



## **VOICES FROM THE FIELD - First Nations Children in Care**

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### ***Aboriginal perspective***

#### **Introduction**

There are approximately three times as many First Nations children in the child-welfare system today as there were at the height of residential school operations in the 1940s.<sup>1</sup> The Canadian Incident Study on Child Abuse and Neglect (CIS),<sup>2</sup> coupled with research on service access, provides the first indication as to why First Nations children are so drastically over-represented in the child welfare system today.<sup>3,4</sup> These studies indicate that poverty, poor housing and substance misuse are the critical factors accounting for the over-representation of Aboriginal children in care, pointing to the need for interdisciplinary research and responses that address these structural risk factors.

#### **Subject**

A report prepared for the Law Commission in Canada indicates that the annual cost of child maltreatment in Canada is over \$15 billion.<sup>5</sup> Investments in early childhood are likely to be helpful in addressing this problem, but a more comprehensive range of targeted prevention services is critically needed for all children from birth to 18 years, with a specific focus on poverty reduction, safe housing and substance misuse treatment.

#### **Challenges with interdisciplinary approaches to child maltreatment**

1. Despite an almost universal acknowledgement that we need to stop assessing the needs of children piecemeal or one age at a time, there continues to be very limited interdisciplinary research between early childhood and child welfare constituencies. The CEECD papers<sup>6-15</sup> attempt to address this gap, but it is apparent that there is a critical need for further work.
2. First Nations children are too often excluded from national studies on child well-being. For example, First Nations children were not included in the National Longitudinal Study on Children and Youth. This means that there is a very limited pool of research on First Nations children, including the interrelationship between structural and historical factors on child well-being.
3. Consistent with recommendations made by the United Nations Committee on the Rights of the Child,<sup>16</sup> there is a critical need for disaggregated data within ECD and child welfare studies that explore distinct experiences of Aboriginal

children within, and between, the major cultural groups (Inuit, First Nations and Métis).<sup>17</sup>

### **Research Context**

Despite the over-representation of Aboriginal children in care, the CIS was the first study to specifically include First Nations children and to undertake secondary analysis of the data pertaining to Aboriginal children.

The CIS study engages social workers to describe the situation of clients referred to the child welfare system over a three-month period. Three First Nations child and family service agencies participated in CIS, with the remaining data coming from provincial child welfare authorities. Data were collected describing the reason for referral to the child welfare authority, child and family functioning and case disposition. Aboriginal children represented 614 of the 3,159 children included in the CIS. First Nations children (status and non-status) composed 64% of the Aboriginal children in the sample, with children from birth to seven years representing 52% of Aboriginal children in the sample.

Secondary analysis of CIS data indicated that Aboriginal children were slightly less likely than non-Aboriginal children to be reported to child welfare for physical or sexual abuse. However, Aboriginal children were twice as likely to be reported for neglect.<sup>18</sup> There is arguably an assumption that when social workers assess a family as being neglectful, the caregiver has the ability to influence the risk factors leading to the neglect. CIS findings indicate that this does not necessarily hold true. When researchers controlled for poverty, substance misuse and neglect, there was no over-representation of Aboriginal children in the child welfare system.<sup>3</sup>

Research aimed at determining the degree to which First Nations children receive equitable child welfare services adds context to the CIS findings. A national review of federal government funding for child welfare services found that First Nations child and family service agencies receive an average of 22% less per child for child welfare services than their provincial equivalents.<sup>19</sup> A research project conducted by the First Nations Child and Family Caring Society of Canada revealed that First Nations children and families on reserves receive negligible support from the voluntary sector that delivers a myriad of quality of life and risk prevention services with an aggregate annual value of \$90 billion.<sup>1,4</sup> Taken together, these two research reports suggest that First Nations children and families on reserve have less access to quality of life and preventive services support than other children. The dearth of voluntary sector services (food banks, low-income housing coalitions, recreation and arts programs, domestic abuse and child at risk services) is particularly important, given the CIS findings that suggest that the key to keeping children out of care is addressing poverty, substance misuse and housing — areas typically considered beyond the traditional scope of child welfare services.

Overall, research results affirm the recommendation made by Shangreux<sup>20</sup> that investment in prevention services for children at risk of or who are experiencing maltreatment is likely to reduce the number of Aboriginal children in care as long as the services focus specifically on poverty reduction, substance misuse and housing adequacy.

There are no data to indicate the degree to which children served by early childhood educators are simultaneously served by child welfare authorities, but anecdotal reports indicate that this happens frequently. In order to ensure that families at risk of child maltreatment are able to benefit from the best of what ECD and child welfare have to offer, there is a critical need for further research exploring how these two professions could better coordinate services and optimize outcomes for children and their families — particularly for those at risk of child maltreatment.

**What are the gaps and how can we address them?**

As noted, there is a general dearth of disaggregated data that describes the experiences of Aboriginal children and young people in Canada. This is surprising, given their persistent over-representation for poor population health outcomes and other risks, including child welfare placement. The Canadian Incident Study on Child Abuse and Neglect<sup>2</sup> provided important insights into why so many Aboriginal children are in care, but there is a critical need for further research in the following areas:

- 1) The interrelationships between the structural risk factors of poverty, poor housing and substance misuse and neglect;
- 2) The relationship between inequitable service access and child maltreatment;
- 3) Interdisciplinary research that informs coordinated policy and service responses between child welfare, ECD and other child-related professions;
- 4) A longitudinal study describing the well-being of Aboriginal children and youth, including children in care;
- 5) Studies that explore the experience of Aboriginal children and families throughout the child welfare system.

The syntheses of the Centre of Excellence for Early Childhood Development<sup>6-15</sup> provide a foundation upon which child welfare and early childhood researchers could work with Aboriginal communities to respond to these critical questions. Increased mechanisms for interdisciplinary relationship-building, information-sharing and collaboration between ECD and child welfare researchers, policy-makers and practitioners are also recommended.

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