

Finding the Way Back

An aggregate investigation of 45 boys who died by suicide
or homicide in Manitoba



A SPECIAL REPORT BY THE MANITOBA ADVOCATE FOR CHILDREN AND YOUTH, 2021



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ABOUT OUR OFFICE

The Manitoba Advocate for Children and Youth is an independent, non-partisan office of the Manitoba Legislative Assembly. We represent the rights, interests, and viewpoints of children, youth, and young adults throughout Manitoba who are receiving, or should be receiving, provincial public services. We do this by providing direct advocacy support to young people and their families, by reviewing public service delivery after the death of a child, and by conducting child-centred research regarding the effectiveness of public services in Manitoba. The Manitoba Advocate is empowered by legislation to make recommendations to improve the effectiveness and responsiveness of services provided to children, youth, and young adults. We are mandated through *The Advocate for Children and Youth Act (ACYA)*, guided by the *United Nations Convention on the Rights of the Child (UNCRC)*, and we act in accordance with the best interests of children and youth.

Our Vision: A safe and healthy society that hears, includes, values, and protects all children, youth, and young adults

Our Mission: We amplify the voices and champion the rights of children, youth, and young adults

Our Values: Child-Centredness; Equity; Respect; Accountability; Independence

CONTENT WARNING

This special report includes discussion of residential schools, violence, abuse, neglect, addiction, and child deaths by suicide and homicide. In telling the stories of youth and families in this special report, we have carefully considered each detail. Be advised, however, that some information in this special report may not be appropriate for all readers.

If you or someone you know is struggling, help is available.

Manitoba Suicide Prevention and Support Line (toll free): 1-877-435-7170

Kids Help Phone (toll free): 1-800-668-6868

24-hour Youth Crisis Services in Winnipeg: 204-949-4777

24-hour Youth Crisis Services outside Winnipeg: 1-888-383-2776

Residential School Survivor Support Line: 1-866-925-4419

This is an aggregated special report of 45 individual child death investigations conducted in accordance with Part 4 and Part 5 of *The Advocate for Children and Youth Act (ACYA)*.

In order to protect the privacy of the 45 boys and their families, whose stories inspired this special report, no real names or other identifying information have been included.

In accordance with Section 110(1) of *The Youth Criminal Justice Act (YCJA)*, no names or any other identifying information related to a young person dealt with under the YCJA were used in this special report.

Cover Art: *Bear Clan Stages of Life, 2014* by artist Leah Marie Dorion

Artist Statement: This artwork represents the four stages of life teachings of the medicine wheel. In this art image there are four bears with the four colors of the medicine wheel and each bear is the color of the stage they are currently journeying in, for instance the baby bear is in yellow ocher (Stage One), the youth bear is black (Stage Two), the Adult bear is red ocher (Stage Three), and the Elder bear is white (Stage Four). Furthermore, for each stage of life there are four hills to climb and four obstacles to overcome but with determination and courage each hill teaches different life lessons until the next hill emerges to climb. The Elder Bear has climbed the final hill of life and has modeled strength and resilience on its life path and the hill it climbs is more gentle and flowing.

Leah Marie Dorion is a Metis writer and artist currently living near Prince Albert, Saskatchewan. Her artwork celebrates the strength and resilience of Indigenous women and families.

To learn more, please visit: www.leahdorion.ca



Our Commitment to Reconciliation

The mandate of our office extends throughout the province of Manitoba and we therefore travel and work on a number of treaty areas. Our offices in southern Manitoba are on Treaty 1 land, and our northern office is on Treaty 5 land. The services we provide to children, youth, young adults, and their families extend throughout the province and throughout Treaty areas 1, 2, 3, 4, 5, 6, and 10, which are the traditional territories of the Anishnaabeg, Cree, Oji-Cree, Dakota, and Dene peoples, and the beautiful homeland of the Metis nation.

As an organization, we are committed to the principles of decolonization and reconciliation and we strive to contribute in meaningful ways to improve the lives of all children, youth, and young adults, but especially to the lives of First Nations, Metis, and Inuit young people, who continue to be under-served and over-represented in many of the systems which fall under our mandate for advocacy, examination, and review.

With a commitment to social justice and through a rights-based lens, as an office, we integrate the *United Nations Convention on the Rights of the Child*, the *United Nations Declaration on the Rights of Indigenous Peoples*, and the national Truth and Reconciliation Commission's *Calls to Action* into our practice. Our hope is that the scope of our work on behalf of children, youth, young adults, and their families contributes to amplifying these voices and results in tangible improvements to their lives and experiences.

To view our ReconciliAction Framework which describes the measures and activities we are taking as an office towards reconciliation, please visit: <https://manitobaadvocate.ca/wp-content/uploads/MACY-ReconciliACTION-Framework-Final.pdf>

Acknowledgements

We would like to thank the Elders, community members, and service providers, including the Winnipeg Police Service, who shared their knowledge, provided documentation, and connected with this office through interviews and other correspondence. Their insight and experience have been invaluable to this special report.

When meeting with the Elders Council at the Manitoba Advocate office, each member spoke about the importance of helping boys discover where they come from as a way to heal from the past. Their discussion inspired the title of the report. One Elder said that traditions and systems sometimes appear lost, but that traditional knowledge “is not lost if we find our way back to the source, to the Creator.”

We would also like to thank the families who participated in interviews with the hope that in sharing their experiences, other boys across Manitoba will be better served moving forward. We are humbled by your openness, honesty, and in your trust in us to hear and understand the story of your family.

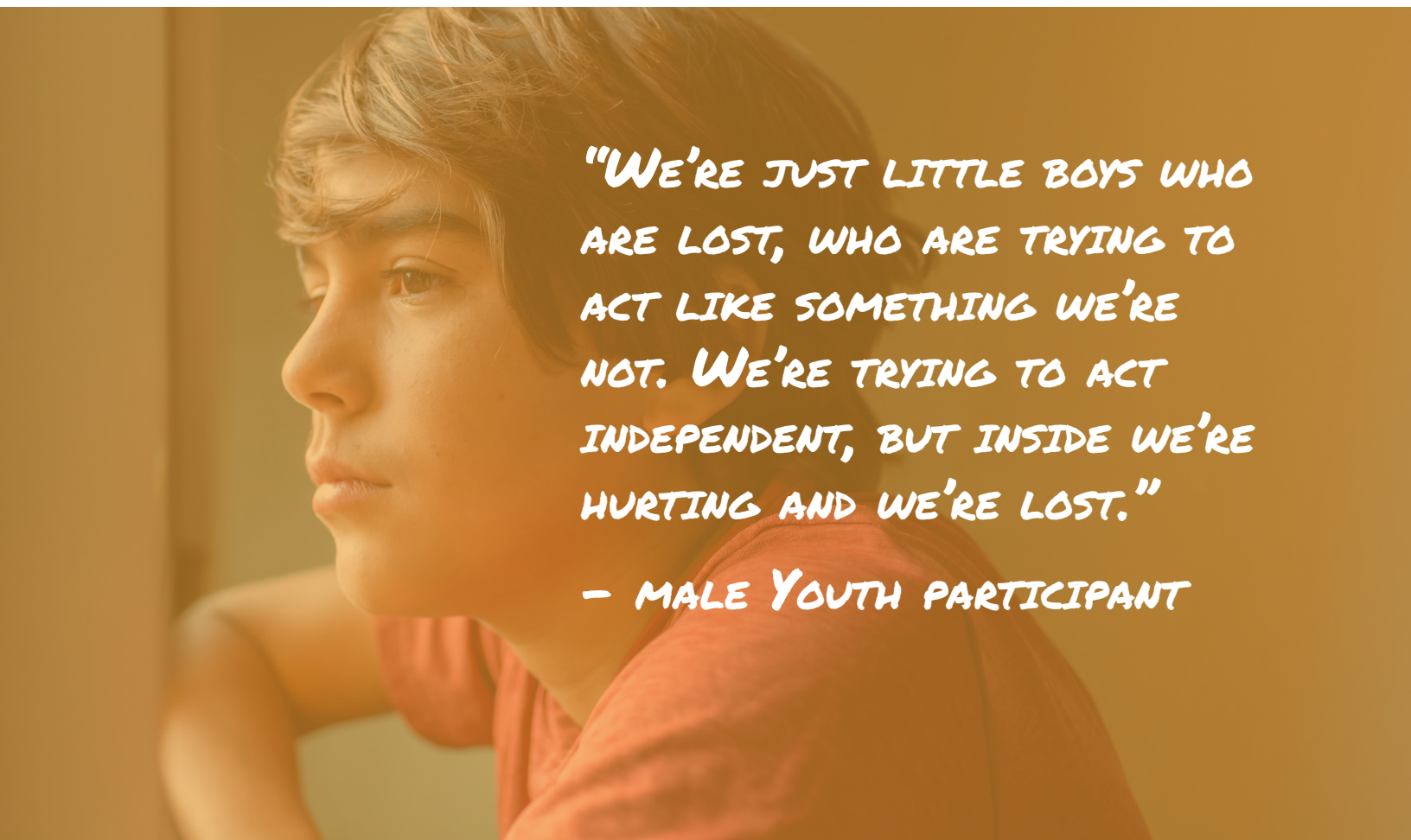
We would also like to acknowledge the involvement of young men from the Manitoba Advocate's Youth Ambassador Advisory Squad! (YAAS!), who shared their experiences and perspectives. We say: Miigwech and are honoured for the involvement of Dr. Marlyn Bennett and Mike Elliott for their work hosting a digital storytelling camp for First Nations young men. Your positivity, creativity, and commitment to the youth who participated is an inspiration.

Talented staff from several departments at the Manitoba Advocate's office helped create this report and we would like to acknowledge the teams from Investigations and Child Death Reviews, Quality Assurance, Youth Engagement, and Public Education for their hard work.

This special report is dedicated to all boys in Manitoba who have lost their lives to suicide or homicide, and to their families who continue to live with these profound losses. We hope this report, its stories, findings, recommendations, and the actions taken as a result improve services for children and that you find some measure of comfort in the ways we have strived to honour the legacy of your child.

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*"WE'RE JUST LITTLE BOYS WHO
ARE LOST, WHO ARE TRYING TO
ACT LIKE SOMETHING WE'RE
NOT. WE'RE TRYING TO ACT
INDEPENDENT, BUT INSIDE WE'RE
HURTING AND WE'RE LOST."*

- MALE YOUTH PARTICIPANT

Message from the Manitoba Advocate

Boys in Manitoba need our attention.

What you will see in this special report is that the data from my office show clearly that far too many boys in Manitoba die by suicide and homicide, and that these preventable deaths are most often taking the lives of First Nations boys in our communities. As some of their lives were impacted by early trauma that set them on a path away from safety and healthy connections, youth who are at risk of suicide or homicide need us all to work together to help them find their way back.

Among other themes, this special report looks at how discrimination and racism against First Nations boys can become barriers to the realization of their fundamental rights to receive culturally safe and supportive services. As a province, we need to continue uprooting and dismantling systemic and community-level discrimination and racism so all boys, and especially First Nations boys, can find healthy connections and open doors to public services. When investments are made in the specific needs of boys, the social safety net is reinforced and creates an environment where boys are supported to live and thrive – one of their rights articulated in the *United Nations Convention on the Rights of the Child*.

The purposes of this special report are threefold: to advance understanding of boys who were involved in the child welfare system and who died by suicide or homicide in the last 10 years; to enable and empower First Nations boys to share their experiences walking through life; and to develop recommendations that increase the effectiveness and responsiveness of public services for boys.

We approached this work carefully and with respect for the youth whose stories we are representing. As a non-Indigenous organization embedded in the provincial legislature, my office holds a responsibility under provincial law for investigating child deaths and examining the impacts of services on all young people. The data made it clear early on that suicide and homicide deaths of boys most often affect First Nations youth and their families. Therefore, we spent time ensuring the structure and framework of our investigations reflected our commitments to learning



Ainsley Krone

A/Manitoba Advocate for
Children and Youth

and growing in a spirit of decolonization and reconciliation. Guided by the Knowledge Keeper at our office, we combined investigative and qualitative research approaches. My team identified modifiable risk factors for the 45 boys who died and, together with an Indigenous scholar, we held a digital storytelling workshop with two First Nations boys.

We reviewed our previous investigations into the 45 deaths and reached out to each of the families, which led to in-depth interviews with a number of them, where we learned more about the boys and the experiences of their families. To inform recommendations, we also consulted with service providers, Indigenous governments, provincial government departments, service experts, community leaders, youth, and the Elders Council at our office. One Elder in particular met with our team on more than one occasion to provide guidance and insight into the traditional roles of boys and pathways towards healing and reconciliation.

As noted, over the span of the last 10 years, the majority of youth involved with child welfare who died by homicide or suicide were First Nations. At the root of these findings is the ongoing legacy of colonization and continuing experiences with systemic discrimination and racism, which underscore adverse childhood experiences and service disparities for boys.

In early childhood, many of the boys were exposed to multiple traumatic experiences, including witnessing intimate partner violence and caregivers who lived with substance use disorders in their homes. Many of the boys experienced neglect and physical abuse. When my team and I spoke with families during the investigation, many of them described how the intergenerational legacy of residential schools and child welfare involvement affected their abilities to parent safely. Several of the boys' families lived in poverty. Importantly, Manitoba has the worst child poverty rates among the Canadian provinces, with 28% of children living in poverty as of December 2020, according to a report by Campaign 2000, a network that tracks child poverty rates nationally. Child poverty is felt most prominently among First Nations families, with a staggering 65% of First Nations children on-reserve in Manitoba living in poverty.

In adolescence, the majority of the 45 boys became disconnected from school and became chronically absent, with some dropping out altogether. In Manitoba, there is a persistent achievement gap between Indigenous and non-Indigenous students, with Indigenous boys having a graduation rate of 48%, compared to 87% for non-Indigenous boys in 2019. Family members we interviewed and First Nations boys themselves described experiences of being treated differently by teachers and peers in schools due to their race and cultural background.

Most of the boys who died by homicide had known gang associations. Without an alternative sense of safer belonging, some of the boys relied on gangs for support and identity. This, in turn, placed them at risk of lifetime involvement in the justice system and death by homicide.

While more has been written by our office -and in general- about the experiences of girls in public systems, this report focuses on the lives, experiences, and deaths of boys. Reducing the risk of suicide and homicide of boys, and particularly First Nations boys, is part of the work of reconciliation. Manitoba needs to build systems that recognize and address the inequities caused by historical injustices experienced by boys and young men. Respecting the work of the national Truth and Reconciliation Commission (TRC), the *United Nations Convention on the Rights of the Child*, and the *United Nations Declaration on the Rights of Indigenous Peoples*, I am issuing the following recommendations:

First, and in alignment with Calls to Action 1 and 5 of the TRC, I recommend evidence-based and culturally safe interventions for parents and caregivers living with substance use disorders delivered in their home, with the goal of preventing apprehensions whenever possible and when safe to do so. By strengthening families, children can be supported to stay in their homes and in their communities when health-related needs are identified (see page 61).

Second, I recommend culturally-safe engagement initiatives tailored to Indigenous boys as part of the province's Indigenous Inclusion Strategy, with the goal of increasing attendance and high school completion rates, and eliminating the education achievement gap between Indigenous and non-Indigenous students in Manitoba (see page 62).

Third, I recommend sustainable and long-term strategies that ensure intercultural and anti-racist education for students, administrators, teachers, and support staff at schools across Manitoba, with the objective of addressing systemic discrimination in schools (see page 62).

Finally, I recommend community consultations to update and implement a comprehensive provincial youth gang prevention strategy that coordinates existing funding and resources with the goal of reducing youth homicides in Manitoba (see page 63).

My office has 13 open and outstanding recommendations previously made to the provincial government to address known gaps in youth mental health and substance use treatment services, including a call to create and publish a youth addictions strategy. This aggregate investigation and special report continued to find gaps in the services provided to youth who use substances in Manitoba.

Today, I reaffirm how urgently Manitoba youth need government action when it comes to youth mental health and recovery, particularly in a post-pandemic world. We know the pandemic has affected everyone's mental health profoundly and this is especially true for children and youth whose education, social lives, and home environments may have changed dramatically. I continue to call on the Manitoba government to expand the availability of youth mental health and substance use treatment services immediately, in order to prevent future harms to children and youth (see page 64).

A special feature of today's release is the companion music video that was created by two male members of our Youth Ambassador Advisory Squad (YAAS!). The video, created during a week-long digital storytelling camp we sponsored, details some of their experiences growing up as First Nations boys in Manitoba. In it they share their journeys and the work each of them continues to do towards a hopeful future where all young people in Canada can access opportunities in equal measure.

As we drafted this report, Elders spoke to us about the importance of recovering what has been lost: the traditions and ceremonies that connect young boys to their grandparents and support their identity development. With this special report, Manitobans across the province, and the Government of Manitoba specifically, have the opportunity to listen to the voices and centre the experiences of these boys and their families.

Ainsley Krone MA PC-IIC, RSW
A/Manitoba Advocate for Children and Youth

Recommendation Summary



Implement evidence-based, culturally-safe interventions for caregivers with substance use disorders



Continue work on an Indigenous Inclusion Strategy in schools, in collaboration with school divisions



Develop anti-racist education initiatives in schools for students and staff



Fund a comprehensive provincial youth gang prevention strategy



Immediately respond to the lack of effective substance use treatment services for youth by prioritizing the development and implementation of a youth addictions strategy

Message de la protectrice des enfants et des jeunes du Manitoba

Les garçons du Manitoba ont besoin de notre attention.

Dans ce rapport spécial, vous allez constater que les données de mon bureau montrent clairement que trop de garçons au Manitoba meurent par suicide et par homicide, et que ces décès évitables coûtent la vie le plus souvent aux garçons des Premières nations dans nos collectivités. Étant donné que certains de ces jeunes ont été marqués très tôt par des traumatismes qui les ont éloignés de la sécurité et de saines relations, ceux qui risquent d'être victimes de suicide ou d'homicide ont besoin que nous fassions tous notre part pour les aider à retrouver leur chemin.

Ce rapport spécial traite plusieurs thèmes, notamment la façon dont la discrimination et le racisme à l'égard des garçons des Premières nations peuvent faire obstacle à l'exercice de leurs droits fondamentaux et ainsi les empêcher de recevoir des services adaptés à leur culture et à leurs besoins. Comme province, nous devons continuer d'éradiquer la discrimination et le racisme systémiques et communautaires pour que tous les garçons, et en particulier les garçons des Premières nations, puissent avoir de saines relations et compter sur des services publics qui leur sont ouverts. En répondant aux besoins particuliers des garçons et en investissant dans ce domaine, nous renforçons le filet de sécurité sociale et créons un environnement permettant aux garçons de vivre et de s'épanouir – ce qui est l'un des droits énoncés dans la *Convention des Nations Unies relative aux droits de l'enfant*.

Ce rapport spécial a trois objectifs : mieux comprendre les garçons qui ont été confiés au système de protection de l'enfance et qui sont morts par suicide ou homicide au cours des dix dernières années; permettre aux garçons des Premières nations de partager leurs expériences de vie; formuler des recommandations pour que les services publics soient plus efficaces et mieux adaptés pour les garçons.

Nous avons effectué ce travail avec précaution et en respectant les jeunes dont nous racontons les histoires. À titre d'organisation non autochtone intégrée à la législature provinciale et en vertu de la législation provinciale, nous sommes chargés d'enquêter sur les



Ainsley Krone

Protectrice des enfants et des jeunes
du Manitoba par intérim

décès d'enfants et d'examiner les impacts des services sur tous les jeunes. Les données ont rapidement montré que les décès de garçons par suicide et homicide touchent le plus souvent les jeunes des Premières nations et leurs familles. Par conséquent, nous avons veillé à ce que la structure et le cadre de nos enquêtes reflètent notre engagement à apprendre et à évoluer dans un esprit de décolonisation et de réconciliation. Guidés par notre gardienne du savoir, nous avons combiné recherche d'enquête et recherche qualitative. Mon équipe a relevé des facteurs de risque modifiables chez les 45 garçons décédés et, avec la collaboration d'une universitaire autochtone, nous avons organisé un atelier de narration numérique avec deux garçons de Premières nations.

Nous avons réexaminé nos enquêtes sur les 45 décès et contacté chacune des familles, ce qui a mené à des entrevues approfondies avec un certain nombre d'entre elles et nous a permis d'en apprendre davantage sur les garçons et sur les expériences de leurs familles. Pour nous aider dans nos recommandations, nous avons également consulté les fournisseurs de services, les gouvernements autochtones, les ministères du gouvernement provincial, les experts en services, les leaders communautaires, les jeunes ainsi que notre Conseil des aînés. Un aîné en particulier a rencontré notre équipe à plusieurs reprises pour offrir de précieux

conseils sur les rôles traditionnels des garçons et sur les chemins menant à la guérison et à la réconciliation.

Comme on l'a constaté, au cours des dix dernières années, la plupart des jeunes confiés au système de protection de l'enfance qui sont morts par homicide ou par suicide étaient membres des Premières nations. Le legs durable de la colonisation et la présence persistante de la discrimination et du racisme systémiques sont à la base de ces constatations, qui mettent le doigt sur les expériences néfastes de l'enfance et sur les disparités des services destinés aux garçons.

Dans la petite enfance, beaucoup de ces garçons ont connu de multiples expériences traumatisantes, notamment en étant témoins de violence conjugale et en vivant avec des proches atteints de troubles liés à la toxicomanie. Beaucoup ont connu la négligence et les sévices physiques. Quand mon équipe et moi-même avons parlé aux familles au cours de l'enquête, beaucoup ont parlé des conséquences intergénérationnelles des pensionnats et des interventions des services de protection de l'enfance sur leur capacité à assumer leur rôle parental de façon sécuritaire. Plusieurs de ces familles ont vécu dans la pauvreté. Il est important de souligner que le Manitoba détient le pire taux de pauvreté infantile parmi les provinces canadiennes, puisque 28 % des enfants vivaient dans la pauvreté en décembre 2020, selon un rapport de Campagne 2000, une coalition qui surveille les taux de pauvreté infantile dans le pays. La pauvreté infantile touche surtout les familles des Premières nations puisqu'un pourcentage stupéfiant (65 %) d'enfants des Premières nations vivent dans la pauvreté dans les réserves du Manitoba.

À l'adolescence, la plupart des 45 garçons se sont sentis déconnectés de l'école et sont devenus chroniquement absents, certains d'entre eux ayant carrément abandonné leurs études. Au Manitoba, il existe un écart persistant de rendement entre les élèves autochtones et les élèves non autochtones, le taux d'obtention de diplôme atteignant 48 % parmi les garçons autochtones par rapport à 90 % parmi les élèves non autochtones, en 2019. Les familles que nous avons interviewées et les garçons des Premières nations eux-mêmes ont mentionné avoir été traités différemment par les enseignants et les autres élèves à l'école en raison de leur race et de leurs origines culturelles.

La plupart des garçons qui sont morts par homicide étaient affiliés à des gangs. En l'absence d'un autre sentiment d'appartenance plus sécuritaire, certains se sont tournés vers les gangs pour obtenir du soutien et se créer une identité. Cela, par contre, les a exposés au risque d'avoir des démêlés avec la justice toute leur vie et de mourir par homicide.

Même si bien des choses ont été écrites par nous – et de façon générale - sur les expériences des filles dans les systèmes publics, ce rapport porte sur les vies, les expériences et les décès des garçons. Réduire le risque de suicide et d'homicide chez les garçons, en particulier les garçons des Premières nations, fait partie du travail de réconciliation. Il faut que le Manitoba crée des systèmes qui reconnaissent et règlent les inégalités issues d'injustices historiques et vécues par les garçons et les jeunes hommes. Dans le respect des travaux de la Commission de vérité et réconciliation du Canada (CVR), de la *Convention des Nations Unies relative aux droits de l'enfant* et de la *Déclaration des Nations Unies sur les droits des peuples autochtones*, je formule les recommandations suivantes.

Premièrement, et parallèlement aux *appels à l'action* 1 et 5 de la CVR, je recommande que des mesures fondées sur des données probantes et culturellement adaptées soient mises en œuvre au domicile des parents et autres aidants ayant des troubles liés à la toxicomanie, dans le but d'éviter autant que possible et quand cela ne présente pas de danger le retrait des enfants de leurs familles. En renforçant les liens familiaux, on peut aider les enfants à rester chez eux et dans leurs communautés après avoir déterminé les besoins en matière de santé. (voir page 61).

Deuxièmement, je recommande le lancement d'initiatives d'engagement culturellement adaptées et destinées aux garçons autochtones dans le cadre de la stratégie provinciale d'inclusion des Autochtones, avec pour objectifs d'accroître les taux d'assiduité scolaire et d'obtention du diplôme d'études secondaires et d'éliminer l'écart de rendement entre les élèves autochtones et les élèves non autochtones du Manitoba (voir page 62).

Troisièmement, je recommande l'adoption de stratégies durables permettant d'offrir une éducation multiculturelle et antiraciste aux élèves, aux administrateurs, aux enseignants et au personnel de soutien dans toutes les écoles de la province, dans le but de mettre fin à la discrimination systémique dans les écoles (voir page 62).

Enfin, je recommande que l'on mène des consultations communautaires pour actualiser et mettre en œuvre une stratégie provinciale complète de lutte contre les activités des gangs de jeunes qui utilise le financement et les ressources existantes pour réduire le nombre d'homicides parmi les jeunes du Manitoba (voir page 63).

Nous avons déjà adressé 13 recommandations actives et en suspens au gouvernement provincial pour qu'il remédie aux lacunes connues des services offerts aux jeunes en matière de santé mentale et de traitement de la toxicomanie. Nous l'avons notamment invité à concevoir et à annoncer une stratégie de lutte contre la toxicomanie chez les jeunes. Dans le cadre de notre enquête et rapport spécial, nous avons encore trouvé des lacunes dans les services offerts aux jeunes qui consomment des substances au Manitoba.

Aujourd'hui, je réaffirme qu'il est urgent pour les jeunes du Manitoba que le gouvernement agisse dans le domaine de la santé mentale et du rétablissement des jeunes, surtout dans un contexte postpandémique. Nous savons que la pandémie a eu de profonds effets sur la santé mentale de tous et cela est particulièrement vrai pour les enfants et les jeunes dont l'éducation, la vie sociale et à domicile ont parfois énormément changé. Je persiste à inviter le gouvernement du Manitoba à élargir immédiatement l'accès aux services offerts aux jeunes en matière de santé mentale et de traitement de la toxicomanie, dans une perspective préventive pour les enfants et les jeunes (voir page 64).

La publication d'aujourd'hui s'accompagne d'un vidéoclip réalisé par deux garçons membres de notre groupe consultatif de jeunes ambassadeurs (YAAS!). Conçu lors d'un camp de narration numérique d'une semaine que nous avons parrainé, le clip raconte certaines des expériences vécues au Manitoba par ces garçons de Premières nations pendant leur enfance. Il relate leur parcours et ce que chacun d'eux continue de faire pour construire un avenir prometteur où tous les jeunes du Canada peuvent bénéficier de chances égales.

Lorsque nous rédigeons ce rapport, les aînés nous ont parlé de l'importance de récupérer ce qui a été perdu, c'est-à-dire les traditions et les cérémonies qui lient les jeunes garçons et leurs grands-parents et contribuent au développement de leur identité. Ce rapport spécial donne à toute la population de la province, et en particulier au gouvernement du Manitoba, l'occasion d'écouter les voix de ces garçons et de leurs familles, et de porter leur attention sur leurs expériences.

Ainsley Krone MA PC-IIC, RSW

Protectrice des enfants et des jeunes du Manitoba par intérim

Introduction

Adolescence is a unique and formative time for boys. In addition to physical growth and development, personal identity and peer relationships take form and deepen. It is a time when young people move further away from parents and caregivers as their positions among peer groups and within the community are prioritized. This time can also be characterized by impulsivity and risk-taking, with the hope that lessons contribute to wisdom in adulthood. While this may be the case for many young people, adversity in adolescence also has the potential to carry lifelong consequences.

Guided by the *United Nation Convention on the Rights of the Child* (UNCRC), this special report focuses specifically on the following Articles of the UNCRC to which Canada – and Manitoba, by extension – is a signatory:

- Governments must ensure the rights of children without discrimination of any kind, including discrimination based on race, colour, sex, or language (Article 2)
- Children have the right to be heard in all matters that affect them; governments must consider the views of children when making decisions (Article 12)
- Governments must protect children from violence, abuse, and being neglected by anyone who looks after them (Article 19)
- Governments shall take appropriate measures to assist parents to ensure the right to a standard of living adequate for the child’s physical, mental, spiritual, moral and social development (Article 27)
- Children’s education should help them fully develop their personalities, talents, and abilities (Article 29)
- Governments must protect children from taking, making, carrying, or selling harmful drugs (Article 33)

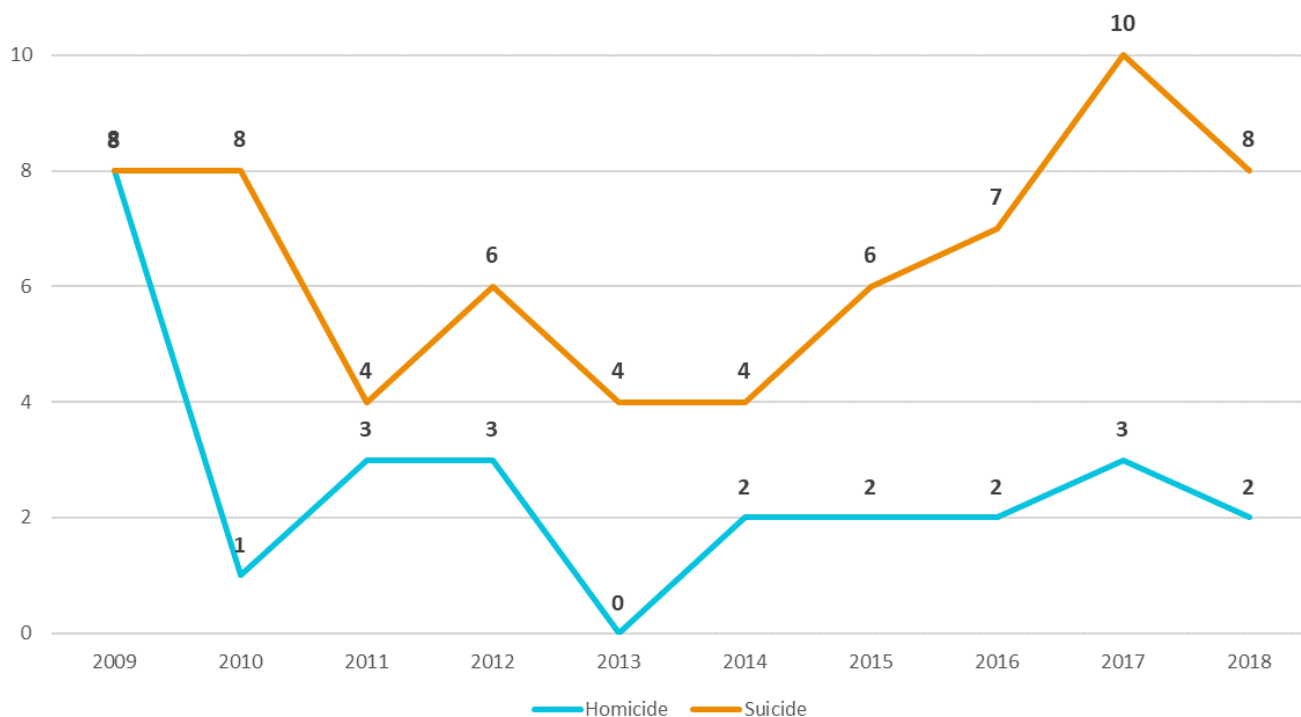
As part of the Manitoba Advocate’s commitment to reconciliation, this special report also endeavours to align with the principles of the *United Nations Declaration on the Rights of Indigenous People* (UNDRIP), as well as a number of *Calls to Action* issued by the Truth and Reconciliation Commission of Canada (TRC). As the majority of boys included in this special report were First Nations youth, specific focus is placed on Article 7 of the UNDRIP, which states that Indigenous Peoples have the right to be free from any kind of discrimination, including discrimination based on their Indigenous origin or identity.

Additionally, as all the boys included in this special report had some form of child welfare involvement, it was important to refer back to the work of the TRC, which concluded that “Canada’s child-welfare system has simply continued the assimilation that the residential school system started” (TRC, 2015b, p. 138). As a result, five *Calls to Action* were identified to address concerns within the child welfare system, including *Call to Action* 1.2 which emphasizes the need to provide adequate resources to Indigenous communities and child welfare organizations, in order to support Indigenous families remaining together where it is safe to do so, and to keep children in culturally appropriate environments regardless of whether they are able to remain with their families.

Background

Suicide and homicide are serious public health and social issues across Canada, but especially in Manitoba. Manitoba had the second highest rate of homicide across the provinces in Canada in 2020 and the highest rate of suicides across provinces in Canada in 2019 (Statistics Canada, 2021; Centre for Suicide Prevention, 2020). Over the 10-year period between 2009 and 2018 the Manitoba Advocate was notified of 65 boys ages 12-17 who died by suicide and 26 boys who died by homicide (Figure 1). On average, seven boys die by suicide and three boys die by homicide every year in Manitoba.

Figure 1. Deaths of boys (12-17 years) by homicide or suicide, 2009-2018



Source: Office of the Chief Medical Examiner, 2021

First Nations, Metis, and Inuit males are more likely than their non-Indigenous peers to die by suicide or homicide.

In 2014, homicide rates for Indigenous men in Manitoba were the highest across the country, with Indigenous men being 10 times more likely to die by homicide than non-Indigenous men (Miladinovic & Mulligan, 2015). Equally concerning are the high rates of self-inflicted violence, including high rates of Indigenous males who die by suicide. In a review of deaths by suicide between 2011 and 2016 in Canada, suicide rates were highest among Indigenous males, and these rates were highest among youth ages 15 to 24 (Statistics Canada, 2019). In examining rates among children under 15, Indigenous boys were four times more likely than non-Indigenous boys to die by suicide (Statistics Canada, 2019). Here in Manitoba, data our office has been examining suggest the rate may be significantly higher in some areas of the province for Indigenous youth.

Despite the dire need for understanding these important and prevalent issues, focused examinations of the lived experiences of boys, particularly First Nations boys, are rare. Understanding the unique experiences of boys would allow public bodies to design programs and strategies that are better suited to addressing their unique needs and work towards preventing violent deaths.

Rationale

The Manitoba Advocate is responsible for reviewing the deaths of children and youth in Manitoba if that child, youth, or their family had received any reviewable service within a year of the death of the child (ACYA, s.11.1(c)). The purpose of a review is to determine whether to investigate the death and also to identify and analyze recurring circumstances or trends (ACYA, s.20(4)).

In reviewing the experiences of the boys who died by suicide or homicide through child death reviews, a number of common themes, experiences, and service gaps were observed. While the Manitoba Advocate has published two special reports that focus on the experiences of girls, relatively few studies have been completed that examine the unique experiences of boys receiving public services, and particularly First Nations boys in Manitoba.

In response, the Manitoba Advocate launched this special report to bring awareness to the unique experiences of boys. A gendered analysis here is not meant to discount the experiences of girls or to imply that those experiences were any less impactful; the intent is to understand the specific ways in which public services interact with boys.

Purpose and Objectives

This special report aims to assess services provided to boys and the systemic barriers that place boys at risk of dying by suicide or homicide. All children have the right to life and governments must ensure children survive and develop to their full potential. The purposes of this special report are:

1. To identify the common experiences and **advance understanding** of boys involved in child welfare who died by homicide or suicide in Manitoba through administrative case reviews and interviews with caregivers.
2. To **enable and empower boys**, and particularly First Nations boys, with current or historical experiences in child welfare to express their ideas and experiences receiving public services, and promote healing through digital storytelling.
3. To develop recommendations that **increase the effectiveness and responsiveness of designated services** for boys in Manitoba and to address preventable deaths by suicide and homicide (ACYA, s.31(2)(a)).



Methods

This section describes the combination of investigative and research methods employed in this special report.

Figure 2. Special report methods



Case Reviews and Investigations

The Manitoba Advocate has the responsibility of reviewing and investigating the deaths of children in Manitoba if that child or their family had received any reviewable services, in this case child welfare services, within a year preceding the death of the child (ACYA, s.20(3)(a)). The reviews and investigations of 45 boys between the ages of 12 and 17, who died by suicide or homicide over a 10-year period between January 1, 2009, and December 31, 2018, were analyzed to identify their common experiences.

An essential element of this aggregate investigation was including the voices of families and caregivers. We invited 43 parents and caregivers to participate in this special report. They were informed of this investigation and invited to share stories of their children, including where they felt there may have been gaps in the services they received or what could have been helpful in preventing the tragic losses of their children. Unfortunately, our office was not able to locate current addresses for some parents and some letters were returned to our office after going unclaimed, likely because caregivers have since moved. A total of seven family members participated in in-depth interviews. At the conclusion of the writing of the special report, follow-up meetings were offered and held with many of the family members where findings and recommendations were reviewed and discussed.

Youth Engagement and Digital Storytelling

Investigators engaged with First Nations young men from the Youth Ambassador Advisory Squad! (YAAS!) of the Manitoba Advocate for Children and Youth throughout the development of this special report. They guided the Investigators by sharing their personal experiences, exploring issues that may contribute to increased risk of suicide or homicide, and discussing service delivery.

This special report incorporated digital storytelling, where the two First Nations young men used digital tools and computer software to create a short music video narrating their personal experiences (more details can be found on p. 51). The information learned from these young male participants helped the Manitoba Advocate further understand their experiences and inform this special report. The practice of digital storytelling acted as a channel for youth to strengthen their voice and carry on the Indigenous oral tradition of storytelling.

Knowledge Keeper and Elders' Guidance

Throughout our investigation and the development of this special report, we were guided by the Knowledge Keeper at our office, who was also a member of the project team. Our Knowledge Keeper attended weekly project meetings, supported family members who participated in interviews, and conducted ceremonies and prayers during roundtable discussions. She advised the project team on all aspects and was instrumental in the development of this special report.

Through multiple conversations, we consulted with Elder Ed Azure, who is a member of the Elders Council at our office, to better understand the intergenerational experiences of First Nations boys in Manitoba, traditional concepts of boyhood, and ways of knowing all of which helped inform the content of this special report. The Elders Council at our office also provided spiritual and cultural supports and advice on the contents, findings, and recommendations.

Prior to the release of this special report, and in response to input and guidance from the community, a feast was hosted to honour the lives of the 45 boys, their families, and the concluding of this process. The feast was organized by the Knowledge Keeper and other staff and attended by Elders, community members who contributed to this report, and by a small number of staff, in alignment with safety protocols due to the ongoing COVID-19 pandemic.

Community Consultations

In order to inform recommendations, roundtable consultations took place from July to September of 2021. The Manitoba Advocate met with leadership from the public bodies reviewed in this special report, including the Departments of Families, Justice, Education, Health and Seniors Care, and Mental Health, Wellness and Recovery. In recognition of the rights and inherent jurisdiction of Indigenous Peoples, preliminary findings were presented to First Nations and Metis governments, who also participated in discussions with our office which helped shape this special report. These consultations, together with the special report findings, informed the recommendations being issued as part of this release.

The Manitoba Advocate and members of her team also had the opportunity to connect with many members of the community, including those who have worked with and continue to work closely with boys. The perspectives of community members and service providers have been helpful in developing this office's understanding of the issues impacting boys in Manitoba.

Analysis and Report Structure

The medicine wheel is a widely recognized symbol of Indigenous knowledge, with many different models of the medicine wheel applied to different teachings. Indigenous Peoples, including Anishnaabeg, Cree,

and Dakota communities in Manitoba, use the medicine wheel in their own ways to reflect their traditions. There are, however, some common concepts associated with this symbol, such as wholeness, balance, and interconnectedness. With guidance from Indigenous voices, as noted above, the four directions of the medicine wheel were incorporated to structure the special report and ensure that each life cycle was represented in the lives of young boys (Figure 3).

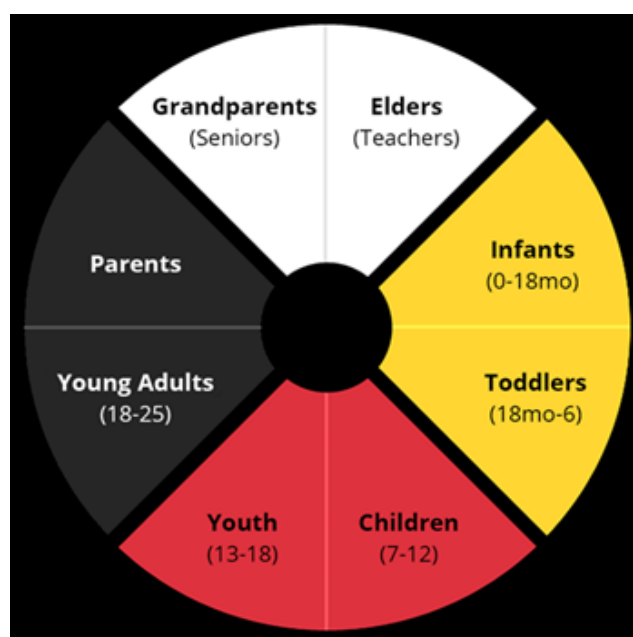
“The hand drum...allows for cross communication, we are not just stuck in the youth quadrant, the hand drum acknowledges the reality and the challenges and difficulties of being a youth and all the challenges that they face, and there is a remedy for those challenges, and that is the grandparents.”

– Elder Ed Azure, interview, August 17, 2021

These categories are not separate, but are interconnected, like a hand drum. Situated on opposite sides of the medicine wheel, youth and grandparents are in counterbalance with each other.

In addition to the medicine wheel, we analyzed each case within a socio-ecological model, which is widely used to understand and prevent deaths by suicide and homicide (National Center for Injury Prevention and Control, 2021). This model focuses on the interconnectedness between individuals, relationships, community, and societal levels. It positions the child within their environment, acknowledges the various components of the child’s and family’s life, and recognizes and challenges the impacts of issues such as systemic oppression. A socio-ecological approach suggests that in order to prevent injuries and deaths, it is necessary to act across multiple levels at the same time (Centers for Disease Control and Prevention, 2021).

Figure 3. Life cycle wheel teaching



Source: Barrie Area Native Advisory Council, 2021

LIMITATIONS

The youth featured in this special report are not representative of all boys in Manitoba who died by suicide or homicide. At the time the special report was launched in 2019-20, the Manitoba Advocate’s mandate for child death reviews remained restricted to children and youth involved with the child welfare system within 12 months of their death. On June 1, 2021, the scope of reviewable deaths was expanded to include children and youth who were involved in the justice system or were receiving mental health or addiction services within a year of their death. As this special report was launched prior to this expansion, deaths included in this report are limited to children and youth who were involved with the child welfare system in the year prior to their death.

Of note, data used in this special report were primarily gathered from administrative records including reviews, reports, and investigations previously completed by this office that had been compiled primarily from child welfare documentation. Information in this special report is, therefore, limited to the completeness and accuracy of administrative records provided to our office. In some cases, documentation was incomplete and gaps were noted. While investigators attempted to verify with other sources, including family and caregivers, where possible, such information was not always available.

Statistical Summary



45

boys ages 12-17

WHO WERE THE BOYS?

INDIGENOUS STATUS

78% 18% 4%

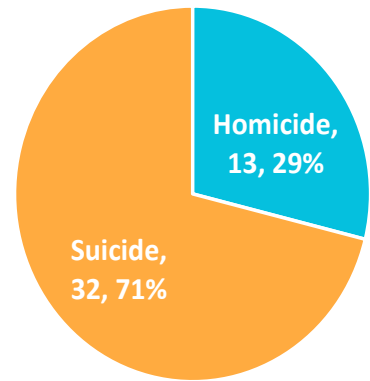
First Nations Non-Indigenous Metis

LOCATION OF RESIDENCE

49% 29% 22%

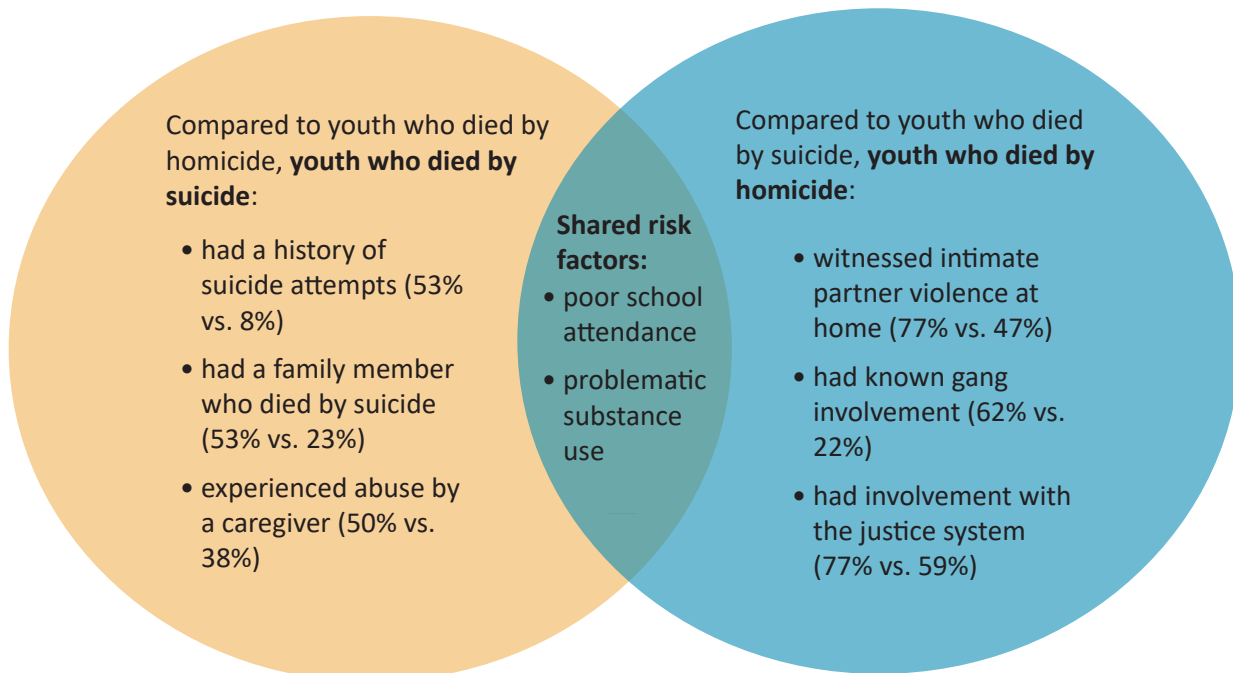
Northern Regional Health Authority Winnipeg Regional Health Authority Other health authorities (PMRHA, SRHA, and IERHA)

MANNER OF DEATH



DIFFERENCES BY MANNER OF DEATH

While youth who died by homicide or suicide shared many of the same risk factors, some were more common than others, depending on the manner of death.



WHAT DID THEY EXPERIENCE?

AT HOME

62%

caregiver
substance use

58%

experienced
neglect

56%

witnessed intimate
partner violence
between adults

47%

experienced
physical or
sexual abuse

42%

had a close family
member, like a
sibling or parent, die
by suicide

WITH CHILD WELFARE

69%

were in care
at one point in
their lives

#1

reason for first
apprehension was
parental substance use

WITH THE JUSTICE SYSTEM

64%

involved in
the justice
system

48%

charged with
an offence

33%

involved with
gangs

AT SCHOOL

69% had poor school attendance

51% had behaviour problems at school

31% experienced bullying

WITH MENTAL HEALTH AND ADDICTIONS

76% had problematic substance use

49% were hospitalized for a mental health concern



THE EAST

EARLY LIFE EXPERIENCES

“Our journey of life begins in the east. The body is associated with the east. The physical birth of the baby in the eastern direction of the wheel comes from the birth of the spirit. The east is where we come from, where we are closest to the spirit world... It is where we begin our journey as human beings coming from the spirit world into the physical world. The east represents new beginnings, new life, and early childhood in the Medicine Wheel teachings used by many First Nations.”

(Best Start Centre, 2010, p.7)

The East - Early Life Experiences

“Children are sacred gifts from the Creator, we do not own them, we must always remember the sacredness of all life and ensure that they are treated with respect, love, kindness, and guidance each day here on Mother Earth...”

– Elder Alex Skead, Wauzhusk Onigum First Nation (Rat Portage)

As part of our reviews and investigations, we identified three early childhood themes shared by the majority of the 45 boys included in this special report, including witnessing violence in the home, being exposed to parental addictions, and documented experiences of neglect. Early childhood was also the time when most of the boys were first in contact with the child welfare system. The following section places these early life experiences within the ongoing structural legacies of colonization, intergenerational trauma, and childhood poverty. Taking a socio-ecological approach, these themes and structural issues interact in the case studies highlighted.

Colonization and Intergenerational Trauma

- **37 of the 45 boys (82%) who died by suicide or homicide were Indigenous.**

Indigenous youth have an equal right to the enjoyment of the highest attainable standard of physical and mental health, and states shall take the necessary steps to the full realization of this right. (UNDRIP, Article 2 and UNCRC, Article 24).

Homicide and suicide impact Indigenous communities at greater rates than non-Indigenous communities. Indeed, of the 45 boys whose homicide or suicide death fell in scope for review and inclusion in the report, 78% of the 45 boys were First Nations and 4% were Metis.

This over-representation does not happen without reason. The public was provided with important lessons on the historical and present-day experiences of First Nations, Metis, and Inuit through the research and findings of the Truth and Reconciliation Commission of Canada (TRC), and more recently, with the discoveries of unmarked graves at former residential schools across Canada. The TRC was established in 2008 as part of the Indian Residential Schools Settlement Agreement signed between the federal government and Indigenous leadership groups. The TRC allowed for individuals who had been impacted by residential schools to share and have their experiences documented, with the intention of providing some means of healing for survivors, as well as to educate all Canadians about the truth of residential schools and their ongoing intergenerational impacts.

Children who attended residential schools experienced significant maltreatment, including physical, emotional, and sexual abuse, along with severe neglect including malnutrition, unmet medical needs, and unsanitary or unsafe living conditions. This genocide was well documented in the truth-telling from survivors and discussed throughout the Commission’s final report (TRC, 2015a). Importantly, it was learned that harm between students also began to emerge, often encouraged by residential school staff. When students left the residential schools and returned to their home communities, many continued to reside in the same spaces as those who had caused harm to them, resulting in reports of increased violence within some communities (Bombay et al., 2014). Chansonneuve (2005) identified lateral violence as an outcome of residential schools, including the unresolved trauma and ongoing oppression with which individuals were left to live. Colonization has taken many forms since residential schools, including through the “Sixties Scoop” and forced relocations of communities, among others. Colonization is not a thing of the past, but continues to be enacted through policies, programs, media, and other

means. The practice of removing First Nations, Metis, and Inuit children from their families and communities continues across the country, sanctioned by present policies. Blackstock (2003) reported that more children have been apprehended and placed outside of their homes through the child welfare system than at the height of the residential school system. Ongoing oppression through colonial structures continues to impact the health and well-being of First Nations, Metis, and Inuit. This has resulted in complex and layered experiences of loss and marginalization that have contributed to an increased risk of harm to young First Nations, Metis, and Inuit boys in Manitoba, including death by suicide and homicide.

INTERGENERATIONAL TRAUMA

Intergenerational trauma is a term used to describe the impacts of experiences of abuse and oppression on future generations. Intergenerational trauma was cited in several interviews our office conducted and was described as being at the root of many of the struggles faced by Indigenous boys and their families (service provider interview, June 16, 2020; service provider interview, June 19, 2020; youth interview, June 26, 2020; service provider interview, July 8, 2020).

One First Nations parent of a child who died by suicide spoke about the impact residential schools had on their ability to parent. Since the death of their child, they spoke to us about the importance of healing from their own childhood trauma through First Nations traditions and ceremony.

“Both my parents were residential school survivors...they stayed there all their lives... so I didn’t realize that corporal punishment is wrong, I didn’t know how to nurture him, to help him shine.”

– Parent Interview, June 10, 2021

Intergenerational trauma may manifest in different ways for different people. For some Indigenous families and communities, such trauma has resulted in a breakdown of the immediate and extended family units, movement away from traditional parenting and roles within the community, and a lack of connection from cultural ceremonies and practices (Bombay, 2011). Where service providers may focus on addressing the behaviours that present as a result of this trauma, such as issues with substance use or family violence, what is often overlooked or avoided is the broader issue of trauma that remains unaddressed and continues to be transmitted through families and communities.

“...past traumas experienced by Indigenous people have contributed to poorer health, poverty, low self-esteem and mental distress of multiple generations of Indigenous peoples.”

– Breaking Point: The Suicide Crisis in Indigenous Communities, 2017, p. 8

The lens of intergenerational trauma and the ongoing impacts of colonization are important to understand the findings in this special report and the stories of the 45 boys and their families.

Childhood Poverty

- **26 of the 45 boys (58%) who died by suicide or homicide lived in neighbourhoods with median household incomes below the provincial median.**
- **26 of the 45 boys (58%) were documented by service providers to have experienced neglect in their childhoods.**

Every child has a right to a standard of living adequate for the child's physical, mental, spiritual, moral and social development. Parents have a responsibility to fulfill this right to the best of their ability, however, in case of need governments must provide material assistance and support programmes, particularly with regard to nutrition, clothing and housing (UNCRC, Article 27).

Of the 45 boys included in this study, 26 (58%) lived in neighbourhoods with median household incomes below the provincial median. Manitoba remains the province with the highest levels of child poverty in Canada, including a rate over 10% higher than the national average (Campaign 2000, 2017; Campaign 2000, 2020a). The Government of Manitoba describes poverty as “complex and multi-faceted. It is often perceived to be only a lack of money, but poverty is more than the absence of material things. Poverty is also inequitable access, absence of opportunities, social isolation, discrimination and stigma” (Government of Manitoba, 2019a, p. 21).

Experiencing poverty, and social exclusion more broadly, has significant impacts on the health and well-being of individuals and larger communities. Children experiencing poverty are more likely to experience poor physical health, lower educational achievement and employability, as well as increased risk of behavioural and mental health challenges (Canadian Centre for Policy Alternatives, 2015). Higher socioeconomic status and food security has been associated with better mental health and lower suicide rates, with higher household income identified as a protective factor against suicidality for Indigenous Peoples specifically (Rehkopf and Buka, 2006; Hajizadeh et al., 2019) and an increased risk of violent injury or homicide (Snider et al., 2018).

Poverty disproportionately impacts First Nations and Metis peoples in Manitoba. This is felt most prominently by status First Nations children living on-reserve, where 53% of First Nations children across Canada and a staggering 65% of First Nations children on-reserve in Manitoba, live in poverty (Beedie et al., 2019). In their report, Beedie et al. (2019) state explicitly that “the existence of such significant child poverty rate differences – where the main character is identity – suggests that we must, as a society, continue to investigate, challenge, and respond to the role of racism as a driver of child poverty in Canada” (p. 5).

POVERTY AND NEGLECT

Neglect is considered a form of abuse, and can be defined as the failure or inability of a caregiver to provide basic needs and age-appropriate care (Sinha et al., 2011). While definitions of neglect vary, because neglect is a broad term, they can include failure to supervise resulting in harm to a child, permitting criminal behaviour, physical neglect (includes inadequate nutrition, clothing, unhygienic or dangerous living conditions), medical neglect, failure to provide psychological treatment, abandonment, and educational neglect (National Collaborating Centre for Aboriginal Health, 2013). Twenty-six of the 45 boys included in this report were documented by service providers to have experienced some form of neglect in their childhoods. Neglect is the most common form of maltreatment experienced by First Nations children (Sinha et al., 2011). While sometimes the neglect of a child is due to the actions or inactions of a caregiver, the National Collaborating Centre for Aboriginal Health (2013), notes that:

...child welfare frequently attributes the failure to the caregiver implying the caregiver has the ability to influence the assessed risks. However, evidence suggests that societal structural risks outside of the caregiver's realm of control, such as poverty, poor housing, and substance use related to residential schools and other colonial trauma, are the key factors driving the over-representation of substantiated neglect cases among First Nations children (para. 1).

The ongoing discrimination against First Nations children, including the underfunding of basic services on-reserve, has been well established, and is seen in cases brought forward to the Canadian Human Rights Tribunal (First Nations Child and Family Caring Society, 2014). Both status and non-status First Nations children living off-reserve fare only slightly better (Beedie et al., 2019).

These inequities contribute to children and families coming into contact with the child welfare system. As noted by the Honourable Ted Hughes in *The Legacy of Phoenix Sinclair: Achieving the Best for All Our Children* (2014), "Aboriginal children are taken from their homes in far greater numbers, not because they are Aboriginal, but because they are living in far worse circumstances than other children" (p. 28). These are the realities of "parenting within poor resource environments" (Keddell & Stanley, 2019, p. 414). Meeting the material needs of families – including increased income, housing security, as well as food and clothing needs – can reduce the likelihood of that family coming into contact with, or re-entering the child welfare system (Raissian & Bullinger, 2017; Rostad et al., 2017). This is seen in Aaron's story (next page). He was first apprehended due to conditions consistent with neglect which are tied to societal risks such as poverty and substance use.

WHAT YOUTH SAY

In a recent special report highlighting findings from the Manitoba Advocate's Youth Listening Tour, youth in Manitoba identified poverty as one of the top three concerns in their community (Manitoba Advocate for Children and Youth, 2021). Youth spoke of the impact of reduced resources on their ability to succeed in life and access services, including health. Youth shared that there is a need to "eliminate the wealth gap" by providing families living with poverty with more financial resources, access to housing, food, and training.

*"They're basically just giving you enough money to barely even survive. And it is not even really surviving. It's like just enough to maybe not die."
– Youth Participant, Listening Tour*

BEST PRACTICES: WHAT WORKS TO ADDRESS CHILD POVERTY?

A strong body of research confirms the role of increased socioeconomic resources on the health of children and families. Nurturing in the early lives of children is critical, and making sure all families have the resources they need is the most efficient way of ensuring those nurturing conditions (Siddiqi et al., 2018).

In particular, unconditional cash transfer programs, which entail the receipt of cash supplements free from any obligation (e.g., the Canada Child Benefit), have shown positive effects on outcomes such as birthweight and infant mortality (Siddiqi et al., 2018), as well as school attendance and achievement (Garcia & Saavedra, 2017). Unconditional cash transfers to families have also been shown to decrease criminality, and drug and alcohol use among disadvantaged youth (Marinescu, 2018). Consistent with the obligations governments have to ensure caregivers have the financial and physical resources they need to support the health and well-being of children (UNCRC, Article 27), unconditional cash transfers are an upstream intervention that can have longstanding positive effects on the life-trajectories of children and youth.

Campaign 2000 calculated that in 2017 the Canada Child Benefit lifted 36,000 children in Manitoba out of poverty, and without it, child poverty in Manitoba would have been 42% higher in 2017 (2020, p.20).

AARON'S STORY

Shortly after Aaron's birth, a child welfare agency became involved to provide support services to the family. Aaron's parents had a difficult and sporadic relationship, characterized by incidents of intimate partner violence and substance use disorder. Aaron's parents separated, and it was noted that his primary caregiver would leave the home for extended periods of time. Aaron's parent acknowledged living with substance use disorder and gambling.

At age 11, Aaron and his siblings were apprehended by Child and Family Services (CFS) after agency workers attended the home and found the children without food, his younger sibling in need of diapers and changing, and requiring medical attention. As a result of this apprehension, Aaron was separated from his siblings and was moved through various placements throughout his time in agency care.

Aaron's struggles in school began to intensify around this time. He was suspended from school for two separate incidents within a few months of one another, including for bringing weapons, as well as drugs and drug paraphernalia to school. Aaron was out of school for some time before the school and the child welfare agency were able to coordinate a re-entry meeting. The agency worker connected Aaron to a support worker to provide increased support, including around issues with school, as well as an opportunity to explore his culture.

In his early teenage years, Aaron was getting into physical fights, and had begun smoking cannabis. Aaron struggled to manage his emotions and often became angry. He recognized that this was an issue for him, and something that he wanted to change.

After being returned to the care of a parent, Aaron's parent reported that he was becoming increasingly aggressive and violent in the home. On some occasions, Aaron's parent contacted police and local crisis teams to assist with Aaron's behaviour. Aaron's parents were provided with some support in developing their relationship with him, learning to set boundaries and enforce limits, and to have him return to school. This was something that Aaron identified as a goal for himself as well.

Just a few months before his 18th birthday, Aaron was left homeless when his parent was evicted from their residence. The agency worked with the family to ensure Aaron was not left displaced, however, Aaron was reluctant to access emergency shelters, opting instead to stay with friends. A few days later, Aaron was involved in an altercation where he was stabbed and died as a result of his injuries. Another teenage boy was arrested and charged in connection with Aaron's death.

WHAT IS HAPPENING IN MANITOBA?

Within the provincial poverty reduction strategy, the Government of Manitoba (2019a) identified the vision that “all Manitobans have resources, opportunities, and access to achieve a better quality of life” (p. 61), and the objective that there will be “fewer Manitobans living with low income every year” (p. 61). The strategy determined four priority areas to achieve this objective, including:

1. Reduce the child poverty rate by 25% by 2025, and support the federal government’s goal of reducing poverty by 50% by 2030;
2. Investing in Manitoba’s future prosperity through supports to children and youth;
3. Working together to improve health outcomes and standard of living; and
4. Promoting economic inclusion through employment, education, and training.

According to their report card released in April 2020, Campaign 2000 (2020a) identified that only four of the 13 indicators identified in the provincial poverty reduction strategy have seen progress, with the provincial government offering no clear plans or timelines to accomplish the remaining nine indicators.

In another report card released in December 2020, Campaign 2000 (2020b) made several recommendations to address this ongoing issue and found the provincial government would need to be more ambitious and strategic in order to meet poverty reduction targets. Although a national poverty reduction strategy has been released, a specific focus on addressing poverty for First Nations children and families residing on-reserve remains outstanding. Poverty and social exclusion remain important issues still to be addressed in Manitoba, both of which continue to have significant impacts on children, with much of this weight carried by First Nations children and families in this province.

Violence and Substance Use in the Home

- **28 of the 45 boys (62%) were documented by service providers to have lived with a caregiver with substance use disorder.**
- **25 of the 45 boys (56%) were documented to have been exposed to intimate partner violence in early childhood.**

States must take all appropriate measures to protect children from all forms of violence, abuse, and neglect. This includes providing parents and caregivers with effective social programs (UNCRC, Article 19).

Intimate partner violence (IPV) and substance use are co-occurring and intertwined (Cafferky et al., 2018). Of the 25 boys in this report who were exposed to IPV, 19 (76%) were also exposed to parental substance use. This is consistent with studies from across cultures and countries which link the two issues (Karakurt et al., 2019).

The reason for this strong relationship is unclear. Poverty and childhood trauma shape pathways to substance use and poor mental health, which, in turn, can increase the likelihood of IPV (Madruga et al., 2017). Previous experiences of victimization through IPV have also been shown to predict substance use disorder (Gilchrist & Hegarty, 2017). Given the overlap between the issues, addressing substance use and IPV together may be more effective at reducing violence and improving family function (Karakurt et al., 2019).

Witnessing IPV and household substance use are both adverse childhood experiences that can have long term effects on children’s development (Hughes et al., 2017). Witnessing IPV is associated with mental health issues in adolescence and adulthood, including symptoms of depression, anxiety, and post-traumatic stress disorder

(Diamond & Muller, 2004; Anderson & Bang, 2012). Very young children who are exposed to IPV may go on to have delinquency issues, poorer school performance, including lower grade point averages, more days missed in school, and a greater likelihood of dropping out (Hurt et al., 2001; Alaggia et al., 2007; Stempel et al., 2017; Supol et al., 2020). Studies have shown they are also more likely to attempt death by suicide and to use drugs and alcohol (Kilpatrick et al., 2000; Kimball & Keene, 2016; World Health Organization, 2019).

Exposure to substance use by a parent or caregiver is also associated with increased behavioural and mental health diagnoses for children (Raitasalo et al., 2019) and an increased risk of physical abuse and maltreatment (Goldberg & Blaauw, 2019). Other long-term effects of parental substance abuse include poverty, criminal activity, mental health problems, foster care involvement, and death (Waddell et al., 2014).

Due to their harmful effects on a child's development, exposure to IPV and household substance use violate the rights of children. Under the UNCRC, children and youth have the right to be protected from physical and mental violence, abuse, and neglect and governments have an obligation to take appropriate legislative, administrative, social, and educational measures to protect children from such maltreatment (Article 19).

Three times as many Indigenous children and youth in Manitoba witnessed family violence before age 15 (14%), compared to non-Indigenous youth (4%) (Healthy Child Manitoba, 2018). Indigenous Peoples' experiences with IPV is tied to the effects of trauma from past and continuing colonization (Brownridge et al., 2017).

“There is too much violence and too much alcohol and drug use, and the situation in our communities remains deleterious...I think if we learned with an open mind the way of life of our people there would be less violence.”

– Elder Ed Azure, interview, August 17, 2021

Imposing colonial policies and practices resulted in wide ranging and detrimental impacts, including family violence, on the health and well-being of Indigenous families and communities. “Across the [violence and colonization in Canada] literature, violence has been found to be a key determinant of health for Indigenous people and communities” (Holmes & Hunt, 2017, abstract section). Cultural safety and a decolonized lens are important to be used when examining systemic issues as well as the impacts of policies and programs in Manitoba. It is the responsibility of governments to enact preventive measures and ensure that all child victims traumatized by violence receive the support and assistance they require to recover their health, dignity, self-respect, and social life (UNCRC, Article 39).

Child Welfare Involvement

- **31 of the 45 boys (69%) were apprehended and spent time in the care of Child and Family Services as children.**

States must ensure that children who have been separated from their caregivers can have contact with them, if in their best interest (UNCRC, Article 9).

While all families of the 45 teenage boys who died by suicide or homicide came into contact with the child welfare system within a year of their death, not all of the boys were apprehended. For the 31 boys who were apprehended in their lifetime, the reasons for apprehension varied (Table 1). The most common reason for the initial apprehension was parental substance misuse (9 of 31, 29%). Service providers in child welfare suggested that this figure is an underestimate, reporting that their calculations place around 80% of apprehensions as being associated with parental substance misuse (service provider, September 8, 2021). Other reasons for first

apprehension included abuse allegations, child behaviour, child found without a care provider, and parental mental health concerns. Often, this separation from their parents was also accompanied by a separation from their siblings, their larger extended families, communities, and often their culture.

Sometimes children enter the care of child welfare because their parents are living with substance use disorders or mental health issues. In Tyler’s story (next page), his entry into care was associated with his primary

Table 1. Reasons for first apprehension

Reason for first apprehension	N	%
Parental substance misuse	9	29%
Abuse allegations	4	13%
Child behaviour*	4	13%
Child found with no care provider**	4	13%
Parental mental health***	4	13%
Neglect****	2	6%
Other	3	10%
Unknown	1	3%
Total	31	100%

Notes:

*Includes instances where the child's behaviour associated with substance use, mental health, or other was beyond the ability of caregiver to support.

**Includes instances where child or children were found without adult supervision and caregivers could not be located.

***Includes caregiver suicide attempts or other psychiatric emergencies.

****Includes instances where children were found underweight, unbathed, needing medical attention.

caregiver’s mental health interventions and, additionally, how his disrupted attachment, including lack of a supportive male caregiver, affected his sense of self and ability to thrive.

The implications of an apprehension are profound, including the significant sense of loss and disrupted attachment experienced by a child. Apprehension often leads to several placement changes and instability. Less attention is paid to the experience of the child, as they can be moved abruptly and with little understanding of what is taking place. As one parent who spoke with us noted, “everyone left him when he was taken away by CFS [Child and Family Services]. His whole family was taken away from him when he was removed from the home. This must have been hard for him to understand and confusing as to why he was left by his family” (parent interview, June 29, 2021).

For many young people, such instability can significantly interfere with their sense of belonging, connectedness, and the ability to feel trust in, and security from, caregivers and other adults. This instability may also impact a young person’s understanding of themselves and their place in the world. A member of the Manitoba Advocate’s Youth Ambassador Advisory Squad (YAAS!) shared that when child welfare workers attended their home, they were removed with little explanation and placed into an unfamiliar environment where they felt confused and alone (youth interview, June 26, 2020).

One parent of a boy who died by suicide wished that child welfare had “tried harder to keep him here [in a First Nations community] rather than send him to the city where it is more dangerous” (parent interview, July 5, 2021). He shared that had his son remained in his community, his trajectory would have been different. The same parent reported “[child welfare] told us, ‘you guys can go visit him every month’. But, it never happened”

TYLER'S STORY

Tyler and his family lived in a community in northern Manitoba. Tyler's parents' relationship was unstable and he and his siblings moved between their parents' care throughout their lives. One of Tyler's parents lived with mental health challenges and substance use disorder, which prompted the local child welfare agency to become involved with Tyler during his early childhood.

One of Tyler's parents was ultimately diagnosed with a serious mental health disorder and prescribed medication. This parent continued to provide primary care to Tyler and his siblings, however, and at times continued to struggle with managing their mental health, particularly when they ceased taking their medication. Tyler's parent was hospitalized for mental health assessments and treatment outside of the community on multiple occasions. During these times, Tyler and his siblings were apprehended and removed from their parent's care in order to ensure the children were safe while that parent was accessing treatment. On at least one occasion, Tyler and his siblings were placed with their other parent. Tyler reported that he experienced significant emotional abuse by this parent.

Despite consistent child welfare involvement over the years, standard child welfare assessments were not completed. The file showed little evidence of any planning, there were few case plans or family plans, and little documentation to indicate the child welfare agency was maintaining ongoing contact with the family. Also missing were assessments of the family's functioning and children's well-being, and determinations as to where there may be outstanding needs and addressing these as appropriate.

In his youth, Tyler began to experience mental health challenges himself, including struggling with anxiety and depression. It was noted that Tyler attempted suicide on at least three occasions, and these attempts were documented by the child welfare agency. In later conversation with a mental health service provider, Tyler disclosed that he had attempted suicide on six occasions, and recalled that his first suicide attempt took place when he was 11 years old.

Tyler was required to leave his community to access medical and mental health interventions. He expressed to a mental health service provider that he had been feeling upset about being verbally and emotionally abused by his parent, who had told him he was "going nowhere." It was noted that Tyler felt alienated from peers and family members and was feeling increasingly distraught as a result.

Two months prior to his death, Tyler attempted suicide and was again transported out of the community for assessment and treatment. He was admitted to hospital for a few days and was assessed as a low risk of suicide at the time of his discharge. The plan following discharge was for him to reconnect with a mental health therapist in his community for ongoing support, and to follow up with mental health services in the community, including those at the local nursing station. Tyler was prescribed medication to address his depression and it was noted he and his family were aware of crisis resources available to them. Tyler returned to his community and it was not documented whether follow up with mental health services occurred upon his return. Six weeks later, Tyler died by suicide. Toxicology screening following his death indicated the presence of a prescribed medication, but no other substances in his body at the time of his death.

(parent interview, July 5, 2021). Since early life experiences with a parent or caregiver can influence later social relationships, instability has the capacity to interfere with their ability to form healthy relationships with the self and with others (Mennen & O’Keefe, 2005; Office of the Children’s Advocate, 2012). Attachment is one of the most important processes in infancy and early childhood, and disrupted or insecure attachments in a child’s early life can lead to significant emotional and behavioural challenges for children later on.

INTERGENERATIONAL TRANSMISSION OF FATHERING

Attachment to fathers is particularly important for boys, and disrupted or insecure attachment to fathers is associated with delinquent behaviours, among other negative outcomes (Hoeve et al., 2012). The importance of male role models and natural connections in a child’s life came up in every interview conducted for this special report. The involvement of, and connection to, fathers identified by two young men in the Youth Ambassador Advisory Squad (YAAS!) specifically as a critical missing piece in the lives of teenage boys. This natural, lifelong relationship was unavailable for many of the boys included in this report, leaving them with a gap that many sought to fill with other individuals or activities, which may not have been healthy or positive.

It has been argued that Indigenous fathers in particular are some of the most socially excluded populations (Ball, 2009). This is undoubtedly connected to this country’s history of colonization and lasting traumas. Through colonization, Indigenous family units and community organization were disrupted and individuals were prohibited from practicing ceremonies or fulfilling traditional roles. The traditional roles and responsibilities for Indigenous men involved protecting and providing for their families, including through hunting and gathering.

Indigenous men and fathers are overrepresented in the custody population. Between 2007-08 and 2017-18, Manitoba experienced a 60% increase in the number of adult Indigenous males who had been incarcerated, growing from 10,651 to 17,066 individuals in custody (Malakieh, 2018). Such numbers mean there are generations of children living in homes where fathers are not present. There are also significant challenges for Indigenous men when returning to their homes and resuming care for their children.

“I wish he had a dad – a responsible, reliable, stable parent [and] male figure in his life.” – Parent interview

Boys who become fathers themselves, have noted there seemed to be limited support for them in parenting, which would be especially important for those who have not been connected to their own fathers or have few positive male role models (service provider interview, June 19, 2020). Consistent with concepts from the theory of attachment, “fathering is reproduced through experiences of being cared for by father role models in childhood” (Ball, 2009, p. 29). This should be a key consideration for service providers, particularly those working within the child welfare system, where attention is often focused, sometimes exclusively, on relationships and reunification with the mother (service provider interview, November 7, 2020).

One service provider suggested that the absence of fathers, uncles, and other male role models was Manitoba’s greatest “epidemic” (service provider interview, September 9, 2020). This exclusion reinforces the message that men are expected to leave or to be absent from their families. A lack of focus on the involvement and responsibilities of the father limits opportunities for healing for men as well, and the cycles persist (service provider interview, September 9, 2020; service provider interview, November 7, 2020).

“His grandpa was a big part of his life – that was his only male role model that he had. His grandpa was always there, talked to him, tried to do things with him as much as he could.” – Parent interview

WHAT ELDERS TOLD US

An Elder shared with this office the Cree practice of informal adoptions, or *tapagomitowin*. He shared “the whole process of relationships, the whole process of adoptions, is one of the greatest saving graces for myself. In our way of life as Indigenous people, as Cree people...we have ceremonies that allow us to adopt other people” (Elder interview, November 10, 2020). He noted that his father was a great teacher for him, as his father struggled with substance use disorder and abusive behaviours in the home. These experiences taught him about the kind of person he did not want to be, while his adoptive father taught him about the kind of person he did want to be: “it was through him that I learned how to be a Cree man” (Elder interview, November 10, 2020). The Elder emphasized the importance of returning to traditional ways, a practice particularly valuable in reconnecting with boys, including those whose own fathers may not be able to. In this way, “I am not limited to having my father, but I can adopt another man as a father. And we adopt each other as father and son. And that’s how we learn” (Elder interview, November 10, 2020).

WHAT YOUTH SAY

Young men of the Youth Ambassador Advisory Squad (YAAS!) were consulted on the issue of apprehensions, they told us, if apprehensions are needed:

- **Communicate with children.** Children deserve to have some understanding of what is happening, regardless of their age. This should include reasons for the apprehension, the in-care plan for them, and the goals for moving forward. They explained that without this information, they may think that “something is wrong with me,” or “nobody cares about me.”
- **Support connections with parents, siblings, and extended families.** They explained that when they transitioned out of child welfare they wanted to reconnect with their families, however, this was difficult because those relationships were not nurtured while they were in care.
- **Foster healthy, long-term, natural connections.** Sometimes a connection with parents or family is not possible. In those cases, they recommended encouraging sibling relationships, and fostering relationships with grandparents or community members who can give them a sense of purpose and worth.

BEST PRACTICES: WHAT WORKS TO SUPPORT PARENTS WITH SUBSTANCE USE DISORDERS?

Findings suggest that addressing parental substance use disorders may have prevented at least 29% of the apprehensions of boys in this special report and that substance use is tied to intimate partner violence (IPV). There are a number of promising approaches to address parental substance use that reduce apprehensions and strengthen families:

Multidimensional Family Recovery (MDFR)

This is a home and community-based intervention designed to help parents involved in the child welfare system achieve and sustain sobriety, provide a safe family environment, and prevent further child welfare involvement. Child welfare workers deliver individual sessions with each family member, couple sessions, and family sessions weekly in their home. This is considered a promising intervention and was shown to increase reunification, mental health, parenting practices, and family functioning, while decreasing substance use (Dakof et al., 2010).

The Sobriety Treatment and Recovery Teams (START) Programs

These are programs for families with substance use and child abuse or neglect that are built on integrated and collaborative service delivery between substance use disorder treatment services and child welfare. Child welfare workers trained in family engagement are paired with family mentors (peer-support workers

in recovery). Parents have rapid access to intensive addictions treatment services to safely maintain a child placement in the home, when possible. This trauma-responsive program is considered a promising practice, with evaluations finding it reduced the odds of children being placed in care by half; for those that were apprehended, it increased the likelihood of reunification and decreased the likelihood of future child welfare involvement (Huebner et al., 2021).

Community Addictions Recovery Teams (CART) – Metis Child, Family and Community Services

In 2019, Metis Child, Family, and Community Services Authority partnered with the Manitoba government on a three-year pilot project that focuses on supporting families who struggle with mental health and substance use disorders. This program aims to provide support through a case worker, family mentor, substance use worker, and mental health worker with quick access to services and, importantly, cultural programming. Similar to the START program, its focus is to preserve families, whenever possible, and prevent sending children into foster care by providing treatment to the caregivers. There is no publicly available evaluation of this program (Metis Child, Family, and Community Services Authority, n.d.).

Apart from the Metis Child, Family, and Community Services Authority’s CART program, we were unable to find reference to programs to address this important gap in Manitoba available through other Child and Family Services authorities.

Summary

A child’s experience of trauma can significantly impact their brain development and subsequent behaviours (Brownell et al., 2020). Experiences of maltreatment and trauma were familiar to the vast majority 45 of the boys included in this special report, with 89% having documented experiences of child maltreatment including neglect, physical abuse, and/or sexual abuse. Of note, 57% experienced more than one type of maltreatment. This results in cumulative effects that amplify risk of adverse consequences including death by suicide and homicide.

Childhood trauma has intergenerational effects. While only a small percentage of adults who were maltreated as children repeat that cycle with their own children, experiencing maltreatment in childhood can increase the risk of difficulties parenting (Augustyn et al., 2019). Parents and Elders spoke about the effects that residential schools and their own childhood trauma had on their ability to parent and care for their children, and how, through culture, they found healing and broke the cycle.

Preventing suicide and homicide of boys in Manitoba requires an understanding of the early life experiences through a socio-ecological model. This includes understanding how colonization, intergenerational trauma, and childhood poverty influence experiences of abuse and neglect that can lead to child welfare involvement. Both structural and family-level actions are needed to support caregivers and prevent suicides and homicides in boys. Given the high rate of apprehensions due to parental substance use disorders, interventions that address parental substance use with the goal of family preservation, where possible, could be promising approaches to bring healing to families and future generations, while also realizing the rights of children to remain in the care of their families whenever possible.



THE SOUTH

ADOLESCENCE

“The south represents the summertime, a time where everything is growing and coming to fruition. This direction also represents adolescence, a stage in life where we are learning new things, trying to figure out life’s lessons, and understanding our place in this journey. That’s why the south also represents the mental aspect of self.”

(Best Start Centre, 2010, p.7)

The South - Adolescence

“Adolescence is a time for our children to grow into their young beings and learning who they are, where they come from and what their goals and dreams are... true to realizations that each child could learn of themselves.”

– Elder Alex Skead, Wauzhusk Onigum First Nation (Rat Portage)

As detailed in the previous section, the majority of the 45 boys included in this special report lived through multiple adverse childhood experiences (ACEs), including caregiver substance use, intimate partner violence in the home, maltreatment, and neglect. The outcomes of some of these experiences can be seen in adolescence. There is a strong correlation between having multiple ACEs and the perpetration of violence, both interpersonal violence and self-directed violence (Duke et al., 2010).

As youth moved through the life cycle into adolescence, our review noted common experiences, including disconnection from school, engaging in substance use, and becoming involved in the criminal justice system. Many of the boys were at risk of, or entrenched in, activities that increased their risk in community, including gang involvement. Underscoring these themes are the concept of masculinity, experiences with discrimination, and how services may have perceived and responded to the behaviour of boys.

“Although far too common, acts of child maltreatment and adolescent violence are rarely ‘senseless’. They are predictable outcomes of a snowballing of risk factors. It would be surprising if adolescents having these negative experiences did not harm themselves and others” (Totten, 2001, p. 4).

Disconnection from School

- **31 of the 45 boys (69%) were documented to have poor school attendance.**
- **23 of the 45 boys (51%) exhibited behaviour issues at school.**
- **14 of the 45 boys (31%) were known to have been bullied.**

All children have a right to an education, on the basis of equal opportunity. States must take measures to encourage attendance and reduce drop-out rates (UNCRC, Article 28).

School engagement is a protective factor against youth suicides and homicides. In particular, school safety, relationships with caring adults at school, and school connectedness may reduce the risk of youth suicide (Janiri et al., 2020; Whitaker et al., 2016). On the other hand, lack of educational attainment was found to be a risk factor for homicide in boys while simultaneously, a positive school orientation was found to be a protective factor against gang involvement and youth violence (Hazekamp et al., 2021). The review of administrative files found that the majority of the 45 boys were disconnected from school and experienced poor school attendance, behaviour issues, and bullying. Eighty-four per cent of the boys who had poor school attendance were First Nations, suggesting that they were overrepresented in the experience of school disengagement.

As Adam's story illustrates (below), some boys were absent from school for extended periods, sometimes for years. Safe and healthy school experiences are needed to help youth develop secure attachments and give them a sense of safety and belonging. Youth who feel connected to their school are less likely to use substances, engage in violence and other risky behaviour, and are more likely to have better academic achievement (Centers for Disease Control, n.d.; National Center on Safe Supportive Learning Environments, 2021).

ADAM'S STORY

Adam's childhood was unsafe due to his parents' substance use disorders and violence in the home, which affected his mental, emotional, and cognitive development. He and his siblings were often left with unsafe caregivers for extended periods of time.

Adam was initially brought into CFS care in early childhood, where he spent two years away from his parents. Adam lived in 11 different homes during this two-year period. Despite his parents having not completed the outlined case plan and not having addressed known protection concerns, Adam was returned to his parents' care.

As a young child, Adam displayed aggressive and sexualized behaviours. He was formally assessed on two occasions: one assessment deemed Adam to be cognitively delayed, while the other found he had above average intelligence though experiences of abuse and trauma were affecting his behaviour. Despite requests by his foster parents and school staff to have Adam assessed for Fetal Alcohol Spectrum Disorder (FASD), this did not occur. Between age seven and 14, CFS completed no documentation on the family that described what interventions or supports may have been happening for Adam and his family. He was not assessed for FASD.

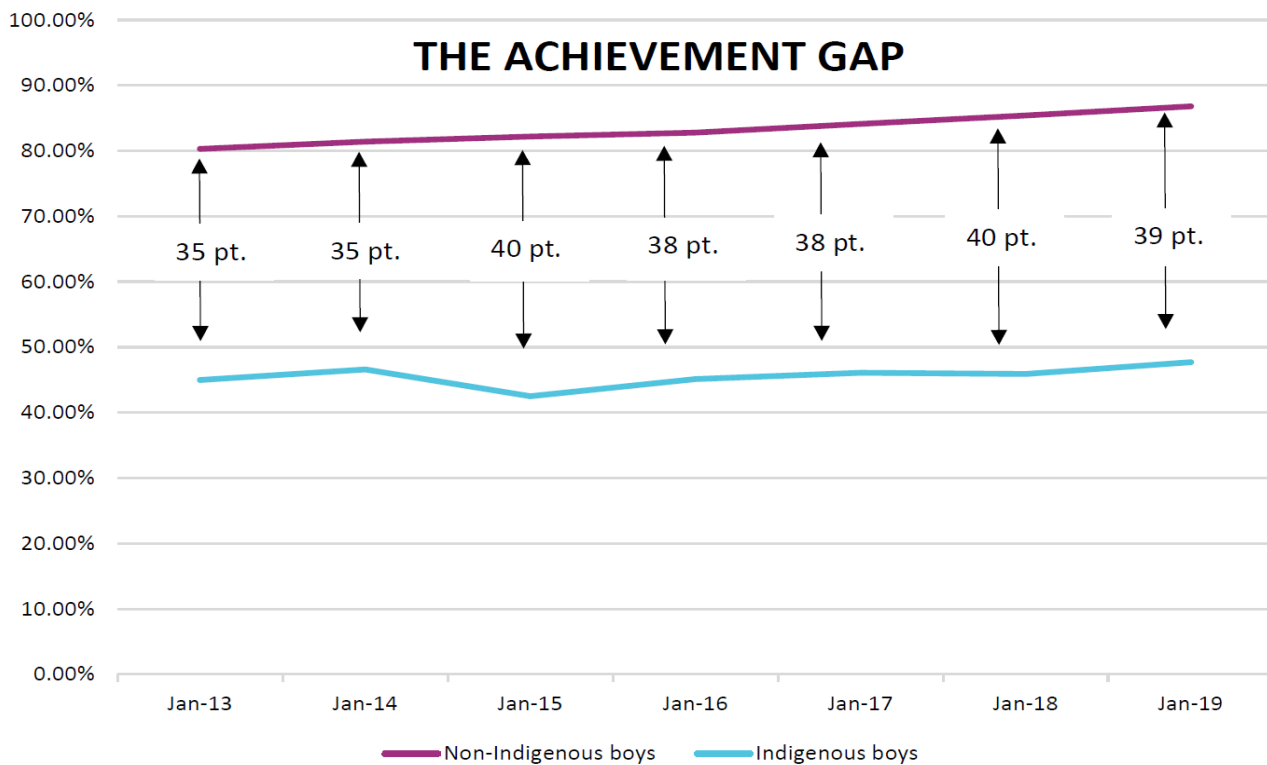
Adam was unable to read as he did not complete Grade 2 and remained out of school until he was a teenager. There was no documentation to explain why Adam was not attending school. Once back in school, he was suspended for dangerous behaviour, threatening students, and possessing a weapon while in school.

At the age of 14, Adam's parent brought him to a hospital as he had been experiencing suicidal ideation. At this time, he was using substances, setting fires, stealing, harming others when he felt threatened, destroying property, and had youth justice involvement. He came into care during this time and lived in five different foster homes. He died by suicide the following year.

THE ACHIEVEMENT GAP

There is a significant achievement gap between Indigenous and non-Indigenous students in Manitoba, with Indigenous boys having the worst outcomes. According to the Government of Manitoba, Indigenous boys have the lowest four-year “on time” graduation rates at 48%, compared to 87% for non-Indigenous boys (Manitoba Education, 2019). Graduation rates are higher, but disparate, for non-Indigenous girls (93%) and Indigenous girls (54%) (Manitoba Education, 2019). Comparing the rate of graduation for Indigenous and non-Indigenous boys from 2013 to 2019 suggests that the achievement gap has been stagnant for the last seven years (Figure 4).

Figure 4. Achievement gap in ‘on-time’ graduation rates, Indigenous and non-Indigenous boys, 2013-2019



Source: Government of Manitoba, Manitoba Education, 2021

WHAT YOUTH SAY

School engagement can be particularly difficult for First Nations, Metis, and Inuit boys in Manitoba. Interviews with family members described how sometimes boys experienced discrimination and prejudice, which affected their engagement in school. We interviewed the sister of Devon who died by suicide. She explained how her brothers were treated differently from her at school.

“For my brothers it was [a] different story because they looked more native, Devon dressed like a gangster, they got treated different. Teachers would assume that they were class clowns or troubled kids and would give them a hard time and judged them based on their looks...Devon got into a lot of trouble with school – towards the end. Never really knew why... he deserved more.” – Family member interview

This is not only the experience of Devon. Experiences of discrimination of First Nations boys in school are highlighted in the digital storytelling section (p. 51). Racism and discrimination were also echoed by hundreds of youth who participated in the Manitoba Advocate’s Youth Listening Tour, where 36% identified racism and discrimination as a concern facing children and youth in their community (Manitoba Advocate for Children and Youth, 2021). Many identified schools as places where discrimination and racism are experienced through interactions with peers and staff, but also places where those issues can be addressed through education.

“There needs to be anti-racism accurate history as mandatory parts of the curriculum.” – Youth Participant, Listening Tour

Some argue that structural racism is the fundamental cause of the academic achievement gap (Merolla & Jackson, 2019). Indeed, “racism experienced in the educational setting, affects the trajectory of academic achievement for children and adolescents and ultimately impacts health” (Trent, Dooley, & Dougé, 2019, p.4). Racism is a social determinant of health that can have detrimental impacts on children and youth, leading to detrimental health outcomes on mental health and behaviour problems, among others (Priest et al., 2020).

To be clear, these findings are not meant to suggest that Manitoba teachers are racist. Instead, our findings, feedback from families, the stories of the boys, the voices of youth across the province, and those from the broader literature make it clear that ongoing work is needed in educational settings across Canada to de-centre the white experience and aim for increased diversity of materials and representation as a pathway to improved connectedness of BIPOC students and families.

Additionally, service providers identified the unequal representation of Indigenous teachers and teachers of colour in many school divisions across Manitoba as a barrier. For example, one school division had 73% of staff who identified as white, while only 53% of people in the catchment area identified as white, an overrepresentation of 19% (Manitoba Education interview, September 3, 2021). Service providers explained some teachers may not be aware of, or not able to identify, the levels of institutional racism or see the racism experienced by their students (service provider interview, August 30, 2021). Service providers agreed that, for youth, seeing themselves and their culture represented in schools, both with teachers and staff, but also in the images and visuals within, was an important part of addressing discrimination and enhancing feelings of belonging in schools.

Findings, together with the ongoing educational achievement gap, indicate that in its current form, Manitoba’s approach to education for Indigenous boys is not meeting their needs and may in fact be preventing them from realizing their equal right to an education.

BEST PRACTICES: WHAT WORKS TO ENGAGE AND SUPPORT INDIGENOUS BOYS IN SCHOOL?

A systematic review and meta-analysis of drop-out prevention interventions suggests that many different types of drop-out prevention and school engagement programs are similarly effective at reducing drop-out rates. Such interventions include programs that incorporate community service, vocational education, mentoring and counselling, skills training, smaller classrooms, and case management and attendance monitoring (Wilson et al., 2013). Programs should be appropriate to local circumstances and be implemented well to succeed.

There are many examples of promising programs across Canada to enhance school engagement of Indigenous youth:

Uniting Our Nations: Relationship-based Programming for First Nations Youth

Developed in consultation with First Nations youth, educators, community members, and local school boards in Ontario, this initiative includes a series of strategies, including peer mentoring and leadership courses, a credit-based academic course, and transition conferences for Grade 8 students. Preliminary findings show that students in the First Nations Cultural Leadership Course showed higher academic performance and lower

absenteeism, compared to other courses (Crooks et al., 2010). Engagement with mentors was also high, with 77% of youth completing a semester with mentorship supports (Crooks et al., 2010).

The Four Directions First Nations, Metis and Inuit Graduation Coach Approach (FDGC)

This is a multi-dimensional program that provides intensive supports to Indigenous students and their families with the goal of graduation and post-secondary education success in Dryden, Ontario. The program involves contacting all Indigenous students and their families prior to the school year, meeting with families, cultural training, teacher champions, connection with Indigenous community agencies, leadership development, and significant tracking of student achievement. Initial results are encouraging: drop-out rate of Grade 9 students decreased from 16% to 2% and credit attainment for Grade 9 students increased from 60% to 90% (Lessard, 2018).

There are also a number of initiatives that have been developed to enhance equity in schools and decrease experiences of racial discrimination.

Aboriginal Education in BC: Equity in Action Project

In partnership with a cohort of school districts, the British Columbia Ministry of Education has embarked on the development and implementation of an Equity Scan – a systemic approach to identifying and addressing barriers affecting Indigenous learners in public education. The goal is for School Districts to engage in a meaningful self-assessment and to respond in strategic ways to create conditions for success (British Columbia Education and Training, 2020).

The Speak Out Against Racism (SOAR) Project

This is an anti-racism program that was administered in four Australian schools (two other schools were comparison schools). This program included teacher training and professional development; curriculum and classroom materials (eight-week unit of work for years 5 and 6); support for students; as well as parent and community involvement (Priest et al., 2020). The evaluation of the SOAR program showed staff and students found the program engaging and effective. Moreover, the evaluation found the program helped increase the confidence of staff and students to discuss and address racism, improved students' understanding and awareness of racism and their ability to intervene when witnessing acts of racism at school (Priest et al., 2020). The study also noted reduced racial discrimination at school (Priest et al., 2020).

WHAT IS HAPPENING IN MANITOBA?

Through the Indigenous Inclusion Directorate, Manitoba Education supports the development of initiatives to address Indigenous academic success. In particular, the Aboriginal Academic Achievement (AAA) Grant allows school divisions to apply for additional funding to assist with current or new initiatives to improve academic success for Indigenous students, focusing primarily on literacy and numeracy (Manitoba Education, 2015). Current granting guidelines do not specifically address the issues of Indigenous school engagement, attendance, or drop-out prevention as outcomes, despite these being significant and chronic concerns for Indigenous boys. Manitoba Education reported the guidelines are being reviewed to ensure more flexibility in the use of the funds (Manitoba Education interview, August 30, 2021).

The Better Education Starts Today (BEST) Strategy, published in 2021, has closing the achievement gap for Indigenous and non-Indigenous students as one of its priorities (Manitoba Education, 2021, p.6). Its priority action includes implementing an Indigenous Inclusion Strategy to advance reconciliation and close the achievement gap (Manitoba Education, 2021, p.16). By 2024, there is a commitment to increase graduation rates of Indigenous students by 20% (p. 17). Manitoba Education reported that work on this strategy is underway and expected to be completed in 2022 (Manitoba Education interview, August 30, 2021).

Manitoba Education, however, reported that strategy is not currently focused on the experiences of Indigenous

boys (Manitoba Education interview, August 30, 2021). The evidence is clear that Indigenous girls and boys have differential outcomes worth noting. While Indigenous girls on time graduation rates have increased by 5% from 2013 to 2019, the graduation rates of Indigenous boys have remained stagnant, only increasing by 3% during the same time period. For non-Indigenous students, on-time graduation rates increased by 6%. The disparity suggests Indigenous boys face additional and/or different barriers to school achievement in Manitoba, which points to the need for the Indigenous Inclusion Strategy to include tailored approaches and responses.

“Decolonizing education is critical not only for restoring a strong sense of identity and pride in Indigenous peoples, which is associated with academic success...it is also critical for advancing reconciliation and improving relationships between Indigenous and non-Indigenous peoples in Canada.”

(National Collaborating Centre for Aboriginal Health, 2017, p. 7).

In 2017, Manitoba Education (then, Manitoba Education and Training) published *Creating Racism-Free Schools through Critical/Courageous Conversations on Race*. Among others, the purpose of this document was to stimulate dialogue, inform educators, and be a call to action. The document places current racism in education in a historical context, defines racism and its effects on students and schools, defines so-called critical/courageous conversations, and presents case studies and pilot examples in Manitoba. Ultimately, the document is inspired by Canada’s Truth and Reconciliation Commission, specifically *Calls to Action* 6 to 10 which focus on closing the education gap between Indigenous and non-Indigenous Canadians, and encourage educators to engage with anti-racism practice, provide tools for self-assessment, and improvement of the school environment. According to Manitoba Education, this workbook is not mandatory, and it has been up to school divisions to make use of this comprehensive resource (Manitoba Education interview, August 30, 2021).

Also promising is the Manitoba-based pilot project, Making Equity Work in Schools – a three-year anti-racist professional development project for all 21 schools in the inner-city district of the Winnipeg School Division. Based on critical race theory and equity education principles, the project provided leadership training to educators with the objective of advancing student achievement, partnering with families and communities, and building and maintaining systems of educational equity (Manitoba Education and Training, 2017). While there was no rigorous evaluation of this pilot, participants reported increased student engagement and attendance, increased reflective practice in teachers, and meaningful conversations within the school community (Manitoba Education, 2017). This pilot has since ended and no alternative programming has been reported by Manitoba Education (Manitoba Education interview, August 30, 2021).

Currently there is no province-wide program or intervention to address racial discrimination in Manitoba schools. This is a barrier for the achievement of equality in outcomes for Indigenous boys, whose risk of suicide and homicide increase when the protective effects of school engagement are not present. Creating a strategy to address the achievement gap of non-Indigenous students and supporting initiatives to reduce discrimination in schools is imperative for the prevention of violent deaths by homicide and suicide.

Substance Use

- **34 of the 45 boys (76%) were documented to have engaged in substance misuse as a youth.**

States have an responsibility to protect children from the illegal use of drugs and from being involved in the production and distribution of drugs (UNCRC, Article 33).

Substance use is a risk factor for suicide and homicide in youth. Persons with an alcohol dependency and those who use drugs have a 10-14 times greater risk of death by suicide (Wilcox et al., 2004). Not only does substance use increase the risk of death by suicide, but substance use is also a risk factor for physical victimization and aggression among youth (Stoddard et al., 2015). Research has shown that there is a strong association between substance use and violence (victimization and aggression) (Watts & Iratzoqui, 2019; Logan, Vagi, & Gorman-Smith, 2016). The vast majority (76%) of boys in this special report were documented to have substance use concerns.

JUSTIN'S STORY

Justin was from a small community, where he lived for most of his life with his parents and siblings. Justin's parents had substance use disorders and he lived in the care of his grandparent for much of his childhood. During his life, local law enforcement and child welfare agencies received regular reports of his parents leaving the children unattended. Often while under the influence, incidents of intimate partner violence between his parents occurred, which were witnessed by the children. Reports were also made that the children were being physically abused. Justin's home life was described by a community mental health worker as "extreme family dysfunction."

Justin's older siblings began using substances at very young ages, expressed suicidal ideation, and made suicide attempts multiple times, often while under the influence of alcohol. In Justin's early childhood, one of his older siblings died by suicide. The family struggled to cope with the loss of the child. Offers of support were made by mental health workers and the child welfare agency. Justin's parents continued to use substances, with ongoing incidents of intimate partner violence. Justin was documented to be using substances himself at the age of 10. Around this time, another older sibling attempted suicide.

Over time, concerns arose about Justin's level of functioning, and he was later assessed as having an extremely low IQ. While a recommendation that Justin should be assessed for Fetal Alcohol Spectrum Disorder was noted, there was no evidence this assessment was completed. Justin struggled in school and ultimately stopped attending regularly.

One of Justin's parents died during his early teenage years. A few weeks after the death of his parent, Justin attempted suicide while under the influence of alcohol. Justin was transported out of the community for psychiatric assessment and intervention. After a five-day hospitalization, Justin was returned to his community with the plan that he would connect with the community mental health worker. Referrals were made to substance misuse treatment and counselling, but Justin continued to use substances and would often not return to his placement. His behaviour became increasingly violent, resulting in Justin being arrested and placed in custody.

Following one incident, Justin was transferred from custody to a treatment centre where he spent six weeks. While Justin was at the treatment centre, a second sibling died by suicide. Upon his release from the treatment centre, Justin returned to his community where he continued to use substances and express suicidal thoughts. There was little documentation regarding Justin's experience during treatment, or discharge planning upon his release. At the age of 17, Justin died by suicide. At the time of his death, his blood alcohol level was over two times the legal driving limit.

The pharmacological effects of substances can impact an individual's cognitive processes, behaviour, level of arousal, impulsivity, and aggression (Stoddard et al., 2015). These effects place youth at an increased risk of engaging in high risk behaviours which may lead to death by suicide or homicide.

Youth age 15-24 are more likely to experience mental illness and/or substance use disorders than any other age group (Centre for Addiction and Mental Health, 2021). The prevalence of substance use disorders in Manitoba is higher among First Nations adolescents (7.6%) than other Manitoba adolescents (1.5%) (Manitoba Centre for Health Policy, 2020). The prevalence of substance use disorders among First Nations adolescents is likely underestimated since statistics did not include information from nursing stations (Manitoba Centre for Health Policy, 2020).

ACCESS TO TREATMENT FOR SUBSTANCE USE DISORDER

The Manitoba Advocate's Investigators examined the case files of the most recent deaths of 10 boys who died by suicide and homicide where substance use was noted as a risk factor. The purpose was to explore whether these youth received treatment for their substance use. The reason to look at a recent sample is due to significant changes in substance use treatment in the last 10 years. **Of the 10 cases that we reviewed, only three boys ever received substance use treatment.**

For those youth that received treatment, they did not always have access to ongoing or long-term supports for their substance use disorders. This was particularly the case for boys that lived in First Nations communities, like Justin (previous page).

WHAT YOUTH SAY

Key informants and youth interviewed for this special report noted current mental health and substance use disorder interventions and supports for young people are insufficient. Further, substance use was the number one issue identified by youth during the Youth Listening Tour, a province-wide consultation with 293 youth, with 55% of participants identifying substance use as a top concern (Manitoba Advocate, 2021, p.20). Some participants spoke specifically about the challenges in rural and remote communities:

“There needs to be more supports/events/resources for young people in rural areas. There is much drinking/drugs that take place ...because there is nothing better to do.” – Youth Participant, Listening Tour

During the Youth Listening Tour, youth provided solutions to address substance use, including 24-hour drop-in centres, in-home rehabilitation programs, peer-to-peer support, long-term treatment centres that “do not have an end date,” involuntary substance use treatment services, and more. Their suggestions are consistent with the gaps observed in this special report.

BEST PRACTICES: WHAT WORKS TO ADDRESS ADOLESCENT SUBSTANCE USE?

There is a wide range of interventions known to have positive effects on the prevention, decrease, or cessation of substance abuse (see Das et al., 2016). Effective strategies can be separated into individual cognitive-behavioural therapy (including brief interventions), school-based, and ecological family-centred interventions, with school-based interventions being the most thoroughly studied (Hogue et al., 2018). There is also a growing literature on the effectiveness of internet-based interventions to reduce adolescent substance misuse (Taylor et al., 2021).

WHAT IS HAPPENING IN MANITOBA?

As can be seen in the Appendix, since 2018, the Manitoba Advocate for Children and Youth has issued 13

recommendations related to mental health and substance use to the Government of Manitoba. While some limited progress has been made by the government on some of the recommendations, none have been fully implemented. Five of the 13 recommendations pertain to the implementation of specific recommendations issued in *Improving Access and Coordination of Mental Health and Addiction Services: A Provincial Strategy for all Manitobans*, for which the Manitoba government contracted Virgo Planning and Evaluation Consultants Inc. to develop related to mental health and substance use treatment services in the province, which is commonly known as the 'Virgo Report' (2018).

The remaining eight recommendations call for action beyond the Virgo Report, through the development and implementation of a youth mental health and substance use action strategy and framework across Manitoba. The development of this strategy requires the identification of all resources and gaps across the system that prevent youth from accessing effective treatment. These recommendations — which emerge from the stories and experiences of Manitoba youth — call for equitable access for children and youth to mental health and substance use treatment services across Manitoba, an evaluation of current triaging/accessing processes at the Health Sciences Centre's Children's Hospital Emergency Room, the establishment of 'System Navigators' or mental health and substance use case managers, annual reviews of available therapeutic trauma interventions, and the creation of an in-patient or community-based long-term residential treatment centre.

Criminal Justice System and Gang Involvement

- **29 of the 45 boys (64%) were involved with the youth justice system.**
- **15 of the 45 boys (33%) had documented gang involvement.**

States have an responsibility to protect children from the illegal use of drugs and from being involved in the production and distribution of drugs (UNCRC, Article 33).

Like the child welfare system, First Nations, Metis, and Inuit youth are overrepresented in the youth justice system both as victims and as accused (Clark, 2019). The Department of Justice (2019) notes:

Indigenous youth are even more disproportionately represented in the correctional population than their adult counterparts. In 2017/2018, while representing 8% of the Canadian population, Indigenous youth accounted for 48% of admissions to custody in the nine reporting jurisdictions (excluding Nova Scotia, Québec, Alberta and Yukon). Male Indigenous youth accounted for 47% of male youth admissions to custody (p. 4).

Brownell et al. (2020) report the systemic and societal factors that exist for Indigenous Peoples within Manitoba may put them at greater risk of involvement with both the child welfare and youth justice systems. The same authors note the largest predictor of youth justice involvement was having spent time in the care of a child welfare agency and this continued to increase by number of placements and exposure to incidents from other children in care. In particular:

First Nation and Metis children who had been in care both had higher risk of being charged compared with all other Manitoba children who had been in care. Male children who had been in care had an increased risk of being charged compared with females (Brownell et al., 2020, p. 67).

In its 2019-20 annual report, Manitoba Justice reported a decline in the average daily youth custody population, with a decrease from 149 during the 2018-19 year to 125 for the 2019-20 year (Manitoba Justice, 2019-20). Additionally, the average youth probation caseload size decreased from 962 to 755 (Manitoba Justice, 2019-20).

JASON'S STORY

Jason's grandparent helped care for Jason, as his mother was an adolescent at the time of his birth. The local child welfare agency was aware of concerns surrounding substance use by Jason's parent and intimate partner violence, and the agency was monitoring the family. Ongoing concerns continued to be reported to the designated intake agency. Jason and his siblings were apprehended when Jason's parent was arrested and taken into custody.

While in agency care, Jason and his siblings were placed together and had regular visits with their parent and step-parent. Over time, visits progressed to unsupervised and in the family home, as his parent had completed counselling and parenting programs and was reported to be abstaining from substances. Jason, along with his siblings, were returned to the care of his parent when he was 14 years old. There continued to be concerns about his parent and step-parent's relationship, including intimate partner violence, and the agency continued to monitor the family.

Throughout his teenage years, Jason was documented as attending school sporadically and presenting with behavioural issues while in school. Jason's criminal involvement began in his teenage years when he acquired serious violent and weapons-related offences. Jason was deemed very high risk for criminal re-involvement where substance use, peer relationships and gang involvement, as well as employment and education concerns were identified as areas contributing to his high risk. Jason was regularly in and out of custody for failing to comply with his probation order. Furthermore, Jason identified as being affiliated with a local street gang and wore identifiable attire.

Jason's parent struggled to parent him and his four siblings around this time. Jason's three youngest siblings were apprehended when they were found home alone by agency workers. Jason was incarcerated at the time, however he was placed under apprehension upon his release from custody. He was placed with a close friend, as he had spent significant time in their home and felt connected to their family. Jason's parent continued to use substances and they had little contact during this time.

Jason did request to visit with his siblings. He met with his agency worker upon his release from custody to discuss visits and other concerns, including his own substance use, criminal involvement, and planning for a return to school. The day after meeting with his agency worker to discuss, Jason died by homicide.

GANG INVOLVEMENT

The issue of gang involvement and gang violence has been a significant problem in Manitoba for many years, and continues to be one that systems and service providers struggle to address. In Winnipeg, one estimate noted approximately 1,400 to 1,500 youth are involved as active gang members (Gang Action Interagency Network, 2017). Gang involvement was particularly relevant for the boys who died by homicide in this investigation. Of the 13 boys who died by homicide, eight were known to have some gang association. Service providers interviewed for this special report also noted there is often little option for youth to avoid gangs, as involvement has been intergenerational and many young people are born with gang associations (Service provider interview, June 16, 2020). Speaking of their experiences in a gang, one youth told us:

"I had nowhere to turn." – Youth interview

As with all the risk factors examined through this special report, gang involvement is connected to other issues such as poverty and racism, and the consequences of these issues include family dysfunction, substance use, and disconnection from school, among others. Totten (2009) identified several pathways into gang involvement including “violentization,” where survivors of extreme violent trauma and neglect in childhood can become “predators and prey in adolescence” (p. 140); experience developmental impairments and mental health disorders; encounter social exclusions including devaluing of family units; and may develop overly violent masculinities where males develop their identities through violence. Dunbar (2017) summarized some other motivations that entice boys towards gangs including:

- social organization and status;
- excitement and entertainment;
- a sense of identity and belonging; and
- attempts to mitigate poverty and address a lack of education or employment opportunities.

First Nations and Metis youth continue to be at increased risk of becoming gang involved, for reasons mentioned above, and in connection to the history of colonization, residential schools, ongoing issues of systemic racism, and other community-level barriers. As reported earlier, students placed in residential schools were surrounded by violence and lived in persistent fear for their safety. As a result, some survivors reported gangs forming within the school, in their attempts to protect themselves and meet their own basic needs where the school did not (TRC, 2015a). In addition to gangs providing protection and a means to meet basic needs, gangs may also offer perceived social and economic security, which Indigenous Peoples may struggle to obtain through conventional avenues due to structural barriers and systemic racism. Ongoing experiences of oppression and discrimination continue to marginalize Indigenous youth and their families, further increasing their risks of becoming gang involved.

Involvement in certain systems has also been correlated to gang involvement, specifically the child welfare and criminal justice systems (Gang Action Interagency Network, 2017). Youth who are involved with the child welfare system are more vulnerable to gang involvement, including many entrenched individuals who understand the vulnerabilities of children in care and will seek these children out specifically to exploit through gangs. As noted in the federal government’s publication *Building a Safe and Resilient Canada*:

Involvement in the Indigenous child welfare system is a risk factor for gang involvement and criminality that is quite firmly established in the literature. The path from child welfare to gang involvement is intensified through the displacement of Indigenous children that can lead to vulnerability, abuse and harm, trust and attachment problems, as well as an array of mental health issues. (2018, p. 4)

Although 62% of males who died by homicide had some gang association or involvement, the level of entrenchment varied with each youth and not all of these youth died because of gang violence. In addition to the lives lost as victims of homicide, it is important to consider who is being found responsible for these deaths, and the impacts that both the loss of life followed by an individual’s loss of freedom and removal from mainstream society through incarceration have on families and communities. In Canada, between 2012 and 2016, 21% of homicide victims were youth, with 37% of those accused being youth as well (Snider et al., 2020). The opportunities and potential that are interrupted when an individual becomes involved in criminal behaviour and ultimately ends up incarcerated is an additional loss to consider, particularly when it is another young person involved.

Victims and offenders often share similar characteristics and previous criminal involvement also increases one’s risk of victimization (Schreck, Stewart, & Osgood, 2008). Winnipeg Police Service (2020) recently reported rates of violent crime had increased significantly in the past year, with eight homicides involving youth as accused. In one interview conducted for this special report, it was noted that justice-involved boys are often engaging in similar risky behaviours, and it is “Russian Roulette” which ones may be injured and which may die (service provider interview, June 15, 2020). The accused often have similar histories and parallel risk factors as the victims who are injured or lose their lives. The social safety nets that should have existed to protect those who lost their

lives fell short in the same ways for those who were found responsible for these acts.

WHAT YOUTH SAY

In 2019, the Government of Canada held an Indigenous Youth Roundtable event to invite youth to share their experience with the Canadian criminal justice system. Participants in the roundtable spoke “repeatedly of the impact of growing up in the cultural void created by colonization. The resulting absence of identity leads to a lack of ‘purpose’, ‘identity’, and ‘self’ as an individual, as well as in the larger sense of family and community” (Department of Justice, 2019, p.8). Participants reported, “growing up not knowing who you are creates isolation” (Department of Justice Canada, 2019, p.8). This, in turn, leaves youth “more vulnerable to high-risk behaviours, including resorting to drug and alcohol use and engaging in illegal activity. Isolation can also lead to mental health issues and victimization” (p. 8). These behaviours coincide with risk factors for suicide as well as involvement with gangs.

Violence was among the top-five concerns of youth in Manitoba (Manitoba Advocate for Children and Youth, 2021). Of the hundreds of youth participating in the Youth Listening Tour, 41% shared they have felt unsafe in their communities (Manitoba Advocate for Children and Youth, 2021). The fears associated with violence for young people are two-fold. First, youth expressed feeling fearful of being brought into crime or gang activities and second, felt fearful of becoming a victim to violence. The youth identified poverty, mental health, isolation, and substance use as factors that increased risk of violence.

Youth stressed the urgent need for more community-based recreational activities, including sports, art, and cultural activities, to negate the effects of violence and gangs across the province. Current barriers to recreation activities include transportation, equipment costs, and availability of programs, particularly for communities outside of urban centres with limited travel options.

BEST PRACTICES: WHAT WORKS TO ADDRESS GANGS AND PREVENT YOUTH HOMICIDES?

A systematic review found focused deterrence programs are effective proactive crime reduction strategies (Braga et al., 2018). The Boston Operation Ceasefire strategy, included in the systematic review, showed a 63% reduction in youth homicide in Boston during the 1990s. The strategy focused enforcement on illicit firearms traffickers who supply youth with guns, communication with gangs about increased enforcement, and community alternatives to gang involvement for youth.

The National Crime Prevention Centre (2007) of Public Safety Canada developed a review of best practices and highlighted the Boston Operation Ceasefire strategy, among others. This review identified six “key ingredients” of promising approaches including: (1) strategic planning, (2) an accurate and thorough diagnosis of the problem, (3) comprehensive and integrated approaches, (4) multi-sectoral approaches, (5) a lead agency for coordination, and (6) proper targeting and different levels of intervention (National Crime Prevention Centre, 2007, p.8).

WHAT IS HAPPENING IN MANITOBA?

Manitoba Justice funds the Manitoba Justice Project Gang Proof Resource Line – a non-emergency resource line for youth, parents, and others dealing with gang-related issues that focuses on making referrals to appropriate resources (Manitoba Justice, n.d.). Manitoba Justice also supports the Turnabout Program, which is a case management program for at-risk children under 12, that provides support and direction to prevent criminal justice involvement (Manitoba Justice, n.d.). The program connects children and families to community resources and coordinates responses to support the family.

In Winnipeg, the Gang Action Interagency Network (G.A.I.N) is a network of government and not-for-profit agencies, community organizations, and law enforcement working on grassroots solutions to the gang problem. This network supports mentorship opportunities, tattoo removal, and a gang-exit intake and support program. It launched an app in 2017 for youth and front-line workers to gain access to resources to prevent

gang involvement. That same year, the network also launched a community-based anti-gang strategy that recommended:

- Development of 24/7 navigators to help people exit gangs
- Increasing mentor/mentorship programs
- Culturally appropriate mental health/addiction services
- Eliminating accessibility barriers for recreation opportunities
- Increasing culturally appropriate programming
- Fostering connections between young people and their community
- Public education about who joins gangs and why

In 2019, the province announced details of Manitoba's Guns and Gangs Suppression Strategy supported through two years of funding for 2018-19 and 2019-20 from the Government of Canada (\$2.3 million) (Government of Manitoba, 2019). While the strategy is not publicly available, a news release detailed the following activities:

- \$1.3 million to support the Winnipeg Police Service's Guns and Gangs initiatives, which will focus on the identification, arrest and dismantling of gangs, criminal organizations or violent crime groups, especially those involved with illegal firearms and illicit drugs;
- more than \$704,000 to develop a new database that will enhance the collection and dissemination of illicit firearm and gang intelligence, and improve intelligence sharing in Manitoba;
- \$172,000 for specialized equipment for the Manitoba First Nations Police Service, and gang intelligence and awareness training for other police agencies outside of Winnipeg;
- more than \$80,000 to support the expansion of community mobilization programs;
- \$20,000 to support gang exiting efforts; and more than \$12,000 to support specialized training for Crown attorneys for the prosecution of organized crime and firearms offences.

An additional three years of federal funding has been committed to fund gang prevention initiatives in Manitoba for 2020-21 to 2022-23, including intelligence gathering, education, capacity generation, and community mobilization and programming (Manitoba Justice, personal communication, August 31, 2021).

While all provinces have signed on to the Guns and Gangs Action Fund which is administered by the federal government under *The Initiative to Take Action against Gun and Gang Violence*, only some provinces such as Alberta, British Columbia, and Saskatchewan have their own gang prevention strategy. Of these, only British Columbia has a gang prevention strategy tailored specifically towards youth developed through consultation with various stakeholders in the community.

While Manitoba Justice has focused on evidence-based suppression tactics, including a large investment to address the illegal firearms and illicit drug trade enforcement and prosecution, the information available publicly reveals fragmentation in how youth gang prevention is currently coordinated and funded across Manitoba. In addition, existing information does not demonstrate the "key ingredients" of an effective gang prevention strategy.

Key ingredients which appear to be missing include:

- strategic planning;
- an accurate and thorough diagnosis of the problem;
- ongoing community consultation so the strategy is informed by the local context, including differences within urban, rural, and remote settings;
- comprehensive and integrated approaches, including augmented outreach and intensive mental health supports for boys upon first contact with the criminal justice system, while they are in custody, and to

support rehabilitation and reintegration upon exiting custody;

- multi-sectoral approaches involving Manitoba Justice, Manitoba Health and Seniors Care, and Manitoba Families;
- a lead agency for coordination;
- integrated services that centre boys and their families; and
- proper targeting and different levels of intervention

Hence, a more robust province-wide youth gang prevention strategy appears to be needed in Manitoba.

WHAT ELDERS TOLD US

When asked about what warriorism has meant to them, one Elder shared his understanding of this term to be a peacemaker, as “you war for peace” (Elder interview, November 10, 2020). He commented on the strength and wisdom it takes to create peace among people, and how necessary this work is at this time. With boys disconnected from their families and their traditions, seeking belonging from other sources, they risk turning on themselves or turning on others around them. It is important to consider what is missing for these youth, including a need to return to ancestral teachings and traditional ways (Elder interview, November 10, 2020).

Summary

Gender identity differences and the meaning society assigns to those differences, can influence how children and youth understand and react to stress and trauma as well as how services react to their behaviours. For example, boys are more likely to demonstrate externalized behaviours in response to stress and trauma, meaning they are more likely to react with outward behaviours including anger and aggression (Dulmus and Hilarski, 2006; Eschenbeck et al., 2007; Maschi et al., 2008). In addition, boys are more likely to demonstrate avoidance, including being less likely to seek social support in response to adverse experiences (Eschenbeck et al., 2007). These differences are due, in part, to socialization, and social messages about what is acceptable or expected for male children and youth. The expectation that ‘boys don’t cry’ and anger is the only acceptable emotion for boys continues to harm male children and youth (Champagne, 2017; service provider interview, September 9, 2020; service provider interview, November 6, 2020).

One parent who spoke with us noted, “culturally, males are conditioned to not express their feelings, share their struggles, or even ask for help when they are suffering” (parent interview, June 14, 2021). Based on these social constructs of gender masculinity, boys are at risk of experiencing gender bias and discrimination in service provision (Maschi et al., 2010), which can lead to them not receiving the meaningful and comprehensive services to which they are entitled.

“And here we are. We’re just little boys who are lost, who are trying to act like something we’re not. We’re trying to act independent, but inside we’re hurting, we’re broken, and we’re lost.” – Youth Interview

We heard from young men from the Manitoba Advocate’s Youth Ambassador Advisor Squad (YAAS!) that boys are socialized not to cry in western society, though it was noted that Indigenous teachings encourage boys to express themselves in these more honest ways (youth interview, June 26, 2020). Suppressed emotions risk manifesting into externalized behaviours, resulting in teenage boys who may engage in self-harm, and who, in turn, may use substances or engage in violence and criminal involvement as a way of expressing or releasing emotion. As one study noted, “adolescent boys are also more likely to engage in alcohol, tobacco, and drug use with both immediate and long-term consequences. And boys, similar to men, are less likely than girls and women to seek help early” (Amin et al., 2018, p. 3).

“You do not want to be perceived as weak ... ‘man up’ is a disguise.”

– Youth Interview

Importantly, our office heard that system responses may differ depending on a youth’s gender identity. Girls may be encouraged to seek out support and services, while there continues to be stigma surrounding boys reaching out for help (service provider interview, June 16, 2020). This stigma comes from larger systems which have created barriers to attaining service, often labelling boys as aggressive or delinquent. It was suggested that girls are more often provided with opportunities to deescalate within health-system managed crisis stabilization units in the community, while boys presenting with similar behaviours are criminalized and left to stabilize in custody of the justice system. As one service provider summarized:

“Girls stabilize in YASU [Youth Addiction Stabilization Unit], while boys stabilize in MYC [Manitoba Youth Centre].” – Service provider interview, June 16, 2020

Maschi et al. (2010) made a similar finding, noting teenage boys are more often referred to the justice system while girls are more likely to be referred to health or mental health services. The same authors further noted that teenage boys were overrepresented in special education, substance use, and justice programs, while girls were primarily overrepresented in health and mental health settings. Manitoba service providers confirmed this in practice, reporting boys are often initially introduced to professional supports only after they became involved with the justice system, and that limited resources or supports were offered to boys prior to this time (service provider interview, June 15, 2020; service provider interview, June 19, 2020). In contrast, girls were noted to be connected to support services earlier and there were fewer barriers and less stigma around accessing services overall. One service provider shared the belief that social safety nets are quicker to “save the girls” when speaking of resource allocation and service provision (service provider interview, June 16, 2020). In this way, boys who are struggling may be pushed further away and saddled with negative labels and stigmatized for their inability to cope.

Indigenous boys face additional barriers perpetrated by harmful and dangerous biases within society (Innes, 2015). Indigenous men are too often portrayed as dangerous perpetrators of violence. These portrayals can become internalized by Indigenous men, as one community member shared their concern with the hyper-masculinity that has more recently become associated with “warriorism” (service provider interview, September 9, 2020). These portrayals also assist in maintaining the idea that Indigenous men are in these positions because of their own deficits or shortcomings, and deflect responsibility from the larger systems and processes that continue to have significant influence on the lives and outcomes of Indigenous men. Innes (2015) suggests “this view of Indigenous men only as victimizers acts to simplify a long history of complex colonial interaction between Indigenous people and Canadians” (p. 51).

The combination of racial and gender bias is particularly dangerous for Indigenous males and carries significant implications, including how public services respond to these individuals. In one interview conducted for this special report, it was noted when boys are living with trauma and their behaviour reflects that experience, they are often viewed as an “aggressor” and someone to be feared, rather than someone to be supported (service provider interview, June 16, 2020). The Manitoba Advocate has heard from service providers and from youth themselves about experiences of discrimination which have prevented Indigenous youth from accessing needed services throughout the province. Furthermore, the issue of discrimination was also echoed by youth who participated in the Manitoba Advocate’s Youth Listening Tour, where 36% identified racism and discrimination as a concern facing children and youth in their community (Manitoba Advocate for Children and Youth, 2021).



THE WEST

YOUNG ADULTHOOD

“The west represents the fall, a time for harvesting, a time for self-reflection and introspection. This is the stage of adulthood, a time when we think about our journey thus far and begin to make the positive changes needed to continue on the cycle in a good way. The west represents the emotional aspect of the self.”

(Best Start Centre, 2010, p.7)

The West - Young Adulthood

“It is a confusing time and a really challenging time...it doesn’t matter who you are, how wealthy you are, how well positioned you are, it is going to be a challenge, and it is a really confusing time for people generally, you are moving from childhood to young adulthood. Given the residential school debacle, a lot of those roles were misplaced, especially for young men.”

– Elder Ed Azure, interview, Aug. 17, 2021

The stories we explored in this special report are those of young boys who died by suicide or homicide before they reached adulthood. Their journeys on Earth came to an early close and these youth were not afforded the gift and privilege of hindsight that most young people benefit from as they enter adulthood. One of the objectives of this special report is to enable and empower boys to express their ideas and experiences receiving public services and to promote healing through digital storytelling.

Digital Storytelling

Digital storytelling is the practice of using computer software and tools to tell stories. Digital storytelling combines oral tradition with digital technology and is a participatory and youth-centred approach to generating knowledge. Two First Nations young adults, Michael Breland and Trevor Merasty, participated in a digital storytelling camp our office organized, which was led by Indigenous scholar Dr. Marlyn Bennett and Mike Elliot. Two questions were explored in this study:

- **What is your truth as a young Indigenous male living in your community?**
- **What is your truth as a male youth previously involved with public systems (CFS, justice, school, etc.)?**

These questions were discussed through digital storytelling workshops and, over the course of five days, participants developed and created responses through their own digital video. The two young men decided to collaborate on a single video. Once the video was completed, a follow-up debriefing took place to discuss the video, its content, and the artistic decisions. Youth had the creative freedom to create content and express their ideas and experiences.

To watch the final video, scan the QR code (below) with your phone’s camera or click this link to watch the video on YouTube: <https://youtu.be/DolufcFs7dc>

WATCH “LIED TO” ON YOUTUBE



BEHIND THE LYRICS: RACISM

The final video, “Lied To,” includes powerful lyrics presented in music video format, with each boy rapping about their experiences while reflecting on the questions they were asked to consider.

Issues of racism on various levels emerged through their lyrics. For example, while reflecting on his experience living in an urban community, one boy rapped:

**THEY DON'T LIKE WHAT WE DO
THEY HATE THE WAY THAT WE MOVE, AND
WE CAN NEVER SEE WHAT THE TOP'S LIKE
NOT A LOT OF US GET THE SPOTLIGHT
SO WE WORK THREE TIMES HARDER OUR WHOLE LIFE**

The issue of racism appeared again as lyrics reflected an experience in the care of child and family services:

**I JUST MOVED FROM AN ALMOST ALL WHITE SCHOOL
IN AN ALMOST ALL WHITE TOWN
BECAUSE FOSTER CARE, CFS, STILL MADE THE CHOICE
NOT MY VOICE
AND I ALWAYS HEARD THE STARES AND COMMENTS EVERYWHERE
MAN, I'M FEELING OUT OF PLACE.**

BEHIND THE LYRICS: COLONIZATION AND RESIDENTIAL SCHOOLS

One element that impacted the project in a profound way was the recent and ongoing discoveries across Canada of unmarked graves of Indigenous children who never returned home from residential schools. In fact, participants stopped at the Manitoba legislature during the day of filming the project because they wanted to “pay our respects to the sacred fire and spirits of children” (youth interview, July 5, 2020).

The reminder of this horrific legacy undoubtedly had an impact on the boys throughout this process, as rap lyrics they later produced spoke about their confusion at standing for the Canadian national anthem:

**BUT I DON'T UNDERSTAND HOW YOU COULD MAKE ME STAND, WHEN THE BODIES
FOUND ARE THE EVIDENCE OF CANADA'S ORIGINAL PLAN
NOW, WE GOTTA TOPPLE THE QUEEN SO OUR PEOPLE CAN SEE THEIR DREAMS
FINALLY FREE AT LAST, WE CAN CAST IT INTO THE PAST**

FULL LYRICS: FIRST VERSE BY TREVOR MERASTY

I FIRST STARTED BACK OUT IN THOMPSON, JUST A YOUNG ARTIST DIDN'T HAVE MUCH FOLLOWERS, BUT HE NEVER QUIT STAYED TRUE TO THE PROGRESS

SOMETHING IN HIS GUT KEPT SAYING NEVER STOP THIS, ALL I WANNA DO IS REBUILD MY PROVIDENCE CAUSE ALL MY PEOPLE ARE LOST WITH NO CONFIDENCE,

TIRED OF SEEING ALL THE COPS STILL DROPPING US. NO JOB HIRING THEN IT'S BACK TO THE BLOCK FOR US

WE CAN NEVER SEE WHAT THE TOP IS LIKE. NOT A LOT OF US GET THE SPOTLIGHT, SO WE WORK THREE TIMES HARDER OUR WHOLE LIFE

SO, WHO ARE YOU TO JUDGE HOW I LIVE LIKE MY CIRCLE REMAIN SMALL NO ROOM FOR THE FAKE TYPE. IF YOU HATING ON US THAT'S A DISLIKE,

Y'ALL NOT READY GET YOUR FACTS RIGHT I BEEN IN THE LAB ALL DAY AND NIGHT, GETTING THE PLAN STRAIGHT SO WE COULD LIVE RIGHT,

NO MORE COLD NIGHTS WITH THE LIGHTS OFF. LIFESTYLE TO CLEAN BUT NO LYSOL. BEEN A LONG TIME COMING SINCE MY 1ST SONG.

AT LEAST I KEPT IT TRUE. AND NEVER LOST THE BOND. IT'S JUST A MATTER OF TIME BEFORE WE FINALLY TAKE OFF.

PATIENTLY WAITING FOR MY SHOT TO POP UP, I NEVER LOST HOPE. I JUST LET IT BUILT UP CAUSE. THIS IS FOR ALL THE DAYS WE WAS BROKE AND NEVER HAD NONE IN THE TRAP LIKE HMM

OUUUU THEY DON'T LIKE WHAT WE DO...

THEY HATE THE WAY THAT WE MOVE...

HATERS MAD ITS NOTHING NEW.

I CAN SEE RIGHT THROUGH THE LIES. I AIN'T TOO SURPRISED. YOU TOOK THE LONGEST TIME

TO GO BE WASTING MINE, NOW I GOTTA GO BREAK THE TIES CAUSE ITS'S IN MY NATURE TO TURN THE TIDE, YEAH

FULL LYRICS: SECOND VERSE BY MICHAEL BRELAND

HANGING WITH THE NATIVE NEECHIES IN SCHOOL, CAUSE I AIN'T NO FOOL
I JUST MOVED FROM AN ALMOST ALL WHITE SCHOOL,
IN AN ALMOST ALL WHITE TOWN, BECAUSE FOSTER CARE, CFS, STILL MADE THE
CHOICE, NOT MY VOICE
AND I ALWAYS HEARD THE STARES AND COMMENTS EVERYWHERE
MAN, I'M FEELING OUTTA PLACE TRYING TO HIDE MY FACE
EVERY TIME WE TRY TO SHOW OUR NATIVE PRIDE THE SPOT LIGHT ISN'T IN
OUR HANDS, INDIGENOUS EVENTS AND CEREMONIES ARE NEVER FULLY NATIVE
PLANNED
EVEN ON OUR OWN LAND, TO MAKE IT CLEAR WE'RE NOT MEANT TO BE HERE,
WE'RE SUPPOSED BE IN THE HISTORY BOOKS IN PAGE 35
KILLED OFF WITH REST, GET READY FOR YOUR TEST, PLEASE RISE FOR THE
CANADIAN ANTHEM
BUT I DON'T UNDERSTAND HOW YOU COULD MAKE ME STAND, WHEN THE BODIES
FOUND ARE THE EVIDENCE OF CANADA'S ORIGINAL PLAN
NOW, WE GOTTA TOPPLE THE QUEEN SO OUR PEOPLE CAN SEE THEIR DREAMS
FINALLY FREE AT LAST, WE CAN CAST IT INTO THE PAST
PASS IT TO THE FUTURE THE LITTLE ONES, FREE AT LAST

HOPE FOR THE FUTURE

The two young men accompanied their lyrics with a hopeful and beautiful video. In it, they can be seen entering the Nestowaya lodge where the Red and Assiniboine Rivers meet. Including imagery of the lodge is significant, as lodges traditionally represent a place for rebirth and healing. In the video, the young men walk side by side, proudly sporting different attire; one dressed in a way traditional to his home community and the other dressed in “mainstream” attire, as he described it. They told us they intentionally chose these contrasting outfits for their video. The message they hoped to convey was the importance to, “remember where you come from.”

Through their lyrics, the young men told us they wanted to speak not only of the realities of their experiences, but also for hope for others and hope for the future. Through storytelling, this project revealed important themes including experiences of racism and social exclusion, but also feelings of pride, hope, connection, and reflection. Through storytelling, this project gave two young First Nations men agency and empowered them to use words, music, and imagery to tell and author their stories. Their stories and voices are gifts and we are honoured to share them as part of this special report release.



Youth Ambassador Advisory Squad (YAAS!) members, Michael Breland (left) and Trevor Merasty (right) from a scene of their youth-created music video, *Lied To*.



THE NORTH

ELDERHOOD

“This is a place of wisdom and knowledge. This is where the Elders sit in old age, coming full circle from birth in the east, to Elderhood in the North. It represents the winter, a time when the Elders share their stories and teachings to pass on that knowledge to those journeying around the other stages of the wheel.”

(Best Start Centre, 2010, p.7)

The North - Elderhood

In September 2021, findings from the investigation and research were presented virtually to the Elders Council at the Manitoba Advocate for Children and Youth. Elders provided feedback on this special report and highlighted teachings and their perspectives on the future. The Elders Council at MACY consists of members from Indigenous communities and Nations that are representative of the children and youth that we serve. There are currently five Elders Council members.

ELDERS COUNCIL

- Bill Ballantyne - Brokenhead Ojibway Nation
- Ed Azure - Nisichawayasihk Cree Nation
- Fred Stevens - Sapotewayak Cree Nation
- Gertrude Ballantyne - Brokenhead Ojibway Nation
- Louise Lavalley - St. Laurent, Manitoba

CONNECTION AND THE MEDICINE WHEEL

When presented with the findings of the report, Elders reflected about the meaning of the medicine wheel and the need for connection for all stages of the life cycle, between adults and children, and between youth and grandparents.

“There is a void there because they [children] didn’t have that connection to the west, to the adults, there was a disconnect.”

– Elder Fred Stevens

Elder Fred Stevens highlighted the importance of understanding the cycle of trauma and how past trauma in parents contributes to the disconnection between parents and their children, and the ongoing interruption of the relationship between generations.

“It is of no fault of the parents because they went through that, they survived, but they don’t know how to help them [children] and we need to form all aspects of the medicine wheel... if they make it to adulthood, they have not learned to be a child... this is where we try to bring outside resources... sometimes it only takes one or two people to start something.”

– Elder Fred Stevens

FINDING OUR WAY BACK

Elders spoke about the need to equally value western models and Indigenous ways of knowing, the latter which have been too often ignored. Elder Bill Ballantyne spoke of the need to encourage Indigenous young boys to “take non-native tools” to “better things [in] our communities.” He also spoke of the need to value Indigenous ways of knowing. During a suicide crisis in his community:

“Ottawa sent two psychiatrists, next thing my house was full of kids saying ‘we don’t know what they are talking about.’ The Elders and Knowledge Keepers, we are not listened to. The drum, the pipe, these are the things we do. We have to work on these things to put our people back together again.”

– Elder Bill Ballantyne

In particular, Elders spoke about the important role of grandparents and Elders in the provision of direction and healing for youth. This is because grandparents and youth are in counterbalance in the medicine wheel. As Elder Ed Azure explained, there are four identifiable times in life when people transition between the stages of the life cycle and have problems. According to him, there is a “built-in remedy”:

“Young people need to spend time with the grandparents. Grandparents when they run with hard times, they approach the young people.”

– Elder Ed Azure

Elder Ed Azure also shared some of his thoughts on the importance of relationships between children and grandparents, from his personal experience:

“This is the beauty of our culture and this is what happened to me in retrospect, when I was a young man. This is what has been lost.

I would leave my house with my brothers and sisters and I would go and live in the home of my grandparents. They taught me to do things without telling me to do things, they were beautiful wonderful people. They would get me out of bed in the morning, a one-room shack that was maybe 20 foot by 20 foot, a wood shack with no running water and no electricity. It would get me out of bed, make a big fire in the stove, a wood burning stove, and that was the only way to get me out of bed. They made a big fire, and it got to a point where you are in bed, and it was too hot, too uncomfortable to stay in bed.

And even cutting wood, never once told me “go cut wood.” He did it himself and I would watch him from the window. Guilt would get to me and I would go out and go and help him ...

Granny hauling water, sweeping the floor, doing the dishes, never once did they tell me to do these things, but just through their own activities, they got me to do them. It gave me a sense of purpose, it gave me a sense of worth.

I never forget helping my grandparents, and that has been lost, we have to be able to find, how to better use our grandparents. The family structure has changed so dramatically. [We need to be] able to organize times between grandparents with youth.”

– Elder Ed Azure

Elders spoke of the need for language and Indigenous teachings to bring a sense of belonging and identity to young people. They spoke of the importance of involving the Elders and Knowledge Keepers, the drum, the pipe in order to “put our people back together again” (personal interview, Elder Bill Ballantyne) and “ignite that spark” (personal interview, Elder Fred Stevens).

“Many of our young people are like an empty shell, taking their lives or others’ because they are empty, because they walk empty without being told who they are.”

– Elder Bill Ballantyne

Elders emphasized the need for young people to know where they come from and to make connections through teachings; this is in their blood memory. Blood memory is the ancestral and inherent connection that people have to their culture including songs and ceremonies.

One Elder stated that: “It is in your blood, you know who you are, it has to be awakened one way or another.” (personal communication, Elder Fred Stevens).

“Our trick is to find our way back to the Creator, to the source, we need to get the way of life back. We find our way back through ceremony and reconciliation.”

– Elder Ed Azure

WORKING TOGETHER

Elders also spoke about the role of the whole community and of women in supporting boys. Elder Louise Lavalley spoke about how Moon Ceremonies for women and girls have contributed to places where women understand their important leadership role in Indigenous communities.

“We need to start working together as Anishinaabe people, not pull each other, our young people need to see us working together.”

– Elder Gertrude Ballantyne

“Young women, they are life givers, before Europeans it was the women who sat with the Elders, they [women] will put things together.”

– Elder Bill Ballantyne

Elders spoke of the strength of Indigenous Peoples and communities who work tirelessly to develop resources, programs, and connections that empower the next generation.

SUMMARY

Elders spoke to the importance and need to rebuild connections both between generations and also within young people themselves, their culture, traditions, and ancestors. Their lessons teach us that it is by building belonging within and with a community that Indigenous boys and young men will be able to find their way back. Publicly-funded services, governments, and the general public can and should help support these endeavours through reconciliation.



RECOMMENDATIONS

Through the powers described in The Advocate for Children and Youth Act (ACYA), the Manitoba Advocate is empowered to make recommendations to the government or any public body or other person the Advocate considers appropriate (s.31(2)(a)). Special reports, like this one, can be summaries of child death reviews or investigations and completed for the purposes of improving the effectiveness and responsiveness of designated services. The Manitoba Advocate is responsible for monitoring and reporting publicly on compliance with recommendations made under the ACYA.

Recommendations

As described throughout this special report, homicides and suicides of boys in Manitoba are preventable. In honour of the 45 boys who died by homicide and suicide, and in consultation with their families, community members, Elders and youth, the Manitoba Advocate is issuing the following recommendations.

Strengthening Families

Finding 1: Of the 31 boys who were apprehended, the number one reason for the first apprehension was parental substance use. Promising approaches exist that reduce apprehensions and increase reunifications by supporting parents and children in the home with intensive wrap-around supports, when safe to do so.

RECOMMENDATION 1:

The Manitoba Advocate for Children and Youth recommends the Department of Families cooperate with the Departments of Health and Seniors Care and Mental Health, Wellness and Recovery, along with each of the Child and Family Services authorities to implement evidence-based and culturally safe interventions for parents with substance use disorders with the goal of reducing apprehensions by enhancing substance use supports for parents and communities, in alignment with *Calls to Action 1 and 5* of the Truth and Reconciliation Commission.

DETAILS:

- Fund and evaluate responses to parental substance use disorders with the goal of preventing apprehensions and maintaining family, community, and cultural ties for boys in Manitoba.
- Consider the essential role of Elders and Knowledge Keepers in providing supports for families faced with substance use concerns.
- Develop information sharing protocols between the Department of Health and Seniors Care, the Department of Mental Health, Wellness and Recovery and the Department of Families to improve communication and integration of wraparound supports.
- Prioritize supports to Child and Family Services agencies in Manitoba's north, where about half of the 45 boys in this special report lived.

Enhancing Equity in Schools

Finding 2: Thirty-one of the 45 boys who died by homicide or suicide had low school engagement and high dropout rates. This is also found in the stagnant gap in graduation rates for Indigenous and non-Indigenous boys in Manitoba.

RECOMMENDATION 2:

The Manitoba Advocate for Children and Youth recommends the Department of Education continue work on an Indigenous Inclusion Strategy, in collaboration with all school divisions, First Nations and Metis youth, governments, and communities, and include culturally appropriate school engagement initiatives tailored to Indigenous boys with the purpose of closing the achievement gap and increasing high-school completion rates.

DETAILS:

- Include initiatives to enhance high school completion rates for Indigenous boys as well as targets to 'close the gap' between Indigenous and non-Indigenous boys in the strategy.
- Align with the *United Nations Convention on the Rights of the Child*.
- Include Indigenous recruitment and retainment strategies for school staff, in recognition of the importance of representation.
- Identify and target schools, communities, and Indigenous boys that require intensive supports.
- Incorporate Elders and Knowledge Keepers, in acknowledgement of their essential and traditional role in supporting young people.
- Expand the mandate of the Indigenous Academic Achievement (IAA) Grant to include initiatives to increase school engagement for Indigenous boys beyond its existing numeracy and literacy focus.
- Report publicly on progress in closing the gap in Indigenous education achievement.

Finding 3: To improve school engagement and graduation rates, there is a significant need to enhance equity in schools. Interviews conducted by the Manitoba Advocate with caregivers and young First Nations men to inform this report revealed schools are not always welcoming environments for First Nations boys and that they sometimes experienced differential treatment based on their race and gender.

RECOMMENDATION 3:

The Manitoba Advocate for Children and Youth recommends the Department of Education, in consultation with school divisions and relevant stakeholders, demonstrate the development or continuation of sustainable initiatives in anti-racist education generally, and anti-Indigenous racism specifically, for all students, administrators, teachers, and support staff in Manitoba schools to enhance understanding of racism in education with a view to eradicate inequities and system barriers.

DETAILS:

- Incorporate anti-racist education into the provincial education curriculum, empowered by section 3(1) (c.1) of *The Education Administration Act*.
- Issue a directive for anti-racist professional development for school staff, pursuant to section 2 of *The Education Administration Act*.
- Initiatives will be deemed sustainable if there is a long-term plan to implement training that targets both students and staff.
- In recognition of the Department of Education's leadership and oversight role, school divisions should annually report on the anti-racist educational initiatives and programs being delivered across Manitoba, including information on initiative start dates, sustainability, target populations, and number of individuals reached.
- Consider a longitudinal evaluation plan of initiatives to examine their effectiveness and social impact.

Gang Prevention through Coordination

Finding 4: The majority (62%) of boys who died by homicide were gang involved. Gangs provide some boys with a sense of belonging and identity that they are unable to find elsewhere.

RECOMMENDATION 4:

The Manitoba Advocate for Children and Youth recommends the Government of Manitoba, in collaboration with the Government of Canada, extensively and inclusively consult with communities throughout Manitoba to update, fund, and implement a comprehensive provincial youth gang prevention strategy.

DETAILS:

- Employ a community-led and informed by a whole-of-government approach, including stakeholder involvement from across the province with a particular focus on Indigenous and newcomer communities doing work related to rural, remote, and urban gang activity.
- Include a provincial funding commitment for youth gang prevention initiatives on an annual basis determined by a needs-based assessment, with particular attention to Indigenous and newcomer communities.
- Address gang prevention for youth through adequate supports tailored to the needs of boys from various backgrounds to help them transition to adulthood. This includes accessing basic needs and navigating through various systems such as housing, employment, and education.
- Respond to the needs of gang-involved boys based on gender identity to ensure services are more welcoming and accessible to boys.
- Incorporate prevention via recreation and cultural activities, including sports and art. This should include funding and supports for Elders and Knowledge Keepers in recognition of their essential and traditional role in supporting young people.
- Include trauma-informed, youth-centred therapeutic interventions for boys at all stages.
- Include gang prevention as a priority within the Government of Manitoba's review of the current youth justice system in Manitoba and its connections to the child welfare system.
- Consider the unique risk and protective factors for newcomer youth.

Youth-Centred Substance Use Supports

Finding 5: The majority of boys reviewed for this report who died by homicide or suicide experienced mental health and addictions issues prior to their death, with 76% misusing substances, 53% expressing suicidal thoughts, and just under half being hospitalized for mental health issues stemming from trauma.

The following recommendation was issued in 2018 (*Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions*). It remains open and relevant to the findings in this report. As of today, Manitoba Health and Seniors Care has demonstrated an overall low compliance level at making the important changes required and recommended to improve services for children and youth. The Manitoba Advocate is therefore reaffirming its importance towards the goal of improved effectiveness in the youth addictions and mental health system in Manitoba.

The Manitoba Advocate for Children and Youth recommends that the Department of Health and Seniors Care, together with front-line addiction service providers in Manitoba, Healthy Child Manitoba (now the Social Innovation Office), Indigenous communities, and subject matter experts on addictions, immediately respond to the lack of effective substance use treatment services for youth by prioritizing the development and implementation of a youth addiction action strategy. This strategy should be based on best practice evidence with the objective of ensuring that children and youth across Manitoba can exercise their right to the highest attainable standards of health.

DETAILS:

- That the Department of Health, Seniors and Active Living (now Manitoba Health and Seniors Care), go beyond the VIRGO analysis and conduct a service inventory of all child and youth addiction services in Manitoba, their locations, target populations, philosophies, eligibility criteria, utilization rates, and occupancy rates.
- That the Department of Health, Seniors and Active Living (now Manitoba Health and Seniors Care) expand upon the VIRGO analysis to evaluate existing gaps in substance use treatment and addiction services available to children and youth, including recommendations as to how existing services could be repurposed.
- That the Manitoba's Mental Health and Addictions Strategy developed by the Department of Health, Seniors and Active Living (now Manitoba Health and Seniors Care) include a plan that ensures implementation of evidence-informed family-centred substance use and addiction programs.
- That the Department of Health, Seniors and Active Living (now Manitoba Health and Seniors Care) oversee regular performance monitoring and program evaluations to ensure that all publicly-funded and provincially-mandated agencies are accountable to provide evidence-informed addiction services and programs for children and youth.
- That all provincially-funded addiction service providers working with children and youth implement policies and procedures for ongoing training on the identification and reporting of cases where a child is in need of protection as outlined in *The Child and Family Services Act*.

Final Thoughts

This special report emerged from the stories of 45 boys who tragically lost their lives to suicide or homicide. It was informed by the experiences of these boys who are no longer with us, as well as the voices of their families, their peers, Elders, Indigenous and provincial governments, system experts, and several service providers who have been directly or indirectly involved in service to this population.

Youth undergo fundamental changes with respect to their physical growth and development during their teenage years. With these distinct changes come unique needs. As our office reviewed the services that were provided or unavailable to these boys, it was clear that this population of boys requires specialized support through these times of change and growth to ensure their safe transition into adulthood.

We have learned much from the experiences of these 45 boys, as well as young men who are still with us today. Early intervention continues to be the most effective way to protect children. At a time when young minds are developing rapidly, early interventions can go a long way in circumventing challenges in the future.

We learned about a number of factors that place boys at high risk of early death, including three adverse early life experiences in particular, which the majority of these boys lived. These experiences included violence in the home, parental substance use, and experiences of neglect.

We also learned about three later life outcomes observed in most of these boys as they moved into adolescence. These were identified as disconnection from school, their own substance use, and involvement in the criminal justice system. It is important to note that while these 45 boys presented with several other risk factors and some important protective factors, these three factors in particular were noted as significant in the lives of these boys. Being involved with the child welfare system and living with some mental health or developmental delays were noted as additional complexities in many of their lives. As well, the deeper issues of poverty and persistent discrimination against Indigenous children and families in Manitoba cannot be ignored.

In a recent review of mental health services in Manitoba, it was identified that this province “stands out as the highest or very high on almost all” substance use and mental health indicators (Virgo Planning, 2018). As outlined in the stories of the five boys whose stories we highlight in this special report, every one of these boys lived with some mental health challenges and all engaged in substance use in adolescence. A message well-known by this office, and reiterated recently in the Virgo Report notes:

Children and youth with complex needs face multiple, interconnected challenges which require formal collaboration among departments/agencies, including but not limited to, child welfare, schools through sporadic attendance, the youth justice system, emergency departments dealing with violent injuries, and mental health/addiction crisis and treatment services. The most complex children and youth are estimated to cost the province between \$1-\$2 million per child per year and with limited positive life outcomes (2018, p.41).

The care and protection of children is a shared responsibility and cannot depend on any one program, one system, or one level of government to be accomplished. Change must occur at all levels: from front-line service providers to barriers within larger systems, to better protect this population. Multi-disciplinary responses are required and cannot wait. This must include systems such as child welfare, criminal justice, education, disabilities, victim supports, and mental health, and should be guided by young people. Alongside the Manitoba Advocate’s (2020b) recent review of 22 girls who died by suicide in this province, this report offers the public in general, and the Government of Manitoba in particular, an opportunity to reflect on realities for boys in Manitoba, including the need for transformation within public systems and investment in community programs. As a province, we have the knowledge and now we must commit the resources.

Through the changes outlined and recommended in this special report, these boys will not be forgotten. Their lives were special and they were as deserving of support and resources as any other population. Given that many other boys face similar circumstances today, there must be meaningful investments into their health, safety, and well-being so that these tragic and preventable losses may be prevented, moving forward.

Ultimately, we all need to work together to help boys find their ways back home.



**"DON'T TELL US WHAT
WE NEED. LISTEN TO
WHAT WE NEED."**

- YOUTH INTERVIEW

Appendix

Table 2. Outstanding mental health and addictions recommendations

MACY Report (Year)	Recommendation
<p>Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions (2018)</p>	<p>Recommendation Three: The Manitoba Advocate for Children and Youth recommends the Department of Health, Seniors and Active Living implement, in full, recommendation 5.4, per the Virgo report, as follows: “Establish a concerted cross-sectoral process to reduce perceived and real jurisdictional boundaries that challenge access to, and coordination of, services. The process of developing this [Manitoba’s Mental Health and Addictions] Strategy, as well as any new opportunities and resources for working together (e.g., through Jordan’s Principle), should be viewed as an accelerator of a new period of trust and collaboration based on shared beliefs and strengths among all partners, and should include an interest in wellness, hope and families/community health.”</p> <p>DETAILS:</p> <p>Specifically, provisions in the following areas are needed within Manitoba’s Mental Health and Addictions Strategy:</p> <ul style="list-style-type: none"> • Post-discharge supports for children and youth who have experienced mental health concerns, including addictions issues; • A continuum of services, reflective of culturally-safe and trauma-informed approaches, for all of Manitoba’s children and youth, including Indigenous children and youth, and those who live in First Nations communities; and • A continuity of care model that ensures equitable standards of service when First Nations children and youth return to their home communities.
<p>Documenting the Decline: The Dangerous Space Between Good Intentions and Meaningful Interventions (2018)</p>	<p>Recommendation Four: The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living, together with front-line addiction service providers in Manitoba, Healthy Child Manitoba, Indigenous communities, and subject matter experts on addictions, immediately respond to the lack of effective substance use treatment services for youth by prioritizing the development and implementation of a youth addiction action strategy. This strategy should be based on best practice evidence with the objective of ensuring that children and youth across Manitoba can exercise their right to the highest attainable standards of health.</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • That the Department of Health, Seniors and Active Living, go beyond the VIRGO analysis and conduct a service inventory of all child and youth addiction services in Manitoba, their locations, target populations, philosophies, eligibility criteria, utilization rates, and occupancy rates. • That the Department of Health, Seniors and Active Living expand upon the VIRGO analysis to evaluate existing gaps in substance use treatment and addiction services available to children and youth, including recommendations as to how existing services could be repurposed. • That the Manitoba’s Mental Health and Addictions Strategy developed by the Department of Health, Seniors and Active Living include a plan that ensures implementation of evidence-informed family-centred substance use and addiction programs. • That the Department of Health, Seniors and Active Living oversee regular performance monitoring and program evaluations to ensure that all publicly-funded and provincially-mandated agencies are accountable to provide evidence-informed addiction services and programs for children and youth. • That all provincially-funded addiction service providers working with children and youth implement policies and procedures for ongoing training on the identification and reporting of cases where a child is in need of protection as outlined in The Child and Family Services Act.

MACY Report (Year)	Recommendation
<p>A Place Where It Feels Like Home: The Story of Tina Fontaine (2019)</p>	<p>Recommendation Two: The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors and Active Living expedite the public release of a clear implementation plan to address the child and youth-specific recommendations contained in the report on Improving Access and Coordination of Mental Health and Addiction Services: A Provincial Strategy for all Manitobans (“Virgo Report”).</p> <p>DETAILS:</p> <ul style="list-style-type: none"> • Manitoba Health, Seniors and Active Living’s plan must ensure that resources are prioritized in rural and remote locations to ensure equitable service levels for children and youth regardless of where they are living. • The implementation plan must reflect the client populations who require them and must, therefore, be culturally-informed, and be developed in ways that reflect the voices and preferences of Indigenous health experts, Indigenous leadership, children and youth, and others with lived experiences.
<p>The Slow Disappearance of Matthew: A Family’s Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness (2020a)</p>	<p>Recommendation Four: Improve access points for children and youth experiencing a mental health crisis. The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors, and Active Living, along with representatives from Shared Health, children’s emergency staff and child and adolescent psychiatry -- in accordance with their master plan overview of Health Sciences Centre -- evaluate practices at the Health Sciences Centre – Children’s Hospital Emergency Room, with the intent of developing and implementing a child and youth-centred, separate and specialized access point that meets the needs of children and youth who are experiencing a mental health crisis.</p>
<p>The Slow Disappearance of Matthew: A Family’s Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness (2020a)</p>	<p>Recommendation Five: Create mental health system Navigators to help children and youth.</p> <p>The Manitoba Advocate for Children and Youth recommends that Manitoba Health, Seniors, and Active Living develop, implement and fund mental health and addictions system Navigators, who act as case managers for children and youth who are accessing the upper tiers of the youth mental health and addiction system, similar to Ontario’s model. These Navigators should be knowledgeable and well-trained and offer case coordination and rapid response services to ensure children and youth know their health care plan, can access appropriate services, and ensure case reviews are initiated when services are not effective. Further, much like the requirement for child and family services workers, mental health and addictions Navigators should provide services in accordance with provincial standards of care that change in their intensity and frequency according to the assessed levels of risk to a child or youth.</p>
<p>The Slow Disappearance of Matthew: A Family’s Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness (2020a)</p>	<p>Recommendation Six: Long-term residential mental health treatment for youth.</p> <p>The Manitoba Advocate for Children and Youth recommends that the Government of Manitoba, through the Department of Health, Seniors and Active Living create a long-term, residential treatment centre for youth who are in the top tier of mental health care needs and for whom less intensive options have been ineffective.</p>

MACY Report (Year)	Recommendation
<p>“Stop Giving Me a Number and Start Giving Me a Person”: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System (2020b)</p>	<p>Recommendation One: The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living conduct a gap analysis of the youth mental health and addictions system, based on the tiered model proposed in the Virgo Report. The gap analysis ought to speak to the overall transformation framework and strategic plan for child and youth mental health and addictions services. Further, the Manitoba Advocate recommends the gap analysis, framework, and strategic plan is released publicly to Manitobans.</p> <p>OUTCOMES:</p> <ul style="list-style-type: none"> • Conduct a jurisdictional scan to complete a full-service inventory of youth mental health and addictions services and supports available at each of the five tiers, ranging from prevention initiatives to those designed to meet the highest needs. • Conduct a gap analysis using the inventory of services and a needs-based assessment of children and youth in Manitoba, taking into consideration what current services in the inventory can be modified or adapted (i.e., increase capacity, needs modification to enhance functioning, or based on new evidence or evaluation, etc.) to better meet needs of children and youth. • Provide to the public the short-term (1 year) and long-term (3-5 year) vision and strategic plan for program development and investment to guide system enhancement.
<p>“Stop Giving Me a Number and Start Giving Me a Person”: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System (2020b)</p>	<p>Recommendation Two: The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living demonstrates its framework and strategic plan for transformation of the youth mental health and addictions systems in Manitoba ensures equitable access to services across all areas of Manitoba, which are tailored to the unique needs of children and youth in our province.</p>
<p>“Stop Giving Me a Number and Start Giving Me a Person”: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System (2020b)</p>	<p>Recommendation Four: In line with Article 24 of the United Nations Convention on the Rights of the Child, the Manitoba Advocate for Children and Youth recommends that the Government of Manitoba conduct an annual review of what therapeutic trauma interventions are available to children and youth in Manitoba and create an inventory of resources, whether the resources require formal referrals from service providers or are open for self-referrals, any associated eligibility criteria (age, location, care status, etc.) and promote the annual inventory and its findings in the public.</p>
<p>“Stop Giving Me a Number and Start Giving Me a Person”: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System (2020b)</p>	<p>Recommendation Five: The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living, in collaboration with rural communities in Manitoba, and the federal government, where applicable, implement recommendation 4.8 of the Virgo Report: Building upon the successful experience of the NorWest Youth Hub and lessons learned from the experience of other provinces, develop a provincial plan for scale-up of the youth hub model, or similar models of integrated youth services, taking advantage of support from philanthropy as it may be available (Virgo Planning, 2018, p. 235).</p>
<p>“Stop Giving Me a Number and Start Giving Me a Person”: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System (2020b)</p>	<p>Recommendation Six: The Manitoba Advocate for Children and Youth recommends that the Department of Health, Seniors and Active Living, in collaboration with rural and First Nations communities in Manitoba, and the federal government, where applicable, implement recommendation 2.11 of the Virgo Report, as summarized below: In the RHAs other than the WRHA, create mental health hubs (as identified in the Peachey report), with a view to: (a) developing these as integrated regional mental health and substance use/addictions (SUA) “focal points”, and (b) harmonizing a core set of regional services and supports to the hospital emergency departments and crisis services including: Screening, assessment, and support for SUA. 24/7 access to psychiatric consultation and acute assessment/treatment services. A core set of professionals in addition to psychiatrists with capacity in SUA support – e.g., clinical psychologists and psychiatric emergency nurses, Cross-trained mental health and addiction liaison workers co-located in hospital emergency departments/other hospital programs. Infrastructure and staffing to ensure safety and security of patients and staff. Links to community mental health and addictions services, including centralized intake (Virgo Planning, 2018; full wording may be found at p. 225).</p>
<p>“Stop Giving Me a Number and Start Giving Me a Person”: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System (2020b)</p>	<p>Recommendation Seven: The Manitoba Advocate for Children and Youth recommends that the Government of Manitoba develop an inpatient or community-based long-term treatment resource that offers stabilization, assessment, treatment, and aftercare for youth who are at the top tier of mental health and addictions care needs, and for whom less intensive options have been ineffective.</p>

References

- Alaggia, R., Jenney, A., Mazzuca, J., & Redmond, M. (2007). In whose best interest? A Canadian case study of the impact of child welfare policies in cases of domestic violence. *Brief Treatment and Crisis Intervention*, 7(4), 275.
- Amin, A., Kagesten, A., Adebayo, E., & Chandra-Mouli, V. (2018). Addressing gender socialization and masculinity norms among adolescent boys: Policy and programmatic implications. *The Journal of adolescent health: Official publication of the Society for Adolescent Medicine*, 62(3S), S3–S5. <https://doi.org/10.1016/j.jadohealth.2017.06.022>
- Anderson, K. M., & Bang, E. J. (2012). Assessing PTSD and resilience for females who during childhood were exposed to domestic violence. *Child & Family Social Work*, 17(1), 55-65.
- Augustyn, M. B., Thornberry, T. P., & Henry, K. L. (2019). The reproduction of child maltreatment: An examination of adolescent problem behavior, substance use, and precocious transitions in the link between victimization and perpetration. *Development and psychopathology*, 31(1), 53–71. <https://doi.org/10.1017/S0954579418001633>
- Ball, J. (2009). Fathering in the shadows: Indigenous fathers and Canada’s colonial legacies. *The ANNALS of the American Academy of Political and Social Science*, 624, 29 - 48.
- Barrie Area Native Advisory Council. (2021). *Lifecycle Wheel*. <https://banac.on.ca/resources/lifecycle-wheel/>
- Beedie, N., Macdonald, D., & Wilson, D. (2019). *Towards justice: Tackling Indigenous child poverty in Canada*. Retrieved from https://www.afn.ca/wp-content/uploads/2019/07/Upstream_report_final_English_June-24-2019.pdf
- Best Start Centre. (2010). *A child becomes strong: Journeying through each stage of the life cycle*. Retrieved from <https://resources.beststart.org/wp-content/uploads/2019/01/K12-A-1.pdf>
- Blackstock, C. (2003). First Nations child and family services: Restoring peace and harmony in First Nations communities. In K. Kufedlt & B. McKenzie (Eds.). *Child Welfare: Connecting Research Policy and Practice*. 331-342. Waterloo, ON: Wilfred Laurier University Press.
- Bombay, A., Matheson, K., & Anisman, H. (2011). The impact of stressors on second generation Indian residential school survivors. *Transcultural Psychiatry*, 48(4), 367-391.
- Bombay, A., Matheson, K., & Anisman, H. (2014). *Origins of lateral violence in Aboriginal communities: A preliminary study of student-to-student abuse in Indian Residential Schools*. Ottawa, ON: Aboriginal Healing Foundation.
- Braga, A. A., Weisburd, D., & Turchan, B. (2018). Focused deterrence strategies and crime control: An updated systematic review and meta-analysis of the empirical evidence. *Criminology & Public Policy*, 17(1), 205-250.
- British Columbia Education and Training. (2020). *Equity in action project*. Retrieved from <https://www2.gov.bc.ca/gov/content/education-training/k-12/administration/program-management/indigenous-education/equity-in-action>
- Brownell M., Nickel N., Turnbull L., Au W., Ekuma O., MacWilliam L., McCulloch S., Valdivia J., Boram Lee J., Wall-Wieler E., & Enns J. (2020). *The overlap between the child welfare and youth criminal justice systems: Documenting “Cross-Over Kids” in Manitoba*. Retrieved from http://mchp-appserv.cpe.umanitoba.ca/reference/MCHP_JustCare_Report_web.pdf
- Brownridge, D. A., Taillieu, T., Afifi, T., Chan, K. L., Emery, C., Lavoie, J., & Elgar, F. (2017). Child maltreatment and intimate partner violence among indigenous and non-indigenous Canadians. *Journal of Family Violence*, 32(6), 607-619.
- Cafferky, B. M., Mendez, M., Anderson, J. R., & Stith, S. M. (2018). Substance use and intimate partner violence: A meta-analytic review. *Psychology of Violence*, 8(1), 110.
- Campaign 2000. (2017). *Manitoba child and family report card 2017*. Retrieved from https://campaign2000.ca/wp-content/uploads/2017/11/2017-MB_ChildFamilyPovReportCard_FINAL.pdf
- Campaign 2000. (2020a). *Broken promises, stolen futures: Child and family poverty in Manitoba*. Retrieved from <https://campaign2000.ca/wp-content/uploads/2020/04/Manitoba-Child-and-Family-Poverty-Report-2020.pdf>
- Campaign 2000. (2020b). *Manitoba: Poverty central. Manitoba report card update – December 2020*. Retrieved from https://cc8458be-07cd-4d08-8429-ee91800bdd50.usfiles.com/ugd/cc8458_fb81652a33bc4f539dd74832e23ca85a.pdf

- Canadian Centre for Policy Alternatives. (2015). *The view from here 2015: Manitobans call for a renewed poverty reduction plan*. Retrieved from <https://www.policyalternatives.ca/sites/default/files/uploads/publications/Manitoba%20Office/2015/01/View%20from%20here%20v8%20low-res.pdf>
- Centers for Disease Control and Prevention. (2021). *The social-ecological model: A framework for prevention*. Retrieved from <https://www.cdc.gov/violenceprevention/about/social-ecologicalmodel.html>
- Centers for Disease Control and Prevention. (no date). *School connectedness*. Retrieved from https://www.cdc.gov/healthyyouth/protective/school_connectedness.htm
- Centre for Addiction and Mental Health. (2021). *Mental illness and addiction: Facts and statistics*. Retrieved from <https://www.camh.ca/en/driving-change/the-crisis-is-real/mental-health-statistics>
- Centre for Suicide Prevention. (November 20, 2020). *Cross-Canada comparison statistics*. Retrieved from <https://www.suicideinfo.ca/resource/cross-canada-comparison-statistics/>
- Champagne, M. (2017, July 18). *Be a man – Ask for help* [Blog Post]. Retrieved from <https://northendmc.wordpress.com/2017/07/18/be-a-man-ask-for-help/>
- Chansonneuve, D. (2005). *Reclaiming connections: Understanding residential school trauma among Aboriginal people: A resource manual*. Ottawa, ON: Aboriginal Healing Foundation.
- Clark, S. (2019). *Overrepresentation of Indigenous people in the Canadian criminal justice system: Causes and responses*. Research and Statistics Division, Department of Justice Canada. Retrieved from <https://www.justice.gc.ca/eng/rp-pr/jr/oip-cjs/oip-cjs-en.pdf>
- Crooks, C. V., Chiodo, D., Thomas, D., & Hughes, R. (2010). Strengths-based programming for First Nations youth in schools: Building engagement through healthy relationships and leadership skills. *International Journal of Mental Health and Addiction*, 8(2), 160-173.
- Dakof, G. A., Cohen, J. B., Henderson, C. E., Duarte, E., Boustani, M., Blackburn, A., Venzer, S. E., & Hawes, S. (2010). A randomized pilot study of the Engaging Moms Program for family drug court. *Journal of Substance Abuse Treatment*, 38(2), 263–274. <https://doi.org/10.1016/j.jsat.2010.01.002>
- Das, J. K., Salam, R. A., Arshad, A., Finkelstein, Y., & Bhutta, Z. A. (2016). Interventions for adolescent substance abuse: An overview of systematic reviews. *Journal of Adolescent Health*, 59(4), S61-S75.
- Department of Justice Canada. (2019). *Indigenous youth roundtables: Overrepresentation of Indigenous youth in Canada's criminal justice system*. Retrieved from <https://www.justice.gc.ca/eng/cj-jp/yj-jj/tools-outils/pdf/iyr-trja.pdf>
- Diamond, T., & Muller, R. T. (2004). The Relationship Between Witnessing Parental Conflict During Childhood and Later Psychological Adjustment Among University Students: Disentangling Confounding Risk Factors. *Canadian Journal of Behavioural Science/Revue canadienne des sciences du comportement*, 36(4), 295.
- Duke, N., Pettingell, S., McMorris, B., & Borowsky, I. (2010). Adolescent violence perpetration: Associations with multiple types of adverse childhood experiences. *Pediatrics* (Evanston), 125(4), e778–e786. <https://doi.org/10.1542/peds.2009-0597>
- Dulmus, C. N., & Hilarski, C. (2006). Significance of gender and age in African American children's response to parental victimization. *Health & Social Work*, 31(3), 181–188.
- Dunbar, L. (2017). *Youth gangs in Canada: A review of current topics and issues*. Public Safety Canada. Retrieved from <https://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/2017-r001/index-en.aspx>
- Eschenbeck, H., Kohlmann, C., & Lohaus, A. (2007). Gender differences in coping strategies in children and adolescents. *Journal of Individual Differences*, 28(1), 18–26. <https://doi.org/10.1027/1614-0001.28.1.18>
- First Nations Child and Family Caring Society. (2014). *The Canadian human rights tribunal on First Nations child welfare*. Retrieved from <https://fncaresociety.com/sites/default/files/CHRT%20info%20sheet%2014-07%20v3f.pdf>
- Gang Action Interagency Network. (2017). *Bridging the gap: Solutions to Winnipeg gangs*. Retrieved from https://f8745a7c-8659-49f1-a594-745f17c9b5cd.filesusr.com/ugd/5dc4b4_d614558fe06740d89182a708e6dafa71.pdf
- Garcia, S., & Saavedra, J. E. (2017). Educational impacts and cost-effectiveness of conditional cash transfer programs in developing countries: A meta-analysis. *Review of Educational Research*, 87(5), 921-965.
- Gilchrist, G., & Hegarty, K. (2017). Tailored integrated interventions for intimate partner violence and substance use are urgently needed.

Drug and alcohol review, 36(1), 3-6.

- Goldberg, A. E., & Blaauw, E. (2019). Parental substance use disorder and child abuse: risk factors for child maltreatment?. *Psychiatry, psychology and law*, 26(6), 959-969.
- Government of Manitoba. (2019). *Province announces details of guns and gang strategy investments* [news release, 26 April 2019]. Retrieved from <https://news.gov.mb.ca/news/index.html?item=45223>
- Government of Manitoba. (2019a). *Pathways to a better future: Manitoba's poverty reduction strategy*. Retrieved from https://www.gov.mb.ca/povertyreduction/pubs/pathways_to_a_better_future.pdf
- Hajizadeh, B. (2019). Socioeconomic inequalities in psychological distress and suicidal behaviours among Indigenous peoples living off-reserve in Canada. *Canadian Medical Association Journal (CMAJ)*, 191(12), E325–E336. <https://doi.org/10.1503/cmaj.181374>
- Hazekamp, C., McLone, S., Yousuf, S., Mason, M., & Sheehan, K. (2021). Educational attainment of male homicide victims aged 18 to 24 years in Chicago: 2006 to 2015. *Journal of interpersonal violence*, 36(11-12), 5761-5774.
- Healthy Child Manitoba. (2018). *Child and youth report*. Winnipeg, MB.
- Hoeve, M., Stams, G. J., van der Put, C. E., Dubas, J. S., van der Laan, P. H., & Gerris, J. R. (2012). A meta-analysis of attachment to parents and delinquency. *Journal of Abnormal Child Psychology*, 40(5), 771–785. <https://doi.org/10.1007/s10802-011-9608-1>
- Hogue, A., Henderson, C. E., Becker, S. J., & Knight, D. K. (2018). Evidence base on outpatient behavioral treatments for adolescent substance use, 2014–2017: Outcomes, treatment delivery, and promising horizons. *Journal of Clinical Child & Adolescent Psychology*, 47(4), 499-526.
- Holmes, C. & Hunt, S. (2017). *Indigenous communities and family violence: Changing the conversation*. Prince George, BC: National Collaborating Centre for Aboriginal Health.
- Huebner, R. A., Hall, M. T., Walton, M. T., Smead, E., Willauer, T., & Posze, L. (2021). The Sobriety Treatment and Recovery Teams program for families with parental substance use: Comparison of child welfare outcomes through 12 months post-intervention. *Child abuse & neglect*, 120, 105260.
- Hughes, K., Bellis, M. A., Hardcastle, K. A., Sethi, D., Butchart, A., Mikton, C., ... & Dunne, M. P. (2017). The effect of multiple adverse childhood experiences on health: a systematic review and meta-analysis. *The Lancet Public Health*, 2(8), e356-e366.
- Hughes, T. (2014). *The legacy of Phoenix Sinclair: Achieving the best for all our children*. Commission of Inquiry into the Circumstances Surrounding the Death of Phoenix Sinclair.
- Hurt, H., Malmud, E., Brodsky, N. L., & Gianetta, J. (2001). Exposure to violence: Psychological and academic correlates in child witnesses. *Archives of Pediatric Adolescent Medicine*, 155(12), 1351-1356.
- Innes, R. (2015). Moose on the loose: Indigenous men, violence, and the colonial excuse. *Aboriginal Policy Studies* (Edmonton, Alberta, Canada), 4(1). <https://doi.org/10.5663/aps.v4i1.24193>
- Janiri, D., Doucet, G. E., Pompili, M., Sani, G., Luna, B., Brent, D. A., & Frangou, S. (2020). Risk and protective factors for childhood suicidality: a US population-based study. *The Lancet Psychiatry*, 7(4), 317-326.
- Karakurt, G., Koç, E., Çetinsaya, E. E., Ayluğtarhan, Z., & Bolen, S. (2019). Meta-analysis and systematic review for the treatment of perpetrators of intimate partner violence. *Neuroscience & Biobehavioral Reviews*, 105, 220-230.
- Keddell, E., & Stanley, T. (2019). Critical debates in child protection: The production of risk in changing times. In *The Routledge Handbook of Critical Social Work* (pp. 412-423). Routledge.
- Kilpatrick, D. G., Acierno, R., Saunders, B., Resnick, H. S., Best, C. L., & Schnurr, P. P. (2000). Risk factors for adolescent substance abuse and dependence: data from a national sample. *Journal of Consulting and Clinical Psychology*, 68(1), 19.
- Kimball, E., & Keene, C. (2016). *Responding to the long-term needs of adult children exposed to domestic violence: Exploring the connection to suicide risk*. National Online Resource Center on Violence Against Women. Harrisburg, PA
- Lessard, S. (2018). *Four directions First Nations, Métis and Inuit graduation coach approach*. Retrieved from <https://indspire.ca/wp-content/uploads/2019/10/FourDirections-FINAL.pdf>
- Logan, J., Vagi, K., & Gorman-Smith, D. (2016). Characteristics of youth with combined histories of violence behavior, suicidal ideation or behavior, and gun-carrying. *Crisis*, 37(6), 402-414. <https://doi:10.1027/0227-5910/a000389>

- Madruga, C. S., Viana, M. C., Abdalla, R. R., Caetano, R., & Laranjeira, R. (2017). Pathways from witnessing parental violence during childhood to involvement in intimate partner violence in adult life: The roles of depression and substance use. *Drug and alcohol review*, 36(1), 107-114.
- Malakieh, J. (2018). *Adult and youth correctional statistics in Canada, 2016/2017*. Juristat: Canadian Centre for Justice Statistics. Retrieved from <https://www150.statcan.gc.ca/n1/en/pub/85-002-x/2018001/article/54972eng.pdf?st=obBoOKVD>
- Manitoba Advocate for Children and Youth. (2018). *Documenting the decline: The dangerous space between good intentions and meaningful interventions*. Winnipeg, MB: Manitoba Advocate for Children and Youth.
- Manitoba Advocate for Children and Youth. (2019). *A place where it feels like home: The story of Tina Fontaine*. Winnipeg, MB.
- Manitoba Advocate for Children and Youth. (2020a). *The slow disappearance of Matthew: A family's fight for youth mental health care in the wake of bullying and mental illness*. Winnipeg, MB.
- Manitoba Advocate for Children and Youth. (2020b). *"Stop giving me a number and start giving me a person": How 22 girls illuminate the cracks in the Manitoba youth mental health and addiction system*. Winnipeg, MB.
- Manitoba Advocate for Children and Youth. (2021). *The right to be heard: A special report on the Manitoba Advocate for Children and Youth's Youth listening tour, 2021*. Winnipeg, MB.
- Manitoba Centre for Health Policy. (2020). *Our children, our future: The health and well-being of First Nations children in Manitoba*. Winnipeg, MB. Manitoba Centre for Health Policy.
- Manitoba Education and Training. (2017). *Creating racism-free schools through critical/courageous conversations on race*. Retrieved from https://www.edu.gov.mb.ca/k12/docs/support/racism_free/full_doc.pdf
- Manitoba Education. (2015). *Aboriginal Academic Achievement (AAA) Grant Support Document*. Retrieved from <https://www.edu.gov.mb.ca/k12/docs/support/aaa/document.pdf>
- Manitoba Education. (2019). *High school graduation rates and student achievement statistics*. Retrieved from https://www.edu.gov.mb.ca/k12/grad_rates/student-tracked.html
- Manitoba Education. (2021). *Better Education Starts Today Report*. Retrieved from https://manitoba.ca/asset_library/en/proactive/2020_2021/better-education-starts-today-report.pdf
- Manitoba Justice. (2019-2020). *Annual report 2019-2020*. Retrieved from <https://www.gov.mb.ca/justice/publications/annualreports/pubs/annualreport1920.pdf>
- Manitoba Justice. (n.d.). *Project gang-proof* [infographic]. Retrieved from <https://www.gov.mb.ca/justice/commsafe/pubs/project-gang-proof.pdf>
- Manitoba Justice. (n.d.). *Turnabout*. Retrieved from <https://www.gov.mb.ca/justice/commsafe/crimeprev/turnabout.html>
- Marinescu, I. (2018). *No strings attached: The behavioral effects of US unconditional cash transfer programs*.
- Maschi, T., Morgen, K., Bradley, C., & Hatcher, S. (2008). Exploring gender differences on internalizing and externalizing behaviour among maltreated youth: Implications for social work action. *Child and Adolescent Social Work Journal*, 25(6), 531-547. <https://doi.org/10.1007/s10560-008-0139-8>
- Maschi, T., Perez, R., & Gibson, S. (2010). Examining gender differences in service utilization among children: Nature, nurture, or social network? *Child and Adolescent Social Work Journal*, 27(3), 177-191. <https://doi.org/10.1007/s10560-010-0200-2>
- Mennen, F. E. & O'Keefe, M. (2005). Informed decisions in child welfare: The use of attachment theory. *Children and Youth Services Review*, 27, 577-593. <https://doi.org/10.1016/j.childyouth.2004.11.011>
- Merolla, D. M., & Jackson, O. (2019). Structural racism as the fundamental cause of the academic achievement gap. *Sociology Compass*, 13(6), e12696.
- Metis Child and Family Services Authority. (n.d.) *What makes us unique*. <https://www.metisauthority.com/what-makes-us-unique>
- Miladinovic, Z., & Mulligan, L. (2015). *Homicide in Canada, 2014*. Juristat. Statistics Canada. Retrieved from <https://www150.statcan.gc.ca/n1/pub/85-002-x/2015001/article/14244-eng.htm>
- National Center for Injury Prevention and Control, Division of Violence Prevention. (2021, January 28). *The socio-ecological model: A framework for prevention*. Centre for Disease Control and Prevention. <https://www.cdc.gov/violenceprevention/about/social->

ecologicalmodel.html

- National Centre on Safe Supportive Learning Environments. (2021). *Protective factors*. Retrieved from <https://safesupportivelearning.ed.gov/training-technical-assistance/education-level/early-learning/protective-factors#:~:text=Through%20daily%20contact%2C%20schools%20help%20shape%20children%27s%20beliefs,may%20prevent%20problems%20from%20occurring%20in%20the%20future>
- National Collaborating Centre for Aboriginal Health (2017). *Education as a social determinant of First Nations, Inuit and Metis Health*. Prince George, BC: National Collaborating Centre for Aboriginal Health.
- National Collaborating Centre for Aboriginal Health. (2013). *Understanding neglect in First Nations families*. Retrieved from <https://www.ccsa-nccah.ca/docs/health/FS-UnderstandingNeglect-Bennett-EN.pdf>
- National Crime Prevention Centre. (2007). *Addressing youth gang problems: An overview of programs and practices*. Public Safety Canada (2007-YG-03). Retrieved from <https://www.publicsafety.gc.ca/cnt/rsrscs/pblctns/ddrsng-prblms/ddrsng-prblms-eng.pdf>
- Office of the Children's Advocate. (2012). *Youth in care with complex needs*. Retrieved from <https://manitobaadvocate.ca/adult/reports-publications/special-reports/>
- Priest, N., Alam, O., Dunn, K., Nelson, J., Sharples, R., Cronin, D., ... & Kavanagh, A. (2020). *Evaluation of the Speak Out Against Racism (SOAR) program pilot*. Retrieved from https://csrcm.cass.anu.edu.au/sites/default/files/docs/2020/6/SOAR_2020_Evaluation_Report_Final.pdf
- Raissan, B. & Bullinger, L. (2017). Money matters: Does the minimum wage affect child maltreatment rates? *Children and Youth Services Review*, 72, 60–70. <https://doi.org/10.1016/j.childyouth.2016.09.033>
- Raitasalo, K., Holmila, M., Jääskeläinen, M., & Santalahti, P. (2019). The effect of the severity of parental alcohol abuse on mental and behavioural disorders in children. *European child & adolescent psychiatry*, 28(7), 913-922.
- Rehkopf, D., & Buka, S. (2006). The association between suicide and the socio-economic characteristics of geographical areas: a systematic review. *Psychological Medicine*, 36(2), 145–157. <https://doi.org/10.1017/S003329170500588X>
- Rostad, R., Roger, T., & Chaffin, M. (2017). The influence of concrete support on child welfare program engagement, progress, and recurrence. *Children and Youth Services Review*, 72, 26–33. <https://doi.org/10.1016/j.childyouth.2016.10.014>
- Schreck, C. J., Stewart, E. A., & Osgood, D. W. (2008). A reappraisal of the overlap of violent offenders and victims. *Criminology; an Interdisciplinary Journal*, 46(4), 871–906.
- Siddiqi, A., Rajaram, A., & Miller, S. P. (2018). Do cash transfer programmes yield better health in the first year of life? A systematic review linking low-income/middle-income and high-income contexts. *Archives of disease in childhood*, 103(10), 920-926.
- Sinha, V., Trocmé, N., Fallon, B., MacLaurin, B., Fast, E., Thomas Prokop, S. et al (2011). *Kiskisik Awasisak: Remember the children. Understanding the overrepresentation of First Nations children in the child welfare system*. Canadian Child Welfare Research Portal. Retrieved from https://cwrp.ca/sites/default/files/publications/FNCIS-2008_March2012_RevisedFinal.pdf
- Snider, C., Brownell, M., Dufault, B., Barrett, N., Prior, H., & Cochrane, C. (2018). A multilevel analysis of risk and protective factors for Canadian youth injured or killed by interpersonal violence. *Injury Prevention*, 24(3), 199–204. <https://doi.org/10.1136/injuryprev-2016-042235>
- Snider, C., Jiang, D., Logsetty, S., Chernomas, W., Mordoch, E., Cochrane, C., Mahmood, J., Woodward, H., & Klassen, T. (2020). Feasibility and efficacy of a hospital-based violence intervention program on reducing repeat violent injury in youth: a randomized control trial. *Canadian Journal of Emergency Medicine*, 22(3), 313–320. <https://doi.org/10.1017/cem.2019.406>
- Statistics Canada. (2019). *Suicide among First Nations people, Métis and Inuit (2011-2016)*. Retrieved from <https://www150.statcan.gc.ca/n1/pub/99-011-x/99-011-x2019001-eng.htm>
- Statistics Canada. (2021). *Crime severity index and weighted clearance rates, Canada, provinces, territories and census metropolitan areas*. Retrieved from <https://www150.statcan.gc.ca/t1/tbl1/en/tv.action?pid=3510002601&pickMembers%5B0%5D=1.28&cubeTimeFrame.startYear=2015&cubeTimeFrame.endYear=2019&referencePeriods=20150101%2C201901>
- Stempel, H., Cox-Martin, M., Bronsert, M., Dickinson, L. M., & Allison, M. A. (2017). Chronic school absenteeism and the role of adverse childhood experiences. *Academic Pediatrics*, 17(8), 837-843.
- Stoddard, S., Epstein-Ngo, Q., Walton, M., Zimmerman, M., Chermack, S., Blow, F., Booth, B., & Cunningham, R. (2015). Substance use and

violence among youth: A daily calendar analysis. *Substance Use and Use*, 50(3), 328-339. <https://doi:10.3109/10826084.2014.980953>

- Supol, M., Satyen, L., Ghayour-Minaie, M., & Toumbourou, J. W. (2020). Effects of family violence exposure on adolescent academic achievement: a systematic review. *Trauma, Violence, & Abuse*, 1524838019899486.
- Taylor, C. B., Graham, A. K., Flatt, R. E., Waldherr, K., & Fitzsimmons-Craft, E. E. (2021). Current state of scientific evidence on Internet-based interventions for the treatment of depression, anxiety, eating disorders and substance abuse: an overview of systematic reviews and meta-analyses. *European journal of public health*, 31(Supplement_1), i3-i10.
- The Advocate for Children and Youth Act* (SM 2017, c. 8).
- Thompson, S. (November 6, 2019). *4,000 local gang members, associates in city: Winnipeg police*. Global News. Retrieved from <https://globalnews.ca/news/6130897/around-4000-local-gang-members-associates-in-city-winnipeg-police/>
- Totten, M. (2001). *Maltreated kids, violent adolescents: Is there a link?* Discussion paper prepared for Family Violence Prevention Unit, Health Canada.
- Totten, M. (2009a). Aboriginal youth and violent gang involvement in Canada: Quality prevention strategies. *Institute for the Prevention of Crime*, 3, 135-156.
- Trent, M., Dooley, D. G., & Dougé, J. (2019). The impact of racism on child and adolescent health. *Pediatrics*, 144(2).
- Truth and Reconciliation Commission of Canada. (2015a). *The Survivors Speak: A Report of the Truth and Reconciliation Commission of Canada*. Retrieved from https://trc.ca/assets/pdf/Survivors_Speak_English_Web.pdf
- Truth and Reconciliation Commission of Canada. (2015b). *Final report of the Truth and Reconciliation Commission of Canada. Volume one, Summary: Honouring the truth, reconciling for the future*. Retrieved from http://trc.ca/assets/pdf/Honouring_the_Truth_Reconciling_for_the_Future_July_23_2015.pdf
- United Nations General Assembly resolution 61/295. (2007). United Nations Declaration on the Rights of Indigenous Peoples, A/RES/61/295 (2 October 2007). Retrieved from https://www.un.org/esa/socdev/unpfii/documents/DRIPS_en.pdf
- United Nations General Assembly. (1989). Convention on the Rights of the Child (UNCRC), 20 November 1989, Treaty Series, vol. 1577, pp.3-178. Retrieved from <https://www.refworld.org/docid/3ae6b38f0.html>
- Virgo Planning. (2018). *Improving access and coordination of mental health and addiction services: A provincial strategy for all Manitobans*. Retrieved from https://www.gov.mb.ca/health/mha/docs/mha_strategic_plan.pdf
- Waddell, C., Schwartz, C., Barican, J., Gray-Grant, D., Mughal, S., & Nightingale, L. (2014). Addressing parental substance use. *Children's Mental Health Research Quarterly*, 8(1), 1-16. Vancouver, BC: Children's Health Policy Centre, Faculty of Health Sciences, Simon Fraser University.
- Watts, S., & Iratzoqui, A. (2019). Unraveling the relationships between low self-control, substance use, substance-using peers, and violent victimization. *American Journal of Criminal Justice*, 44, 979-997.
- Whitaker, K., Shapiro, V. B., & Shields, J. P. (2016). School-based protective factors related to suicide for lesbian, gay, and bisexual adolescents. *Journal of Adolescent Health*, 58(1), 63-68.
- Wilcox, H., Conner, K., Caine, E., et al. (2004). Association of alcohol and drug use disorders and completed suicide: an empirical review of cohort studies. *Journal of Drug and Alcohol Dependency*, 76, s11-s19.
- Wilson, S. J., & Tanner-Smith, E. E. (2013). Dropout prevention and intervention programs for improving school completion among school-aged children and youth: A systematic review. *Journal of the Society for Social Work and Research*, 4(4), 357-372.
- Winnipeg Police Service. (2019). *Annual report*. Retrieved from <https://www.winnipeg.ca/police/AnnualReports/2019/2019AR.pdf>
- World Health Organization. (2019). *Violence against children*. Retrieved from <https://www.who.int/news-room/fact-sheets/detail/violence-against-children>

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