only did they know and understand *The Child and Family Services Act* and the Provincial Service Standards, they also brought great awareness, sensitivity, and various other skills to enhance their teams’ expertise. They began their introduction into reviews and reports by working on the backlog of Child Death Investigations – Section 10’s (under the *Fatality Inquiries Act*), under the service mandate of the Chief Medical Examiner. This allowed them to understand the investigation process, identify what was needed in our independent program development, and begin eliminating some of the back-logged cases.

The OCA was provided additional funds for operational expenses, office space and travel costs to support our commitment to attend communities when necessary to better understand the context of the child’s life. A further commitment by the Manitoba Government is the provision of temporary resources to eliminate the historic backlog.

Recommendations from these reports would now be provided to the Minister of Family Services and Housing, and the Ombudsman. The OCA’s Special Investigation Reports will also be provided to the Chief Medical Examiner for consideration and to assist in the determination of calling an Inquest into the death of that child. The Children’s Advocate will be reporting annually on the themes arising from the findings and recommendations from the child death reviews. The Ombudsman will now report annually on the government’s follow-up from the OCA’s recommendations. As such, two independent organizations will now be publicly reporting on government’s commitment to “putting children first.”

This legislative change would require amendments to *The Child and Family Services Act*, *The Fatality Inquiries Act*, and *the Ombudsman Act* to reflect the shift in the duties and responsibilities surrounding these Special Investigations. These changes were introduced in late Fall 2006 through

Bill 16, *The Children's Advocate's Enhanced Mandate Act*. After the provincial election, it received Royal Assent on November 8, 2007 as Bill 11, *The Children's Advocate's Enhanced Mandate Act* and was set to be proclaimed on September 15, 2008.

While our process was evolving, in each child's situation that we reviewed, one question continued to surface.

What was society's responsibility to these children beyond that of the child welfare system?

Review of Reports From 2006-2007

Last year's annual report provided an overview of the five major reviews conducted by or in collaboration with the OCA in that fiscal year. These reviews gave the Office of the Children's Advocate an opportunity to objectively examine many aspects of the child welfare system.

The significance of these reviews cannot be underestimated. The reports that resulted would put into motion many changes by government to address identified flaws and/or gaps in services provided to children and families across the province. These changes will not occur overnight. Many will take time to develop, but the significance is the public reporting by Independent bodies (The Ombudsman, the Auditor General and the Children's Advocate) on progress, and the public commitment toward transparency and accountability by government.

The following reviews generated almost 300 recommendations:

- A Special Case Review into the Death of a five year old child, completed September 2006,
- "Strengthen The Commitment" - An External Review of the Child Welfare System – A Report to the Minister of Family Services and Housing, Province of Manitoba, completed September 2006,
- "Honouring Their Spirits" - The Child Death Review: A Report to the Minister of Family Services and Housing, Province of Manitoba , completed September 2006,
- "Strengthening Our Youth -Their Journey to Competence and Independence" – A report on Youth Leaving Manitoba's Child Welfare System, completed January 2007, and
- A Special Case Review (Section 4) requested by the A/Director of Child and Family Services, Child Protection Branch into the Death of a three-year-old child, completed January 2007.

The Provincial Government initially organized the recommendations into 7 general "themes" under their "Changes for Children" initiative:

1. Keeping children safe through primary prevention programs
2. A priority emphasis on early intervention for families
3. Enhanced support for front line child protection workers
 - a. Workload relief
 - b. Information system upgrades
 - c. Improved access to information after-hours
 - d. New training programs
 - e. Province wide capacity for Critical Incidents Stress Debriefing (CISD)

4. Improved system's communication
5. Strengthen the new governance structure
6. Fiduciary obligation of the Government of Canada
7. Child Death reviews

The Child and Family Services Standing Committee have identified 9 projects as their first priorities, arising from the government's Changes for Children strategy. The committee is an advisory group comprised of the CEOs from the four Child and Family Service Authorities and the Director of Child and Family Services. These priorities include:

1. Greater connectivity, support, enhancements, & renewal for the Child and Family Services Information System (CFSIS)
2. Differential Response (early intervention, prevention & support to families)
3. Developing Standards, Protocols or Directives
4. Enhanced Communication (internal and external)
5. Intersectoral Partnerships
6. Promoting Positive Outcomes for Children in Care
7. Strengthening Foster Care (recruitment, funding strategies, special rates)
8. Strengthening Youth (in transition, education, health, training, etc.)
9. Training, Workshops and New Information

The OCA is tracking progress on recommendations, some of which include:

1. Aging Out at the age of Majority / Youth in Transition / Out of Care Issues
2. All Nations Child and Family Coordinated Response Network (ANCR), formerly known as the Joint Intake Response Unit (JIRU)
3. Children in Care Issues
4. Compliance Issues
5. Critical Incident Stress Debriefing
6. Differential Response (Prevention and Early Intervention)
7. Disability Issues
8. Emergency Placement Resources
9. Fetal Alcohol Spectrum Disorder (FASD) Initiatives
10. Foster Care Initiatives
11. Foundational Standards
12. Funding Issues
13. Information Systems (CFSIS)
14. Intake Issues
15. Inter-Jurisdictional & Sectoral Issues / Jordan's Principle
16. Legislation
17. Mental Health & Addictions
18. Quality Assurance
19. Recreation and Social Development
20. Risk Assessment
21. Safety of Children
22. Suicide Prevention
23. Training and Orientation Initiatives
24. Transfers
25. Workload Relief & Support to CFS Staff
26. Youth Engagement

**WHAT IS THE ENVIRONMENT SHAPING CHILD
WELFARE IN MANITOBA TODAY?**



What is the Environment Shaping Child Welfare in Manitoba Today?

People from many walks of life, who largely are not exposed to the information we receive at the Office of the Children’s Advocate, approach us to express concern about what is happening “out there”. Their questions are not solely about what is happening in the child welfare system or what is wrong with the child welfare system. It is about what is happening province-wide and what is happening to and with our children.

During fiscal year 2002-03 there were 5,533 children and youth in care of the child welfare system. This was the year when legislation cleared the way for the devolution of child and family services for Aboriginal families to revert to Aboriginal service agencies. Three years later (2005), just six weeks before the new Authorities officially took responsibility of CFS files and service; there were 585 more children and youth in care – an increase of more than 10%. Three years after that, there were an additional 1719 children and youth in care, bringing the number up to 7837. The number of children and youth coming into care in the last three years has almost tripled over the previous three year period.

Number of Children in Care in Manitoba*

<u>Year</u>	<u>Total</u>	<u>Change from Last Year</u>	<u>% Increase from Last Year</u>
2000 – 2001	5,440		
2001 – 2002	5,495	+55	1
2002 – 2003	5,533	+38	.068
2003 – 2004	5,782	+249	4.3
2004 – 2005	6,118	+336	5.5
2005 – 2006	6,629	+511	7.7
2006 – 2007	7,241	+612	8.4
2007 – 2008	7,837	+596	7.6

At the time the new legislation for devolution was passed (November 24, 2003), there were 5,533 children in care, compared to the present figure of 7,837. This represents an increase of 2,304 children, or roughly 29.3% increase.

* Family Services and Housing Annual Reports (1999 – 2008)

There is no definitive answer as to why the numbers of children coming into the care of the child welfare system has increased. Could it be that child protection matters are on the rise? Could it be that the child protection system is more vigilant in keeping children safe under the new Authorities?

Could it be that Manitoba is in serious need of a “Differential Response” approach to help support and strengthen families through earlier intervention?

At the same time

As I hear the news in Manitoba, Canada and beyond I am disheartened by the brutality and severity of offences and assaults against society's most vulnerable - children.

The Canadian Incidence Study (CIS-2003) identifies through research some of the determinants that may lead to child maltreatment. Yet, we all need to ask ourselves what has happened to society when brutalities and fatalities are being committed by parents and caregivers against our young ones. Are these people highly over-stressed? Do they lack resources and supports to reach out for help? Have these individuals become so overwhelmed in their own attempts to survive their own abuse, social set-backs, or day-to-day life that they just snap? Or have they somehow become so disengaged from feelings of love and nurturing that they turn their own pain into vicious attacks or ongoing torment of children?

Did these horrific brutalities always exist but we never heard about them to the same degree or has society begun to pay more attention? Some have suggested that media accounts have sensationalized the situation. Some members of the public have found the reporting to be too graphic and have complained that they should not have to open their newspapers or turn on their televisions or radios to be subjected to such disturbing and upsetting stories.

It is the Children's Advocate's position that when atrocities against children occur we should not be looking away. Perhaps, as a society, we have looked away for too long and avoided the huge social challenges that we face? Based upon media accounts that I have seen and heard regarding the deaths of children and youth, the reporting of the horrendous maltreatment and the violence these children have encountered has largely been depicted accurately. What these children endured was tragic and inhumane. There should be no "sugar coating" of those facts. These occurrences should never become publicly palatable.

At the same time ...

Youth Justice/Auto Thefts/Criminal Behaviours

While we are hearing so much about violence against children and youth, we also saw numerous high-profile instances of youth and young adults engaged in violence towards others.

At the time of the writing of this report I had been invited to participate in a roundtable discussion with the Attorney General of Canada, our provincial Attorney General, the Police Chief and City of Winnipeg Mayor, judges, lawyers, crown attorneys, youth justice representatives and others from the community to discuss strategies to deal with the continued increase in crimes being committed by youth.

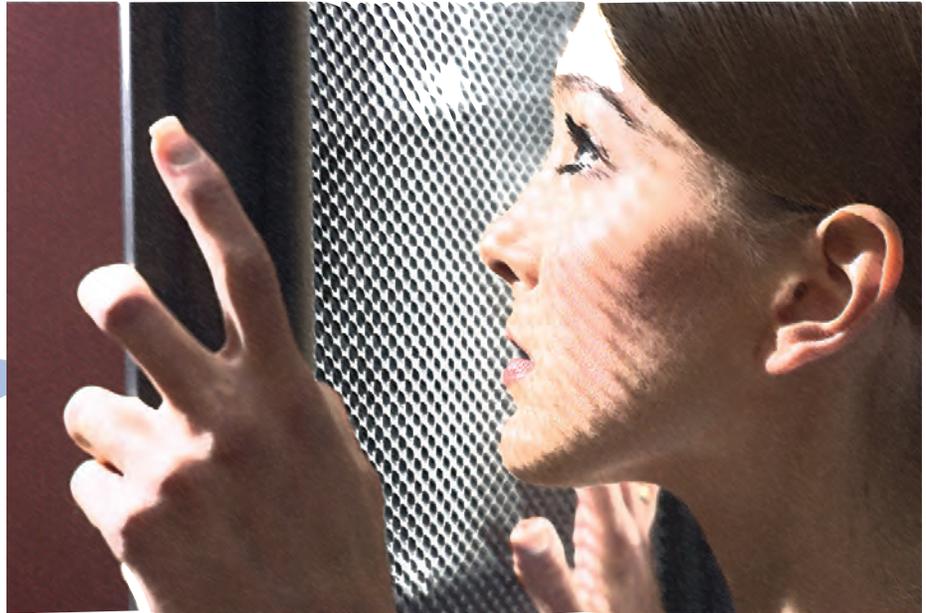
One prominent example has been the reoccurring auto theft offences by youth and young adults. These auto thefts have certainly affected the safety of the general public, have affected insurance costs and have continually challenged the police force and justice officials, increasing pressure to successfully address the criminal behaviours of these troubling youth. Police, media and the public

have become very frustrated in wanting answers as to why youth commit these criminal acts, sometimes over and over again.

The public is shocked, outraged and unable to fathom why many of these youth habitually commit these serious crimes, risking, and even taking innocent people's lives in the process of "joyriding".

It was suggested to the OCA by one media outlet that perhaps these youth are just "bad seeds." I have difficulty believing these youth are "bad seeds". I believe that people choose to do right or wrong according to their life experiences, their level of resilience, and their capacity to know and understand cause and effect/consequence to their behaviour. I have indicated in the past that the criminal activity many youth are involved in is often rooted in deep social problems. There are often factors of poverty, drug use by youth and/or their parents, fetal alcohol spectrum disorders, and the limited capacity of parents/caregivers to provide and protect, that play into the picture.

While it does not excuse the criminal activities committed, knowing the extremely turbulent backgrounds of some of these juvenile offenders makes it easier to understand why they exhibit such radical behaviour. Frankly, it comes as no great surprise that many of these youth do not value the property or lives of others when those youth have lived their few short years in an environment where they have not felt valued by anyone, including their own parents. How can we expect these youth to understand values with which they have virtually no experience?



I Can Do It

Here I am,
No longer missing
The social workers
Have caught me
Put me in a locked up facility

They know I'm here
Staying clean
Controlled by staff
I'm trapped
In a world of misery

They're here trying to help
I'm now turning 18
I'm now a young adult

It's time to change
For me and my future
I have a daughter
The world does not
Revolve around me
No more

I can do it
I have put my mind to it
My triggers are challenges
But I CAN DO IT!

If I think positive
Let no one put me down
I keep going and keep thinking
Of all my support
And the ones I love.

Anonymous Youth

**WHAT HAPPENS WHEN WOUNDED CHILDREN
HAVE CHILDREN?**



What Happens When Wounded Children Have Children?

Where does government or society begin to intervene? Where does prevention begin? When are therapeutic services provided?

What about those children who have been damaged physically, sexually, emotionally, and cognitively at the hands of their parents/caregivers? What happens with their ability to provide care and nurturing when they begin to have children?

What have the surviving siblings of the children who have been abused or killed learned about parenting? Nurturing? Valuing children? Respecting life and humanity?

How can these wounded children heal from what they have experienced and develop the capacity to nurture?

If these badly abused children had survived this brutality, would they grow into someone who could become a loving, nurturing parent or would they become the faces of today's offenders or the mothers and fathers who become notorious for the atrocities they have committed against their own flesh and blood?

Society often reacts with shock. They wonder how people/parents/anyone could commit these types of offences against a child, their own child. Society often asks the questions: What made that parent come undone? What made them commit these attacks against something so precious? Child welfare is often faced with a glimpse from behind the scenes into the discovered history.

We do know that not everyone abused becomes an abuser. We have seen incredible resilience demonstrated by many young people who have lived through horrendous abuses and violations. Many have become the caring loving parents that they themselves deserved. However statistically and experientially we know and see that many of those who do abuse and commit these appalling offenses against the vulnerable have experienced violations committed against them.

How, where and at what point do we stop the cycle of these wounded children? How do we prevent children from going into adulthood, having children, and repeating the cycle of generational pain, suffering, despair and violence? Where are those therapeutic services to help them recover, that we spoke about in our previous annual report.

What are the effects on children who have grown up in the care of the child welfare system? We often hear from those children as young adults, some of which have attached themselves to the mentorship of VOICES-Manitoba Youth in Care Network. In our "Strengthening Our Youth" report we indicated concerns of how well the child welfare system prepares youth towards launching into the adult world. The question becomes, how will the pains of many of these young adults manifest when they themselves become parents? How much work is done by the caregivers, child welfare workers/system to help them heal and prepare for eventual parenthood? When a woman chooses to carry a child and bring that child into the world, what is the responsibility of that woman who consciously chose to have that child? What is the responsibility of the father, toward that child?

WHEN CHILD PROTECTION CAN'T PROTECT



When Child Protection Can't Protect?

Children damaged in the womb continue to be a societal issue.

Every day people attend to or call our office on matters relating to children. They bring forward concerns of every kind. We frequently hear them say “you are the Children’s Advocate, are you there to help all children?” While we certainly attempt to help or redirect and advocate for children and youth as far as we are legally able, there are limitations to our role. A question posed is “but what about the rights of those children who are being born compromised? Why do professionals only step up after the damage is done?”

With the laws that currently exist, the child welfare system has no mechanism to intervene and prevent fetal damage from occurring. Quite often the Child Protection Services are forced to stand idly by watching while an expectant mother drinks to a state of intoxication, digests or intravenously uses harmful drugs or sniffs toxic solvents. The damage is occurring, but the system is helpless, aside from attempting to educate (at times unsuccessfully) or by using threats of an apprehension at birth. The power to intervene and protect this child can only legally occur when the newborn child draws its first breath. Sadly, this is frequently too little, too late.

Tragically, these situations result in a child whose physical and cognitive needs may be compromised for the rest of their life and will not only tax the parents/caregivers and the child welfare system, but many other systems such as health, education and justice.

In instances where these parents are unable to make a sound and responsible choice regarding drug and alcohol use, or if they themselves are cognitively compromised, what is the responsibility and commitment of society toward the unborn child?

“Where does government or society begin to intervene? Morally and legally, where and how does prevention for this child begin?” If the Supreme Court of Canada were to recognize the fetus as a “child-in-waiting” would that allow for a different and earlier intervention?

This is a highly controversial subject. Who knows what the right answer is? Each situation presents unique circumstances requiring a particular and individual response.

But, if that expectant mother is not able to provide an environment for this fetus to develop and enter this world as a healthy child, that matters to all of us even if it’s not our child.

PUTTING CHILDREN FIRST



Putting Children First

Our nation ratified the United Nations Convention on the Rights of the Child on December 13, 1991. When a country ratifies such a convention they make a commitment toward incorporating its provisions into their national legislation. In that way they undertake to protect children's rights and to be held accountable for this before the international community. The Convention is a powerful tool for promoting the rights of children around the world.

In reviewing the UN Convention on the Rights of the Child some important rights to note are that children, have the "inherent right" to life, yet, not only are we losing children through acts of violence, but through suicides occurring among Manitoba's youth. Children have the right to protection from all forms of violence, injury, abuse, neglect, maltreatment and exploitation, yet protection of this right is a continual struggle for the child welfare system.

Children have a right to an education and yet we continue to see vulnerable youth dropping out of the school systems and being selectively excluded from the education system due to their higher needs or behaviours. Any child deprived of liberty has the right to be treated with dignity and respect and this has now become a focus for the reviews being done in the Manitoba youth correctional facilities.

Children born the year that Canada ratified the UN Convention are now becoming adults. How are the lives of this generation of children different than those born prior to 1991?

Ratifying the Convention is different than implementing it. Manitoba's Child and Family Services Act along with the United Nations Convention on the Rights of the Child set out clear guidelines on what children are entitled to whether in the care of the province, in the care of their birth families or whether they are seen to be a responsibility of the federal government like First Nations children.

So why do deplorable conditions for children and families continue a generation later? How do we bring these issues that have been ignored for too long into the forefront of society's consciousness?

How does the child welfare system still deliver equitable services when we know that certain communities are very limited in community resources? How are those agencies compensated in remote communities to ensure that their children are being provided quality care, equitable to what a child in an urban centre would receive?

There still remains a lot of inconsistency in services related to children in this province. We have continued to emphasize that every child in this province is entitled to quality care and service regardless of where they reside. This was further emphasized by the OCA's support for Jordan's Principle, which states: "the well-being and safety of the child must be the paramount consideration in resolving jurisdictional disputes – the child must come first in all instances."

Jordan was a young, medically-fragile, First Nation child from Manitoba who passed away while awaiting decisions in jurisdictional funding disputes between the federal and provincial governments

that would have allowed him the opportunity to finally live with his family in his community.

Even now, post-devolution, different agencies under different provincial CFS authorities provide for children differently, depending upon the service request.

We continue to hear from service providers that there are not enough resources committed to their agencies to allow them to provide the type of therapeutic services needed through prevention and ongoing support.

How does that translate into putting children first?

Is the child welfare system often so focused on their mandated responsibility to protect, that it sees its work with the child ending once the child is safe? The question that emerges is, how does the child welfare system, service children aside from protecting them? How do we move practice in the child welfare system to look at children differently? If we refer back to our “Strengthening Our Youth” report we emphasized the need to begin building capacity of our young people right from first contact. So the provocative questions are “what does the system do with the children once they have them?” How do they plant the seeds of success? How clearly does the system see the potential within each of these children? How the system promotes, nurtures, and engages with these children will determine how well these children become motivated to excel and blossom.

In many ways the issues might be similar to those faced by survivors of residential school. We need to examine what has been modeled to these children to promote positive parenting, to help them heal from the painful experiences of abuse and neglect so that those negative experiences do not permeate into their own parenting styles.

If these “children in care” aren’t provided the opportunity to heal from their pains, that matters to all of us even if these are not our children.

***The Children’s Advocate
recommends that the
province ensure the
availability of therapeutic
services for all
“children in care”
who have experienced
loss, trauma and abuse.***



**COMMUNITY ACTION: THE GRANDMOTHERS’
“PROTECTING OUR CHILDREN” WALK**



**COMMUNITY ACTION: THE GRANDMOTHERS’
“PROTECTING OUR CHILDREN” WALK**



Community Action: The Grandmothers’ “Protecting our Children” Walk

In February, 2007 a matter of grave concern was brought to the OCA by a community member. The issue was related to sexual abuses, specifically incest that was occurring against children in First Nation communities where it was felt that community members were not stepping forward to address the offences and to protect the children.

Following the Children’s Advocate calling together strong Aboriginal women leaders, Clan Mothers, Elders and Grandmothers, a council representing 25 groups called Grandmothers Protecting Our Children (Kookum Gaa Na Da Ma Waad Abinoojiig) was formed. These issues were not just Aboriginal issues but we knew that if we lead the way and took back our responsibility as grandmothers others would follow.

The council organized a Grandmothers’ Walk on September 21, 2007 to bring about awareness of the concerns of violence against children that continues in homes and communities. We marched in Winnipeg and lit a sacred fire at the Forks that burned from sunrise to sundown to represent the children. We were joined by 4 groups who lit sacred fires in other parts of the province to symbolize the four directions and the four races of people. All joined together to proclaim that they want the sexual abuse, incest and violence perpetrated against children to stop. Elders shared teachings for mothers and fathers regarding their roles and responsibilities toward children in their families, their homes and their communities. We were joined in a medicine walk by close to 400 people, including children, youth, and men, as well as Aboriginal and government leadership. It was a healing walk and a calling out across the nation for all grandmothers everywhere to step forward and claim their roles in protecting children. The message was and is, that “Children Are Sacred.”

We received support from one coast of Canada to the other, as far north as Nunavut, across the United States and into South America where word had spread about our medicine walk. People came to our province from thousands of miles away and others contacted us from well beyond to tell us of their plans to join us in organized walks, sacred fires, and prayers in their own communities as a show of support.

One of the most moving supports we received was from groups of inmates in the provincial and federal correctional institutions in Manitoba, where some held their own sacred fires. Many of those inmates had indicated that in their own childhood they had not been protected and had not been seen as sacred. They did not want the same for the next generations of children so they lit their sacred fires in hope that they could help emphasize the sacredness of children and the importance of keeping them safe. At the time of the writing of this report, the grandmothers’ membership has grown through an ongoing annual walk and the vision continues to spread around the world.

If a child is living with sexual abuse or incest, it matters to all of us even if it’s not our child.

SO WHERE WILL THE CHILDREN PLAY?



So Where Will the Children Play?

Manitobans are generous, caring people. They quickly come forward to rescue mistreated animals. They rally to send supplies and donate items internationally to families whose homes and villages have been destroyed by natural catastrophes. They respond with open hearts and open wallets to children who have been orphaned in impoverished and war-torn countries. They step up for many causes. Yet, there continues to be limited resources of people who come forward, even when government introduces a foster care recruitment strategy for encouraging a “circle of care”.

With the increasing numbers of children coming into the care of the child welfare system, we hear “We don’t want these children housed in hotels!” Yet, at the same time, most are reluctant to come forward as caregivers.

Recently a question was posed to the OCA as to whether or not we could intervene in plans for the development of a foster care/group facility in their neighbourhood. These residents wished to be protected from those children attached to the child welfare system. People want change, just “Not in my backyard”.

What most children “in care” will tell you is that there is a stigma that exists when they are known to be living in a foster or group home. I can attest to this from my own experience being “in care” as a youth, and as a foster parent for 20 years. I have seen my foster children turned away from their friends’ homes while their peers have played inside. They were told that the parents don’t allow foster children in their home.

These children were made to feel inferior. They were made to feel like there was something wrong with them, as though they had control over becoming foster children; as though they must somehow be dysfunctional. Children are children. They all look for and need kindness, patience and understanding. These children need to be seen as beautiful gifts with as much potential as the next child if given the right environment and conditions.

Should these victimized children, born into circumstances beyond their control, be segregated from society’s children because of “where they have come from” and “what they have been exposed to”?

So where can these children play?

When children coming into the care of the child welfare system do not have a safe home, an alternate family environment, or communities to protect, welcome, and embrace them, that matters to all of us even if they are not our children.



Circle of Care

In fiscal year 2006-2007, the Manitoba Government introduced a “Circle of Care” recruitment strategy for foster parents and caregivers to help address the need for more placement resources in family settings and decrease reliance upon care by staff in institutional settings, including hotels.

At the time this recruitment is underway, we have instances where foster parents come forward feeling disillusioned and frustrated because they feel that they are not being heard by the CFS system. Mostly they come to the OCA expressing concerns and questions about an agency’s plan for their foster children. They sometimes feel very strongly that the agency’s choices may not be in the best interests of the child. However they are afraid to speak out to CFS or they feel that their concerns are not being given fair consideration.

What is the mechanism for fairly and independently assessing what is in the best interest of the child when agencies and foster parents disagree, aside from the complex appeal process that currently exists? It is our understanding that currently the Manitoba Foster Family Network (MFFN) does not advocate for foster parents throughout their appeal process. It is important to note that sometimes these caregivers just need to be heard and have their feelings and concerns validated. If the end result is that nothing can be done differently, at least the caregivers were heard and fairly treated. While we know that not everyone will be satisfied with the final decision when a dispute arises, perhaps a timelier alternate dispute resolution process could lessen the incidences of foster families going outside the CFS system, thus breaching confidential matters related to the children in their care.

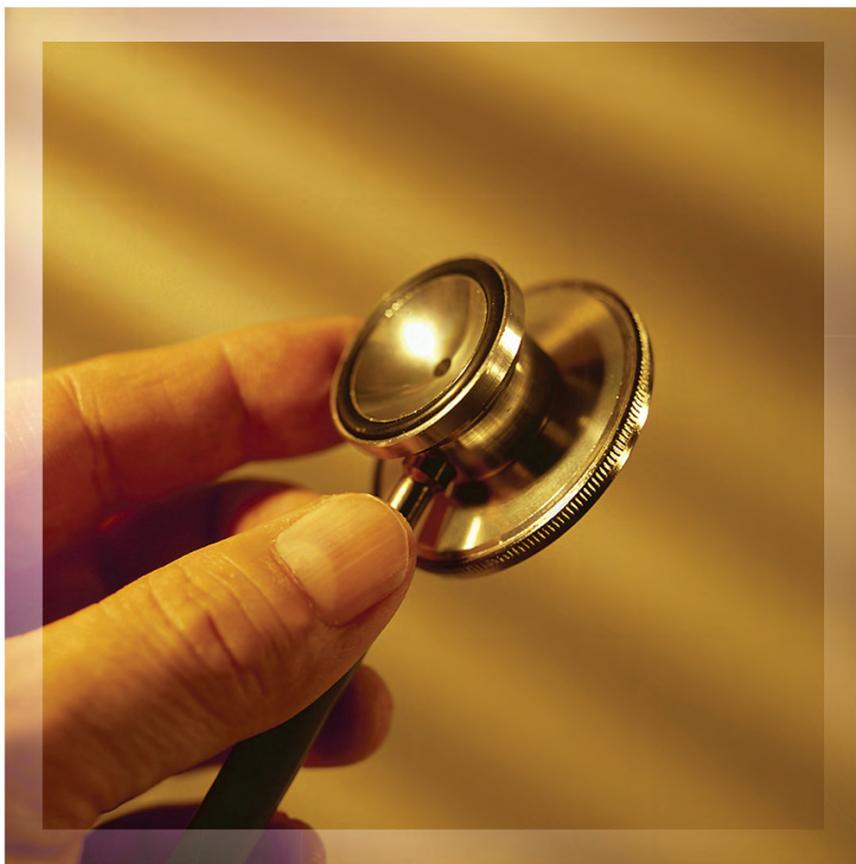
While the government is actively seeking to recruit new foster parents and caregivers, the OCA wonders if this is perhaps an instance where new foster parents are coming in the front door, while experienced caregivers are going out the back door.

We know that foster parents are leaving the system. The first thing to do is to find out why. Shouldn’t it be a standard practice across the province to find out why foster homes want their licenses closed or transferred to another agency? Does the system look at conducting exit interviews with foster parents? If so, are they conducted consistently within agencies and by all child welfare agencies? And if they do, who compiles the information and what is done with it by the Authorities and the Child Protection Branch as part of a quality assurance process?

As part of the government’s “Circle of Care” recruitment program, the system also needs to find out how to retain Manitoba’s caregivers. We also need to ask ourselves a question. If these caregivers/foster parents, as adults, feel that they are not being heard, then how would a child or youth be heard?



**ANCR
(ALL-NATIONS COORDINATED RESPONSE):
THE PULSE OF CHILD WELFARE**



ANCR (All-Nations Coordinated Response): The Pulse of Child Welfare

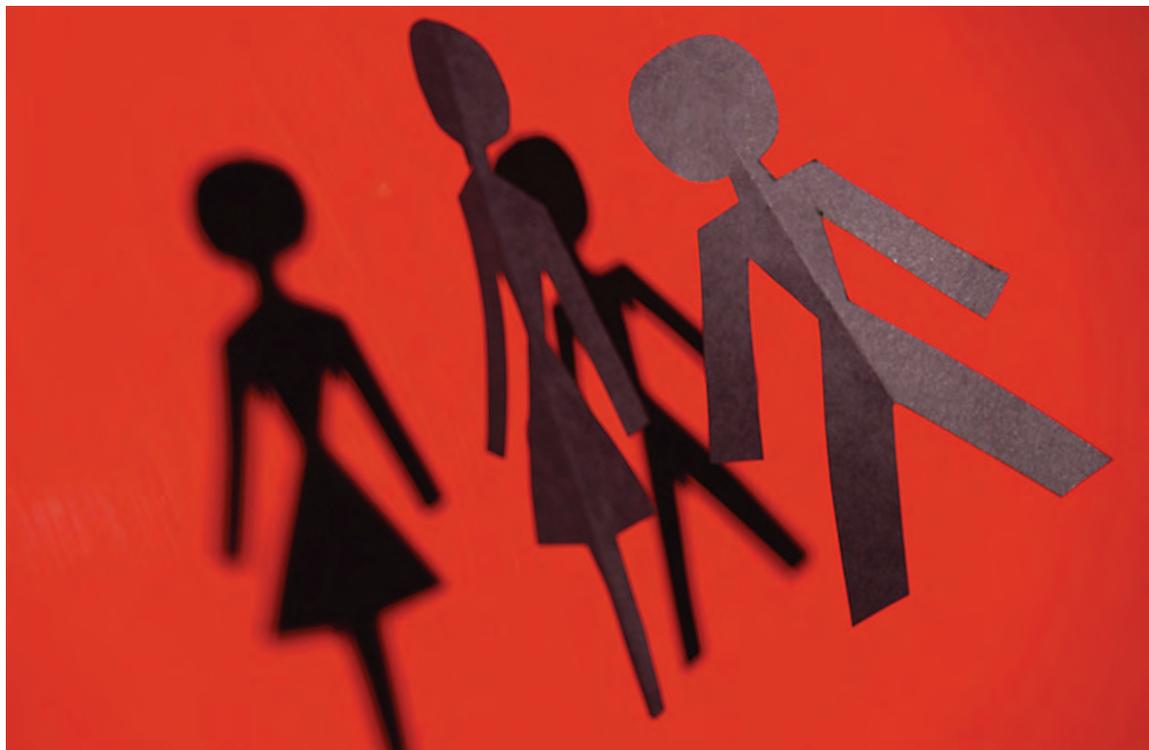
We spoke in an earlier report around the changes that occurred with devolution where some people were resistant to change and where there was animosity between agencies and workers and between agencies and Authorities. It appears that blame dissipates when people begin to feel more settled and more confident in their leadership and in their own roles. Unfortunately in this past year many concerns were raised about what was happening at the front end of the child welfare system, in the critical area of intake, crisis response and abuse investigations. This is an area that requires the quickest thinking and has the highest level of demand. This is an area where supportive protection, prevention and intervention need to take place. This is the area that really sets the tone for families and children who come into first contact with the child welfare system. It is an area that seems to be struggling to find its way.

As we noted earlier there has been a substantial jump in the number of children and youth coming into care. The number of CFS front end cases and calls awaiting attention is staggering. Workers and managers are either struggling to stay afloat or they are leaving for their own survival.

How do you create a positive image for child welfare when it is unable to deliver solid supportive services to children and families at their first contact?

What does it mean to service when providers are on the defensive? How does low morale in the child welfare profession translate into service delivery?

This is the area in child welfare, at this time and moment, in the whole process of devolution that requires the most support and the most attention.



Accountability

Questions continue to be brought forward to the OCA with respect to accountability within the child welfare system. One particular question that continues to arise is: what happens when workers in trust and authority positions, hired to work in the best interest of children, and for the safety and well-being of children, fail to carry out their duties? We are not talking about decisions made with good intentions where human behaviour unpredictably runs awry. We are talking about instances where a worker, manager, or director working within the child welfare system independently makes a decision not to carry out their mandated duties, not to acknowledge vital information related to children's well-being, and knowingly fails to act toward the safety and protection of children? What measures of accountability exist for those child welfare staff that compromise the profession's integrity.

Workers have breached confidentiality. There have been instances of misuse of power and authority.

What about negligence in fulfilling mandated responsibility? What about negligence that results in a tragedy?

We would like to think that the child welfare system can prevent these occurrences. The bottom line is that there is no way that a system can be totally fool proof, but a system can find ways to minimize the risk of occurrence.

People have suggested that there needs to be civil liability actions but the child welfare system already has enough trouble recruiting workers. It would not result in better service if workers were to operate under the fear of being legally responsible should a case plan go wrong. However, the system needs to ensure that people are acting in good faith.

The province needs to further ensure that people are hired with the necessary skills, receive quality training and mentoring, and continue to receive monitoring and support through regular supervision by skilled and experienced management. The province should also research nationally and internationally for options to address those individuals who have clearly and consciously violated professional integrity, the Social Work Code of Ethics, and who have breached *The Child & Family Services Act*.

CHILDREN'S MENTAL HEALTH



Children's Mental Health

In September 2007, the Children's Advocate attended the *National Invitational Symposium on Child and Youth Mental Health* hosted by the Child Welfare League of Canada. The focus of this symposium was to examine the various mental health needs of children across Canada as well as the various government and publicly funded services provided. Historically, most child welfare systems have not focused their resources in the area of prevention and early support services, yet through research we know that all of these children have encountered some form of trauma, whether it be through abuse, neglect, separation or disruption in attachment or physical change in their home environments.

Rather than receiving help to work through their trauma and help to resolve their crisis in a healthy way, the service systems often neglect to address these matters as they are more focused on the day-to-day case planning for the entire family unit. For some of those children and youth however, the child welfare treatment placements and foster homes and the health, justice, and education systems will at times address the behaviours that result from the trauma by condoning the use of psychotropic medications to control or calm the child's reaction to their trauma.

The child welfare system and youth justice system must have a clear and accessible collaborative link to children's mental health services. The systems should be able to access psychiatric and psychological assessments without barriers. While we recognize that some of these crisis response services are geared toward a therapeutic intervention, accessing these assessment services is critical for all children placed within emergency placements and crisis stabilization units.

What are the ethical implications of providing prescription drugs to stabilize children and youth who have suffered trauma? Who ensures the medical professionals and the child welfare system educates and oversees parents, caregivers, front-line workers, group home and shelter staff around information on the medication, diagnosis, possible side effects, possible long-term effects as well as homeopathic/natural healing alternatives? Most importantly who informs and educates the children and youth?

If more and more children are being prescribed psychotropic medication to address their trauma and resulting behaviours, this matters to all of us even if these are not our children.

This is an area that is being looked at or examined in provinces across Canada. The OCA will be reporting on Manitoba's use of psychotropic drugs on children attached to the child welfare system in the near future.

A psychoactive drug or psychotropic substance acts upon the central nervous system. It alters brain function, resulting in temporary changes in perception, consciousness, mood or behaviour. Drug abuse and dependence in the patient may develop from prolonged use, making the ethics of drug use a growing debate

(edited Wikipedia definition)

COMMUNITY INVOLVEMENT



Little Grand Rapids



Churchill

Community Involvement:

National/International

- Reconciliation Child Welfare Conference, Oklahoma City, OK
- Canadian Council of Provincial Child and Youth Advocates, Executive Meeting, Ottawa, ON.
- National First Nations CFS Conference, Edmonton, AB
- Ranch Ehrlo, Regina, SK
- Maple Creek Healing Lodge, SK
- Child Welfare League of Canada Board of Directors Meeting, Ottawa, ON
- CWLC National Invitational Symposium on Child and Youth Mental Health, Toronto, ON
- CCPCYA Annual and Executive Meeting, Edmonton, AB
- Governor General Aboriginal Discussion Group, Toronto, ON
- Gathering of youth – Graffiti Gallery – Governor General 07

Provincial

- Laurel Centre Breakfast and Annual Fundraiser
- MB Foster Family Conference, Gimli, MB
- Opikihiwawin 4th Annual Traditional Pow Wow, Winnipeg, MB
- CFS of Western Manitoba Annual General Meeting, Brandon, MB
- Marymount Annual General Meeting and Cultural Day, Winnipeg, MB
- Family Mediation Annual General Meeting, Winnipeg, MB
- Manitoba Service Excellence Awards, Honouring Audrey Lumsden for the Service Excellence Award, Winnipeg, MB
- Keeping the Fires Burning, Winnipeg, MB
- Villa Rosa Annual General Meeting, Winnipeg, MB
- Agassiz Youth Centre Annual Cultural Day, Portage la Prairie, MB
- Honouring the Community, Community Education Development Assoc., Winnipeg, MB
- DOCFS Annual General Meeting, Portage la Prairie, MB
- Boys & Girls Club of Winnipeg, 30th Anniversary Celebration and Dinner, Winnipeg, MB
- Children's Hospital Child Protection Centre 25th Anniversary, Winnipeg, MB
- Manitoba Aboriginal Youth Achievement Awards, Winnipeg, MB
- MATC Annual Meeting, Winnipeg, MB
- Animikii Ozoson CFS Annual General Meeting, Winnipeg, MB
- Project Neecheewam Open House, Winnipeg, MB
- CFS in Manitoba, Trends and Challenges Conference, The Pas, MB
- Diversity and Employment Equity Conference, Winnipeg, MB
- PACCA – Ian Logan Awards, Winnipeg, MB
- Métis Child, Family and Community Services Youth Celebration, Winnipeg, MB
- Manitoba Child Sexual Exploitation Summit, Winnipeg, MB
- Family Enhancement Community Program First Nations Family Centre Grand Opening, Winnipeg, MB
- Bapiiwin (Survival: Overcoming) Aboriginal Peoples and Decolonization: A dialogue on Cultural Competency, Winnipeg, MB

This year, the Children’s Advocate and staff traveled to the following communities:

- Norway House
- Fisher River First Nation
- Buffalo Point
- Brandon
- Austin
- Arborg
- Lynn Lake
- Leaf Rapids
- Peguis First Nation
- Little Grand Rapids
- Sagkeeng First Nation
- Sioux Valley
- Oak Lake
- Churchill
- Split Lake
- Thompson
- Portage La Prairie
- Teulon
- The Pas
- Woodlands
- Brokenhead
- Garden Hill
- Red Sucker Lake
- Wasagamack
- St. Theresa Point
- Gimli
- Long Plains First Nation
- Sandy Bay
- La Salle
- Nelson House

Presentations and Submissions

This fiscal year the Children’s Advocate and staff of the OCA made presentations to the following organizations.

- Child and Youth Care Workers’ Association graduation celebration: keynote address
- Community of Lynn Lake
- MB Foster Family Conference
- Community of Little Grand Rapids
- Community of Churchill
- DOCFS: First Nations CFS Worker Diploma Program graduates
- Marymound Child and Youth Care Workers
- Mary Jane Cooking Show (radio program)
- Teacher’s Institute on Parliamentary Democracy
- Jack River School, Norway House

- First Year students of the William Norrie Inner City Social Work program
- Northeast Interlake Domestic Violence Committee
- Ma-mow-we-tak Friendship Centre staff and community members, Thompson, MB
- Boys & Girls Club of Thompson, MB
- RRC Youth Recreational Activity Worker program
- East Kildonan Kiwanis Club members
- System Kidz live interview (radio program) Voices, MB Youth in Care
- Fourth year students BSW program University of Manitoba
- Frontier School Division
- New Directions: Three Parent Programs Unit team
- Southern First Nations Network of Care, Portage la Prairie, MB

OCA Involvement on Committees

The Children's Advocate and the staff of the OCA participate on the following community committees:

- Child Inquest Review Committee (CIRC)
- Provincial Advisory Committee on Child Abuse (PACCA)
- Voices, Manitoba Youth in Care
- Canadian Council of Provincial Child and Youth Advocates
- Advisory Committee for Sexually Exploited Youth
- Child Health Committee, Children's Hospital
- Media Awareness Initiative about Sexually Exploited Youth (MAISEY)
- Social Planning Council of Winnipeg
- Circle of Courage
- Child Welfare League of Canada
- CIS Steering Committee (Canadian Incidence Study of Reported Child Abuse and Neglect).

Youth Rights Pamphlet

Late in the fiscal year, the Manitoba Human Rights Commission in collaboration with Manitoba's Ombudsman and Manitoba's Children's Advocate began work on the sixth pamphlet in the *Rights of Youth* series. The new pamphlet, ***Rights of Youth with Physical Disabilities*** will be available on the websites of all three organizations.

Web Site Statistics:

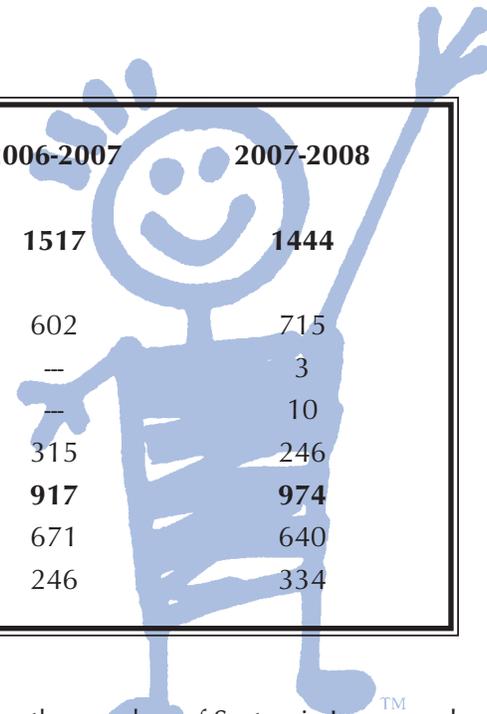
Visits to our website increased by 40% this year, largely driven by people viewing and downloading information from the major child welfare reviews we completed and posted on the website. More than 116,000 people visited www.childrensadvocate.mb.ca.



Year-end Statistical Analysis

April 1, 2007 to March 31, 2008





	2006-2007	2007-2008
Total Requests for Service	1517	1444
<i>(this year we have not included very simple requests)</i>		
Total Case Files Opened from requests in 2007-08	602	715
Child Inquest Review Committee (CIRC) files	—	3
System Issue Files	—	10
Case Files Open from Previous Year	315	246
Total Cases worked on in Fiscal 2007-08	917	974
Total Case Files Closed	671	640
Case files remaining open at end of fiscal year	246	334

- Fiscal year 2007-08 is the first year where the OCA is reporting the number of Systemic Issues and CIRC (Child Inquest Review Committee) files that were opened. Systemic Issues and special investigations continue to be an intricate part of the mandate of the OCA.
- The numbers of children and youth with which we worked is greater than the number of files documented, as one file is opened in instances where concerns are raised about sibling groups. Most Advocacy issues are common across the sibling group. For example, access by parent to the child. However, if another sibling in the group requires additional advocacy services and their issue is a separate issue a second file is opened.

Advocacy Findings and Recommendations:

As a result of the concerns raised during our casework in the 2007- 08 fiscal year the OCA made 66 formal, written recommendations to agencies providing child welfare services, including:

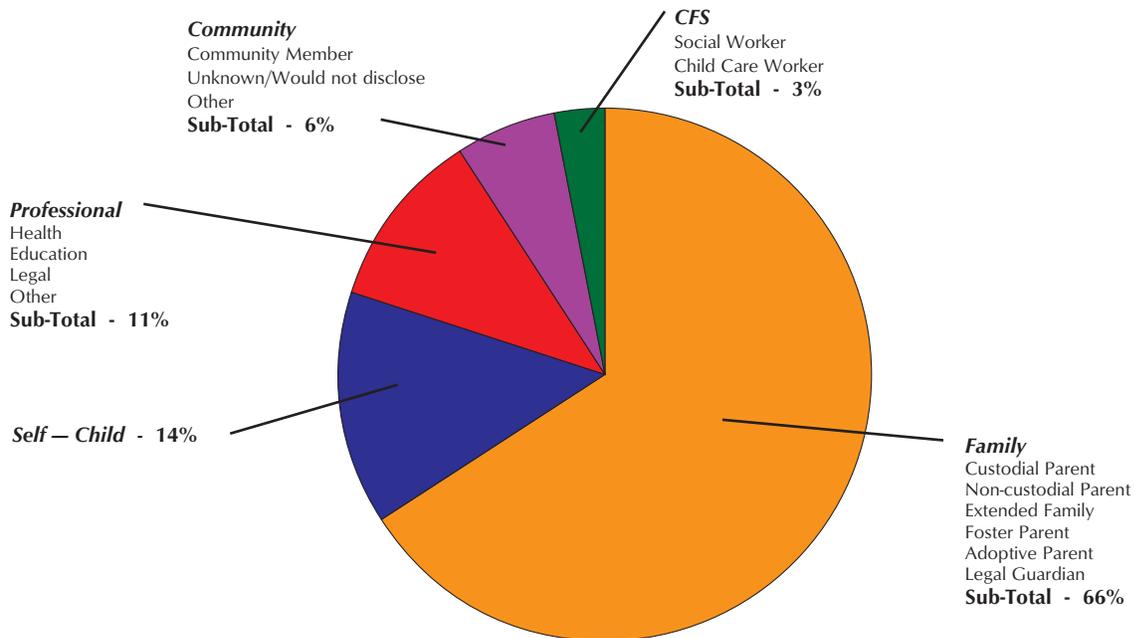
- lack of extension of care/age of majority service planning for youth
- breach of service standards, policies, best practices related to:
 - * confidentiality
 - * medical needs
 - * protection investigations
 - * reunifications of families
 - * follow-up on reporting “Child in Need of Protection”
 - * improper service planning and/or case follow-up
 - * lack of case/file documentation or entry into the CFS Information System
 - * lack of safety planning or caregiver safety checks
 - * lack of therapeutic follow-up for children regarding grief, separation and loss
 - * inadequate staff and foster parent/caregiver training
 - * lack of contact with children and youth as per service standards

- * lack of appropriate family contact for children in care (i.e.: separated siblings)
- * breach of preserving and promoting cultural/linguistic needs of children and youth in care
- * not ensuring children, youth and families are fully informed or included in their case plan and their rights
- * lack of follow-up on required formal assessments (i.e.: behavioral, medical, cognitive, developmental, mental health addictions and parental capacity) for children, youth and/or caregivers.

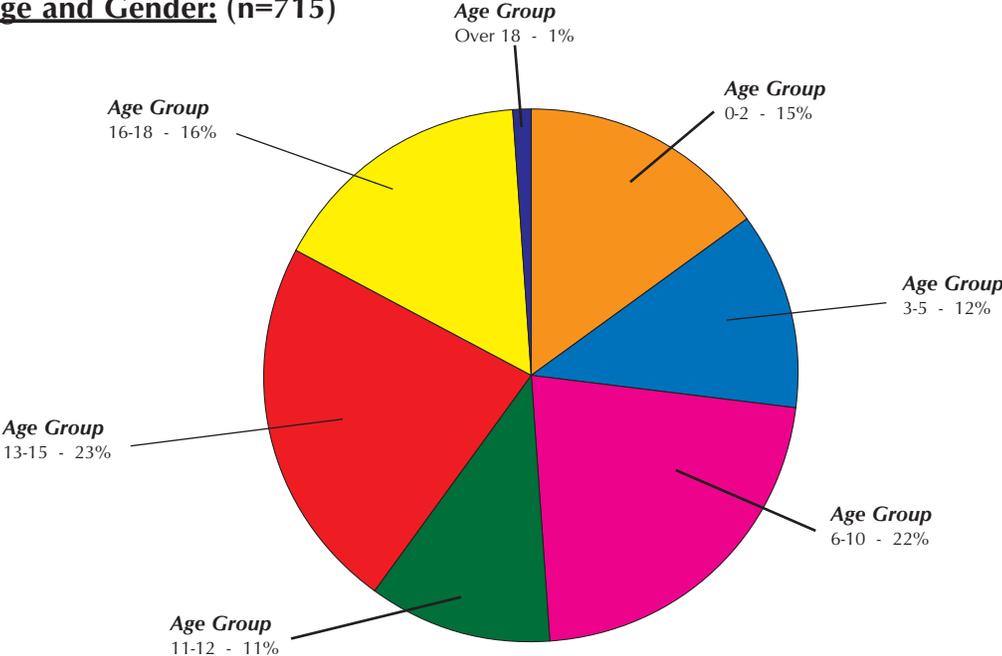
These recommendations have also been forwarded to the respective child welfare Authorities who will track their implementation on an ongoing basis.

Who Contacted the OCA: (n=715)

Consistent with past years about 2/3 of our case files (66%) were brought to our attention by parents, extended families, foster parents and adoptive parents. Children and youth made up 14%.

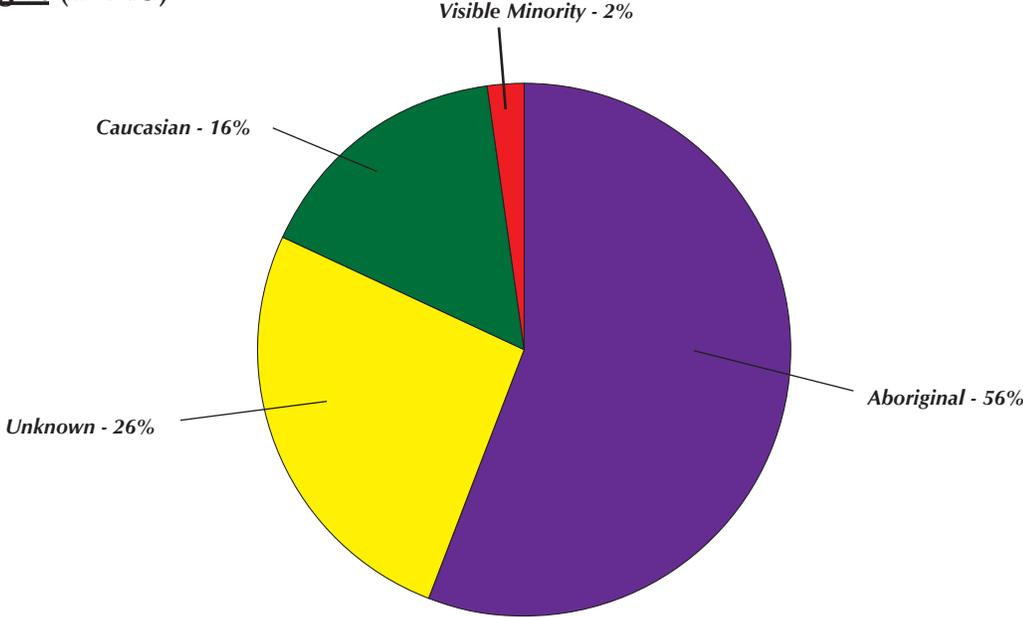


Child's Age and Gender: (n=715)



- OCA services have historically been divided relatively equally between male and female. This year we served 36 more females than males.

Racial Origin: (n=715)



- Racial origin is not determined by the OCA. Individuals must self-declare.
- Aboriginal includes Status, Non Status, Inuit, Dene, and Métis.

Whereabouts of children/youth when they are not living with their intended placements:

Often when people call the OCA their situation has reached a crisis point. Many youth have run from placements or left home. Parents at times will remove children from “care” situations approved by a private agreement or other formalized custodial arrangements. In order to determine how many children/youth were living away from their intended placement the OCA tracks this information.

Since we began tracking this information in 2002, the number of cases where children and youth were not living in their intended has steadily dropped from 17% to 5% or 37 cases this fiscal year. The number increases as children get older.

Intended Placement: (n=715)

CFS Case Category	Number	Percentage
Non-Relative Foster Home	245	34%
Parent/Guardian	188	26%
Relative Foster Home	45	6%
Receiving Resources/Shelter	39	5%
Unknown	37	5%
Relative/Friends	34	5%
Place of Safety	32	4%
Residential Facility	27	4%
Group Home	23	4%
On Own	11	2%
Hotel/Motel	9	1%
Mental Health Facility	8	1%
Youth Correctional Facility	8	1%
Other	7	1%
Hospital	1	.5%
Would Not Disclose	1	.5%
Total	602	100%

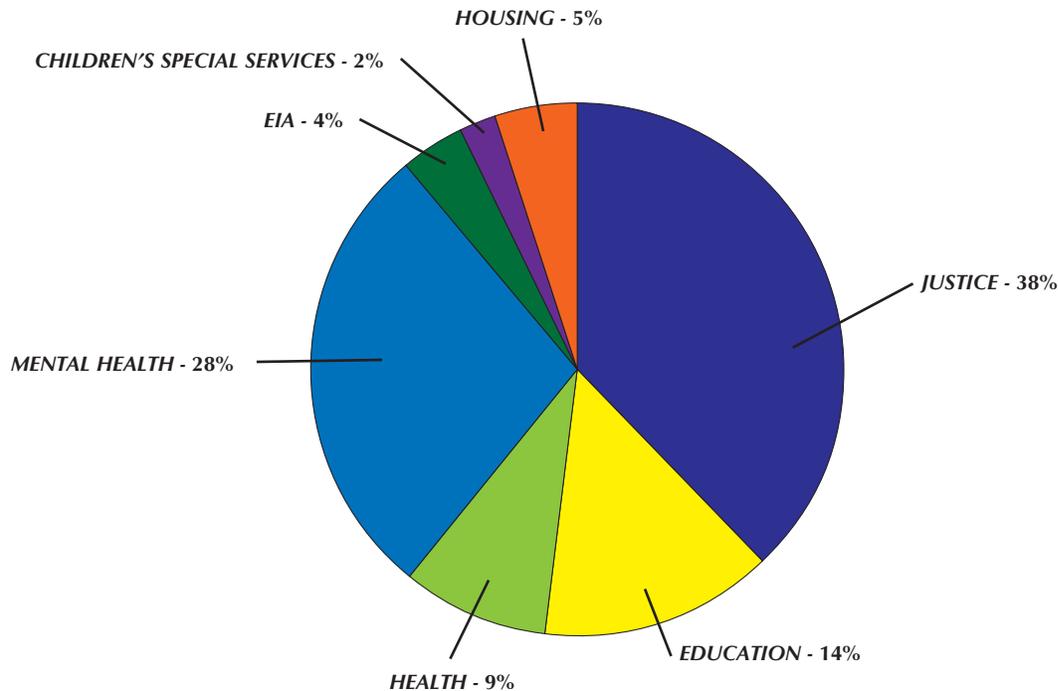
Where the Child or Youth was Living Instead of the Intended Placement:

Whereabouts	Number
Parent/Relative	19
Friend/Community	7
AWOL	7
Unknown/Would not disclose	2
Other	1
Homeless	1
TOTAL	37

Dual Mandate Cases:

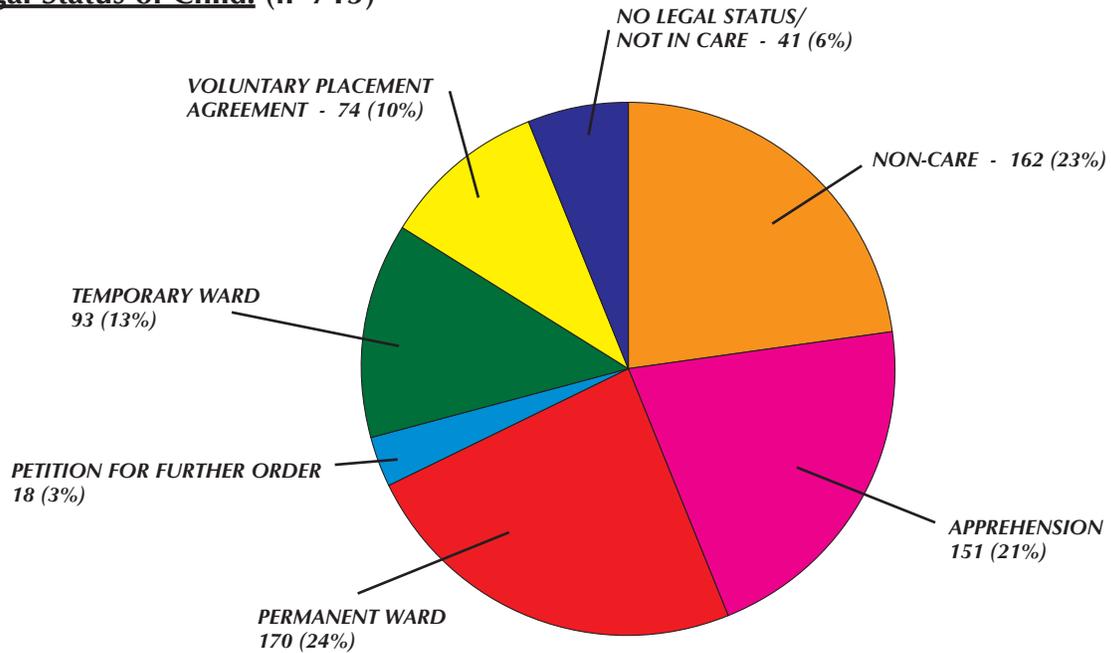
30% of the total advocacy case files opened by the OCA were dual mandate cases, meaning the children or youth had involvement with other service systems in addition to a CFS agency. The majority of these cases fall into the youth criminal justice, children's mental health and education systems.

Dual Mandate Cases: (n=281)(215 Case Files)



- Children and youth involved in the CFS system often have multiple service providers. The advocacy issue may be central to the CFS system or to other child caring systems.
- Though CFS workers may be the individual who holds final, often definitive responsibility to and over the child, their ability to influence, control and or direct resources of another system to address the needs of the child may be limited in many cases.
- To be considered a dual mandate case, the case characteristics need to include:
 - (i) Child/youth had to have current involvement with the CFS system.
 - (ii) Child/youth is not involved with the CFS system but entitled and refused services by a CFS agency/regional office or First Nations agency prior to referral to the OCA.
 - (iii) The case issue resulting in a referral to the OCA was identified as cross-jurisdictional involving another child caring system other than CFS.

Legal Status of Child: (n=715)



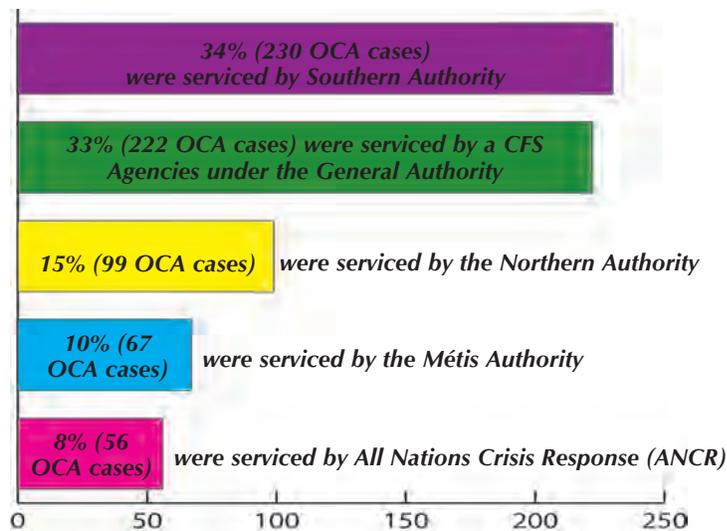
*Included in the total were two cases involving Orders of Supervision and four cases involving youth over 18 years of age. Combined, these cases account for less than 1% of this year’s cases and are therefore not reflected in the graph.

72% of the case files involved children and youth in CFS care where the system had a legal responsibility for the child.

91% of the cases had an active protection file with a CFS agency prior to requesting advocacy services.

94% of the cases had open and active involvement with a CFS agency.

Case Breakdown of CFS Agencies: (n=715)

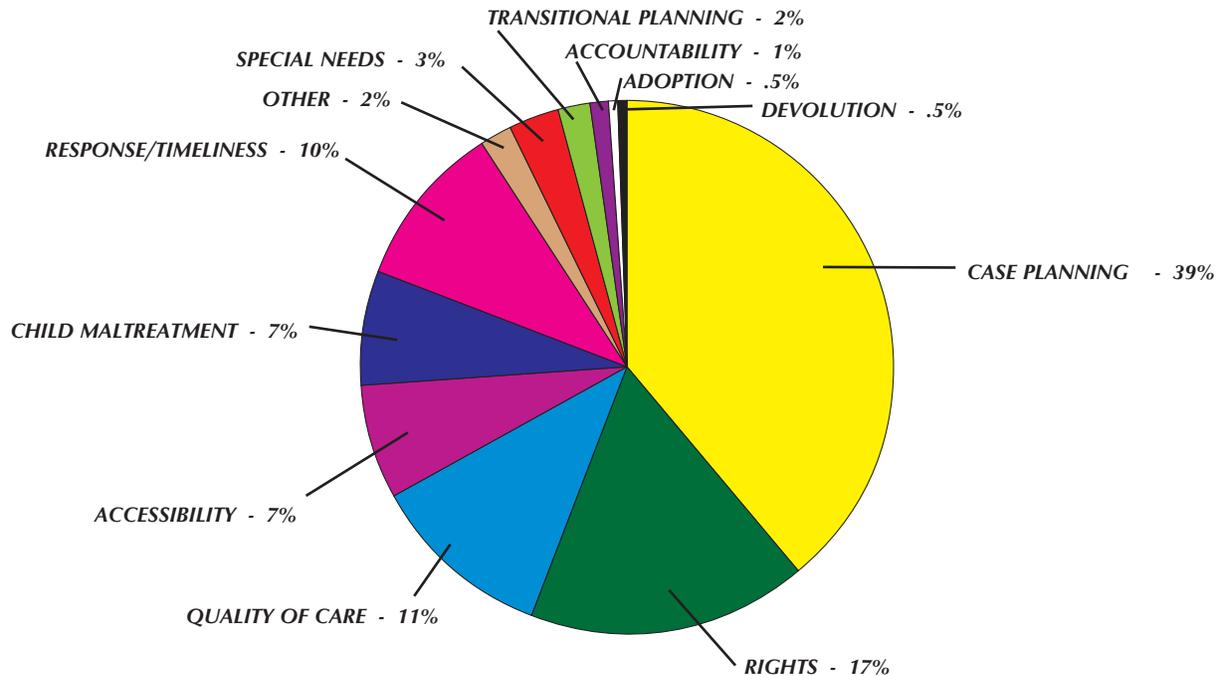


Of the 715 case files, 41 had no CFS involvement at the time contact was made with the OCA. The remaining 674 did have CFS involvement with agencies under the following authorities.

(While ANCR is overseen by the Southern Authority, it is listed separately in this report as it provides crisis and intake service for Winnipeg and the surrounding area on behalf of all Authorities.)

Top CFS Related Concerns: (n=2032*)

OCA Cases may have multiple concerns. This year our case work yielded 2,032 concerns.



- Case Planning remains the top issue. The percentage of concerns regarding rights almost tripled over the previous year. Concerns regarding child maltreatment decreased slightly.
- Over the last eight years the top concerns were Case Planning; Quality of Care; Child Maltreatment. New in 2006-07 were concerns regarding Response/Timeliness by service providers.

Total CFS Related Concerns by Age by Category: (n=2032)

ISSUE	0-2	3-5	6-10	11-12	13-15	16-18	18+	UK	TOTAL	%
Accessibility	12	10	26	12	51	21	-	2	134	7%
Accountability	4	2	9	3	7	5	-	2	32	2%
Adoption	1	0	5	3	3	0	-	0	12	.5%
Case Planning	125	85	182	100	188	117	-	5	802	39%
Child Maltreatment	13	17	40	18	38	15	-	1	142	7%
Quality of Care	9	12	50	33	73	39	-	1	217	11%
Response/Timeliness	24	23	59	18	40	26	-	9	199	10%
Rights	69	25	75	53	85	38	-	3	348	17%
Special Needs	2	3	19	5	16	9	-	0	54	3%
Transitional Planning	1	0	1	2	9	26	-	0	39	1%
Other	9	4	13	5	14	4	-	4	53	2.5%
Total	269	181	479	252	524	300	-	27	2032	100%

Total Issues (CFS Related): 2007-2008

Category	Number	Percentage
Case Planning		
Disagree/Refusal of/with CFS	302	38%
Lack of planning for family	107	13%
Lack of parental/family participation	89	11%
Lack of case planning	77	10%
Poor reunification planning	60	7%
Lack of child participation	50	6%
Lack of appropriate protection plan	36	4%
Other	24	3%
Change of worker	22	3%
Lack of permanency planning	21	3%
Lack of Service standards	14	2%
Lack of worker contact	0	-
	802	100%
Rights		
Lack of information	150	43%
Lack of participation	83	24%
Lack of consideration	83	24%
Lack of knowledge of advocacy	22	6%
Lack of legal advocacy	10	3%
	348	100%
Quality of Care: Child in Care		
Access/visitation to CIC	56	26%
Lack of appropriate care resources	36	17%
Mental health intervention/treatment	23	11%
Child AWOL	17	8%
Other	13	6%
Inappropriate use of intrusive measures	13	6%
Lack of Clothing	12	6%
Lack of education program	11	5%
Inappropriate discipline acts	9	4%
Too many placement moves	9	4%
Lack of food	7	3%
Lack of health care	5	2%
No contact with peers	3	1%
Lack of privacy	3	1%
	217	100%
Response/Timeliness		
Unresponsive	95	48%
Service delays	54	27%
Over response	31	15%
Administrative delays	19	10%
	199	100%

The Fiscal Year Budgets for The Office of the Children's Advocate

Expenditures	\$(000)	FTE
2007-2008		
Total Salaries and Employee Benefits	\$1,000.6	14
Total Operating Expenses	\$ 427.2	

The Office of the Children's Advocate Staff List

Billie Schibler, Children's Advocate
 Bonnie Kocsis, Deputy Children's Advocate
 Patsy Addis Brown, Manager, Administration & Finance
 Thelma Morrisseau, Children's Advocacy Officer
 Jacek Beimcik, Children's Advocacy Officer
 Kevin Barkman, Children's Advocacy Officer
 Rosie O'Connor, Children's Advocacy Officer
 Nelson Mayer, Children's Advocacy Officer *(till January 2008)*
 Carolyn Parsons, Children's Advocacy Officer
 Debra Babey, Advocacy Assessment Officer - Intake
 Dawn Gair, Advocacy Assessment Officer - Intake
 Debra Swampy, Administrative Secretary
 Terese Mojica, Administrative Assistant, Special Investigations Unit



Contract and Secondment staff:

In early 2008 the Office of the Children's Advocate was joined by three new staff to begin the process of working with the Children's Advocate toward the development of the new Special Investigation Unit reviewing the publicly funded services to children who had died.

Mr. James Turk, Special Investigator
 Ms. Shelagh Marchenski, Special Investigator
 Mr. Maxim Kryukov, Special Investigator



*We all have a hand
in it!*