

## **First Nations not affiliated to a First Nations child and family services (FNCFS) agency *Workshop Summary: Setting next steps together***

*The Institute of Fiscal Studies and Democracy (IFSD) is pleased to provide you with an update for the months of November and December on its research to support reform of child and family services in First Nations (FNCFS).*

### **Context**

The Institute of Fiscal Studies and Democracy (IFSD) is continuing its work with the Assembly of First Nations (AFN), the Caring Society (Dr. Cindy Blackstock), and the National Advisory Committee (NAC) to support the long-term reform of the FNCFS program.

Of the First Nations population on-reserve 17% is not affiliated to an FNCFS agency, 3% of the population on-reserve has passed their own law and is exercising jurisdiction, and 80% are served by an FNCFS agency.<sup>1</sup>

In the last five years, there has been significant focus on FNCFS agencies and more recently, First Nations exercising or contemplating jurisdiction. There is, however, limited understanding of CFS-related needs and activities in First Nations not affiliated to an FNCFS agency.

To help to fill this gap, IFSD was mandated to deliver a needs assessment and cost analysis of a range of approaches to designing and delivering CFS among First Nations not affiliated to an FNCFS agency.

This work has been undertaken with the invaluable contributions of First Nations. IFSD extends its gratitude to First Nations which, in the last year and a half, through a questionnaire (48% national participation), 9 regional gatherings (with 70 First Nations represented by 125 participants), and several case study collaborators, have helped to define different starting points, identify successes, challenges, and needs.

What we learned, working together through the questionnaire, case studies, and regional gatherings:

There is significant operational, financial, and organizational variability in how First Nations not affiliated to an FNCFS agency deliver CFS and related programming. While most First Nations currently offer some child and family and/or related services, the current mix of services offered does not meet the needs of these communities. There exist multiple paths forward in terms of approaches to funding and approaches to service delivery.

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<sup>1</sup> Note: There is a population of 103,929 First Nations on-reserve currently served by an FNCFS agency and not affiliated to an FNCFS agency that have declared their intent to exercise jurisdiction or that are engaged in the coordination agreement process.

Before drafting its final report, IFSD gathered with First Nations not affiliated to an FNCFS agency on November 2, 2023, in Ottawa.

The gathering was an opportunity to confirm the context and experiences of First Nations not affiliated to an FNCFS agency were captured appropriately; to define the range of options and tools for supporting the design and delivery of CFS; and to capture anticipated challenges moving forward.

The working session was attended by over 65 First Nations (50% of First Nations excluding Northwest Territories<sup>2</sup>, those without land bases/populations on landbases, and ten First Nations in Quebec (under modern treaty, most of which are served by the Cree Board of Health and Social Services)), who gathered in person or joined virtually via Zoom. The significant participation rate was representative of different geographies, regions, approaches to service delivery and populations sizes.

Dr. Cindy Blackstock delivered the keynote address before participants engaged and deliberated in groups on various themes and questions.

Learnings from Dr. Blackstock's address:

Among many important messages, there were three principal takeaways:

- 1) Supporting children and families means addressing the key drivers of child maltreatment, e.g., poverty, poor housing, addictions, etc.
- 2) Prevention and protection services are linked and should be coordinated to meet the needs of families.
- 3) Prevention activities in child and family services can be primary, secondary, or tertiary in nature. Secondary and tertiary prevention services are technical and intensive to support children and families in crisis or at high-risk. These services are different than primary prevention services which have lower barriers for access and can be passive in nature and accessed voluntarily (akin to public health campaigns). Given the complexity and human impact associated to providing these services, First Nations should consult their lawyers and insurers on liability for the provision of different types of prevention services.

Participants shared back their main takeaways from their discussions in plenary. The session followed the Chatham House Rule. A summary of the discussion is included below.

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<sup>2</sup> First Nations in the Northwest Territories are not covered by CHRT rulings on child and family services. First Nations in the territory have a different starting point than those in the provinces and Yukon.

IFSD is grateful to those who shared their time, knowledge, and dedication during the gathering. Your contributions, captured below, will inform cost analysis and recommendations for next steps.

### Summary of proceedings

First Nations not affiliated to an FNCFS agency comprise a diverse group that represents a variety of different contexts, starting points, and approaches to delivering CFS. The following summary captures takeaways from the plenary sharing session, organized thematically by questions proposed to participants.

*The work of CFS is sacred. The importance of working from the spirit guided by empathy and kindness was echoed throughout the discussion.*

To facilitate discussion, IFSD proposed five questions to participants:

- 1) Defining community context. What is impacting CFS?
- 2) What is our starting point for CFS, (i.e., staff currently employed, open positions), programming (i.e., current activities and services), structures (i.e., department, agency, etc.), etc.?
- 3) What tools do you have to fulfil your mandate? What tools do you need? Consider, for instance, program development, planning, assessing community needs, data gathering approaches and analysis, etc.
- 4) What are some challenges/considerations as you move forward?
- 5) What type of funding-related matters, e.g., amount, terms and conditions, etc., best support your First Nation's vision of CFS?

At the close of the discussion, **seven recommendations** were confirmed with the group:

- 1) Access to shared resources in CFS for strategic planning, programming, and staff supports are needed.
- 2) There must be a respect for the time and space needed to reflect, engage with, and support children and families. This does not happen quickly or easily.
- 3) Total membership (irrespective of residency) should be modelled in all cost analysis.
- 4) Remoteness should be considered in all cost analysis.
- 5) Funding must be clear, sustainable, and on-going. Block and multi-year approaches to funding should be explored.
- 6) Consider the different starting points for First Nations not affiliated to an FNCFS agency that will impact their transition to future/desired states.
- 7) A **call for another in-person** gathering to spend more time exchanging and sharing ideas over two full days.

The summary below is organized by question theme.

NOTE: One virtual participant raised their displeasure at the coordination of the November 2, 2023 gathering, and indicated that the questions asked to participants were irrelevant to their context. The participant indicated that their region was different and is not represented by the consensus of the majority in this summary.

### **Context impacting CFS**

There is motivation and hope with a drive to do more for children and families. While approaches and starting points differ across First Nations, there are three broad themes and issues that emerged that impact the design and delivery of CFS.

*Contextual factors* are influencing starting points, needs, and shaping how CFS is designed and delivered. The most commonly mentioned issues impacting CFS included housing and related infrastructure, poverty/deprivation, addictions, and intergenerational trauma and healing. Compounding these issues are limited, inadequate, or unavailable services near communities.

*Staffing challenges*, i.e., attracting and retaining staff was universally defined as an operating challenge. Finding staff takes time (especially challenging in rural and remote places), keeping them means competing with salaries and work environments that are often more competitive with the province. There is a desire to invest in community members who will live and work and contribute to their community. Training them, however, can be a multi-year exercise, especially for technical positions. Different types of skills and positions are needed to support CFS. There is a difference between support roles for which staff can be developed with basic training, and other more technical positions, e.g., for prevention services that require more technical training.

*Trust and governance* were highlighted as considerations that actively or tacitly influence efforts. In some First Nations, there are negative perceptions of CFS and trust has to be built. Other First Nations struggle with tensions between political leadership and CFS practitioners who may see needs and responses differently. There is also the overlay of provincial jurisdiction and for some, the exercise (or contemplation) of jurisdiction. These matters influence CFS operations and staff.

### **Starting point for CFS**

For many assembled, work in CFS is being undertaken in crisis management response mode. Staff are limited and often overworked. In some First Nations, trust is limited in CFS, in the province or related agencies and needs time to be developed. There are limited opportunities for planning because information about the First Nation's own children is limited and resources for access are constrained. An approach to data gathering, secure maintenance, and evidence generation are needed. Several participants emphasized the importance and need for genealogical supports and tools to connect children with their roots and history.

A whole of community approach that includes culture, language, and members throughout the life cycle (children, youth, elders, etc.), is desired by many to support planning and service delivery. *Money alone does not solve all problems. Without people and plans, you cannot execute no matter how much money you have.*

### **Tools available/needed**

There were ideas and promising practices to share among those assembled. When asked to define needed tools, participants agreed that supports and resources for programming, job profiles, and crucially, strategic planning, should be made accessible through a central repository. Some regions, e.g., British Columbia, Quebec, have active support organizations while others are seeking them out.

It was noted that the Kids Help Phone offers training for volunteers with expert supports. In addition, the [Mi'kmaq Maliseet Bachelor of Social Work](#) program at St. Thomas University was highlighted as a community-developed opportunity for training for social workers. For those seeking models to develop their own training, they may wish to review it.

Participants highlighted their First Nation as a source of inspiration, direction, and potential pool of talent. Building skills and capacity as many First Nations continue on their healing journeys will take time.
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Concerns were raised by some about access to resources for capital (despite CHRT orders) and related processes, although some successes were noted too. Office and programming spaces remain in short supply in many First Nations.

### **Challenges/considerations moving forward**

"It's like we're being setup to fail."

"We're moving too quickly."

Participants shared the pressure and concerns of the current environment. They are being told to move quickly before money disappears. Creating constructive or sustainable change cannot happen without capacity, staff, and clear medium- or long-term plans.

This is a major concern. Resources have been allocated to end to discrimination and ensure it does reoccur. How are First Nations not affiliated to an FNCFS agency expected to execute in short time frames without the benefits of planning, time, people, and an existing baseline?

There is a clear call for a whole of community approach. This means recognizing and working to address existing gaps in First Nations, e.g., housing, deprivation, and in CFS, e.g., training their own social workers, developing support homes, etc.

Planning and development need to be built by the First Nation for the First Nation. Not all First Nations are starting from the same place, with the same capacities, or are seeking to deliver CFS in the same way. Sovereignty is about building evidence from the community's stories and experiences and charting a way forward together.

### **Funding matters**

Clear, consistent and reliable funding is necessary to meaningfully plan and support community, retain staff, and function normally as a service provider. The crisis mode management is in part attributable to "never knowing what next year will bring." Funding questions and concerns abound, e.g., what happens in year 6?

Funding inconsistency and unreliability contribute to staff turnover and an inability to plan. Resources for CFS are available now but do not cover root causes of need, e.g., deprivation.

A whole of community approach to CFS means considering the full membership of the First Nation, and ending a false differentiation between membership based on residency for service access.

IFSD extends its gratitude for the invaluable contributions made to this work by First Nations not affiliated to an FNCFS agency. Their willingness to share their time, knowledge, and experiences makes this work possible. Should you have any questions or comments, please do not hesitate to get in touch at [info@ifsd.ca](mailto:info@ifsd.ca).

In its next steps, IFSD will:

- 1) Produce national cost estimates, (i.e., estimates of total cost), based on the different funding approaches discussed;
- 2) Prepare case studies of First Nation-level models of service delivery (with consent from First Nations collaborators); and
- 3) Share considerations for the different funding approaches and cost estimates for consideration in December 2023.

*IFSD is writing to share its monthly update on our research to support FNCFS reform (updates will continue monthly). Feel free to share this update with colleagues or invite them to join our mailing list ([info@ifsd.ca](mailto:info@ifsd.ca)).*