

THE ABORIGINAL PREVENTION PRACTICE PROJECT

A Learning Circle on Children's Well-Being

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INTRODUCTION

This is a background document for the Aboriginal Child Welfare Intervention and Support Services Project. The project is an inquiry into the state-of-the-art of prevention and support practices in Aboriginal communities. It gives special attention to interventions which strengthen family well-being and avoid child protection interventions. The scope of the project is broad, covering prevention initiatives in all parts of Ontario, and addressing interventions beyond the field of

child welfare.

Project Goals

1. To review existing practices for prevention, support or intervention ... which reduce the need for intrusive and expensive child welfare services, and which protect children.
2. To surface any new or promising prevention practices, currently not in place.
3. To make recommendations concerning best practices.

Methods

1. A **literature review** which includes (i) program and practice descriptions (ii) organizational reviews and evaluations (iii) documentation of prevention practices relevant to family and children's well-being, and (iv) published materials from Canada, USA, Australia and New Zealand.
2. Telephone interviews with a **learning circle** - individuals from across Ontario and beyond, who are familiar with prevention-oriented programs for Aboriginal families and children.
3. Consultation with an **Advisory Committee** of Ministry and Aboriginal service community representatives.

This report summarizes information acquired through our initial consultations with learning circle participants.

The Learning Circle

The learning circle or network was initially defined as persons who are familiar with Ontario's Aboriginal child welfare scene, and who may benefit from immediately learning about the practices identified through the project. As the project proceeded, we saw benefit in including some persons from outside Ontario.

Learning circle members were contacted first to ask for opinions concerning the best interventions or practices in Aboriginal communities, which effectively

prevent children from needing expensive or intrusive child welfare services.

Information was obtained from Elders, service providers and others familiar with child welfare or other family- and children-oriented programs. This learning circle also incorporates a feedback process. In this, participants received a summary of our learnings, and had the opportunity to amplify their initial contribution or otherwise comment on the findings. The second phase has the twin purposes of enriching our consultations, while contributing to immediate awareness in the field.

This report provides a summary of information acquired through the project's learning circle process.

Learning Circle Participants

In this project we interviewed several categories of people, summarized in Table 1. In our selection process we tried to balance the numbers of persons from the various regions in Ontario, as well as in various programs.

Table 1: Learning Circle Participants

Categories	Interviews
Agency Executive Directors; Directors of Service (Child Welfare)	4
MCSS Staff and Program	4

	4	
Supervisors		
Program Directors, Supervisors	13	
Front-Line Staff	9*	
Elders and Cultural Teachers	24	
Child Welfare Professionals (consultants, lawyers)	3	1
Academics\researchers	1	
Aboriginal Child Welfare Review Team	2	
Total:	61	

***Group interviews** 4
(1 Executive Director;
1 Director of Services;
13 Front-line Staff)

****Meetings: Aboriginal Working**
Group 1

In our work, we recognize three broad categories of “Elders”: (i) spiritual teachers and counselors (ii) cultural or traditional specialists and (iii) elderly people or “seniors”. Most of our learning circle Elders likely see themselves as cultural or traditional specialists, although a few are also elderly. Also, some of the Elders were previously involved in service delivery and local politics.

Questions for Inquiry

Four broad questions guided our consultations with learning circle participants.

1. What conditions are associated with child maltreatment in some Aboriginal communities? (Elders only)

2. What interventions and practices are effective in preventing the need for intrusive and expensive child welfare services?
3. What other programs or services support these interventions? (Elders not asked)
4. What challenges are experienced; and what community, organizational or program factors would help make these interventions more effective?

FACTORS ASSOCIATED WITH CHILD MALTREATMENT

To help place the prevention ideas in context, and to assess the similarities to other inquiries, we asked Elders for their perceptions concerning causes of child maltreatment. Their answers focused upon three different levels: (i) historical (ii) societal\community factors and (iii) parenting\family factors.

Historical Factors

Some Elders referred to a lack of kindness from the dominant society. Others talked about how the contacts between different cultures led to confusion and breakdown in community, family, and parenting standards. Traditional standards were never recovered. Such contacts include government efforts to assimilate

Aboriginal people to the dominant society.

Following this same theme, still other Elders spoke of a “lack of culture” in some communities. For example, one Elder referred to how government policy had changed family interaction. The changes in hunting rights have altered how family members interact with one another. They no longer participate together in traditional activities.

Several Elders believe that, in comparison to earlier times, children are no longer valued in the same ways. In one sense, there is not the same kind of high esteem held for children, possibly not even the same kind of love. The change in the feelings and values towards children has been attributed partly to the impact of residential schooling. Another said that love was still there, but that parents did not know how to express love. These changes are reflected in the prevalence of abuse and neglect.

Many respondents linked child maltreatment with the impact of government policies on family and parenting - particularly the policies related to residential schools and child welfare. Because residential school children were away from their families, they were deprived of opportunities to learn about family roles, parenting and life skills. As well, they developed negative self-images as “bad Indians”.

Child welfare policy, practice and the CAS “baby scoop” were also identified as significant historical factors with long-standing impacts on family life and child maltreatment. As one respondent said, past child welfare policy *is* an example of child maltreatment, creating many of the same negative effects as residential schools. In the past, the system has (i) displaced children from their homes and communities (ii) used inappropriate home study standards (iii) denied children the opportunity to learn their language, spirituality and other components of culture (iv) forced parents to adopt alien values and actions, and (v) favored certain family conditions consistent with dominant society values and beliefs.

Societal and Community Factors

Many Elders see the maltreatment of children in relation to broad societal and community factors. They talked about how social changes have affected the quality of parenting, by introducing disruptions to the way many Aboriginal people live. There's a faster pace in life now. Fast food outlets affect patterns of meal preparation. The continuing intrusion of outside factors such as child welfare agencies play havoc with many communities.

Reference was made to the emergence of institutions, such as old age homes, day-care centers, and so on. For some Elders, such arrangements tend to undermine the traditional roles of extended family members, roles which involved

them in child-rearing, parental support and other family activities.

Many talked about the poverty in the community. Poverty leads to the loss of self-esteem and confidence, drinking and sniffing gas, gambling addictions, and neglect or abuse. Unemployment has negatively affected the way some parents treat their children. Low income families are unable to meet the material needs of the household. The pressures to obtain money leads some parents to bingo; this might contribute to neglect of children.

Economics also affects family life by requiring, in some instances, both parents to seek employment. In other situations, single parents may be working away from home. Children may be left with inexperienced baby sitters. In general, many Elders feel that economics and other forces of change are drawing parents away from the home, weakening quality time with children. Bingo night, with its attraction of financial or other material gain, for example, exhausts the finances of some families. The balance of family functions has been disturbed, such that meeting basic needs (shelter, provision of food) takes precedence over quality child-rearing.

Other community-wide factors were also mentioned. The lack of housing introduces stress and crowded living conditions. The lack of social recreational opportunities for young people between ages of 12 and 16 years is a particular problem. Illiteracy stands in the way of acquiring jobs, training and self-esteem.

Still other Elders talked about the social isolation between some families. There was feeling that social isolation exists between healthy and unhealthy families. In many communities, families are not getting together in social settings, a pattern which may contribute to the breakdown of the family and parenting.

At the general community level, there was a sense of a lack of appropriate standards and relationships between people. This takes many forms: Some spoke about the absence of kindness between people in modern times. Others spoke of jealousy, greed and hypocrisy. Still others spoke of community members' reluctance to reach out, care and share. One Elder talked about how "hurting" seems to be a routine way of life in some communities. Hurting becomes a significant emotion in the way people relate.

Some respondents focused on community leadership. One person suggested that some local leaders were not adequately acknowledging the problems in their communities. Nor were they promoting the appropriate values for child rearing and family life, such as the importance of staying in school. These messages, rather than advertisements for "pub night" or bingo, should be given higher priority. Still others believed that some people in significant positions of influence (eg. local politicians, spiritual Elders) were themselves unhealthy people.

Other learning circle participants talked about the loss of traditional values which

used to support the practices of caring and helping each other. One talked about how local Native police might ignore law breaking. In some communities, members do not come forward to help others, possibly in fear of a long-standing fear of "bad medicine".

A final theme relates to the attitudes, behavior and results of denial. To quote:
“Community and individual denial creates a veil of secrecy. Families and communities are raising angry children”

Parent and Family Influences

Many Elders believe that child maltreatment occurs because of the qualities or characteristics that parents bring to the parenting role. For example, many commented on the inadequacy of their parenting skills. Appropriate parenting skills and knowledge, they feel, have not been shared. This results in extreme leniency with some children and youth, and too much freedom.

Several commented that many parents themselves were abused or neglected as children. Some even described child maltreatment as learned behavior, emanating from a ***“scripted thought process”***.

Other references to the backgrounds of parents highlighted the residential schools experience. Still others talked about what they saw as negative parenting attitudes, character and moral strength. A lack of formal education may contribute to low self-esteem and self-appreciation.

References were made to gaps within the extended family structure. The weakness of ties, for example, between parents, grandparents and children, has affected quality of parenting.

The lack of an extended family support group is particularly felt at times of extreme stress. For example, parents with high needs children may be particularly stressed, and in need of relief from their parenting duties. Without natural support, parent respite programs are in order.

Elders talked about the role of substance abuse in the maltreatment of children. For some, substance abuse contributes to family violence generally, and specifically to child abuse. Others are mainly concerned that patterns of substance abuse within the family are learned by the children.

Finally, two other high risk situations were identified:

- children living and attending school in remote areas away from their families
- siblings with one common parent, but different second parents

EFFECTIVE INTERVENTIONS

Several themes emerged in our discussions concerning effective interventions and practices. The themes are organized according to the various levels of intervention: the community at large, the family, parents, and individual. We begin with a theme that lies at the core of many practices.

CULTURAL RECOVERY

In the words of one Elder, the most appropriate solution to the problem of child maltreatment involves a return to the pre-contact core beliefs concerning the "good kind life". Teaching children the values and historical events of Aboriginal communities would last a lifetime, build self-esteem and contribute to handling the problems of daily life.

One counselor emphasized that the most effective way to strengthen families is ***"through the Native culture. Let the families practice their spirituality. Bring back traditional society's rules that we practiced in the past. Families now don't have the connectedness with culture. Traditional spirituality strengthens love and caring in families."***

Children should have culture-based learning environments, in which traditional values like kindness and honesty, are taught. Efforts should be made to build acceptance for the traditional teachings concerning young women (Eg. moon times) and men (eg. fasting, helping and vision quests). Opportunities for language and other cultural learning should also be provided.

Many regard Elders as important teaching resources for preventive programming: They should be involved in parenting education- teaching young parents how to parent and use traditional food preparation. The function of Elders as teachers and advisers reflects their traditional place in tribal society. Despite the importance of their involvement, ministries lack the understanding of this, and its significance. Also it is perceived as an inexpensive practice. ***"Elder involvement is very impressive -- a best practice!"***

Also, as one Executive Director of a large Aboriginal child welfare agency noted, cultural recovery extends throughout the community, and affects all of day-to-day life. With cultural recovery, people will begin to participate in community life, over and above the traditional ceremonies. It is a ***"dynamic process of who they are!"***

As important as cultural education is, it must respect the diversity of beliefs within the community. People of different faith must learn to appreciate some of their common values. Moreover, to be effective, some cultural practices should integrate mainstream methods, such as group work. Depending on need and available resources, an effort should be made to create a balance between traditional and contemporary work.

As we shall see, this belief in the importance and effectiveness of culture revitalization is a central theme throughout most of the Elders' and service providers' identification of effective prevention interventions and practices. In the paragraphs to follow, we highlight specific ways in which traditional culture is reflected in the intervention.

Traditional Healing

It is important to present traditional healing as the first effective preventive intervention. The core beliefs, as well as many specific practices, re-appear in many interventions - even though some respondents do not use the phrase "traditional healing" in their descriptions of effective interventions or practices.

From the learning circle responses we can piece together selected core beliefs concerning wellness. These beliefs are essential to our understanding of why Aboriginal people support the effectiveness of these interventions.

Aboriginal people take a holistic perspective in their understanding of wellness,

illness and healing. First, they assume four parts to the person or self : the physical, the emotional, the mental and spiritual. There is a fundamental interdependence between these parts, such that the state of one impacts, and receives an impact from, the state of the others. In the abstract, healthy well-being is a state of harmony or balance between the various parts. ***Aboriginal people are quite comfortable in assuming multiple, possibly interacting, "causes" of presenting problems.***

Secondly, an important practical implication is that if persons are out of balance because of problems in one or other of the four areas, balance can you restored or healed by strengthening another area. For example, one respondent talked about how a client's abuse problems could be healed by strengthening his spiritual self. ***From a non-Aboriginal perspective, intervention is very "indirect" in its focus, although Aboriginal people would argue that the intervention is directly impacting the state of harmony or balance of the entire system.***

The practical implications of this holistic perspective is that interventions may focus on some or all of (i) physical well-being (example: massage, physical activities) (ii) emotional wellness (example: the expression of feelings) (iii) mental (example: awareness or understanding of an issue), or (iv) spiritual well-being (example: clarifying ones relationship with the Creator). Some intervention programs incorporate activities which focus on all components of the self.

The holistic perspective, particularly the interdependence principal, can lead to some surprising ideas from a Euro -- Western perspective. Some practices - cultural educational workshops, for example -- clearly involve cognitive learning in their focus, yet are an important part of healing.

Another practical implication is that problem-solving and healing can be accomplished by building on strengths. The assumption here is that by enhancing the strengths of persons, families or communities, there is "spill-over" effect into the problematic areas. As well, strength-building actions are more likely to enlist co-operation of persons with problems, and build trust with the service provider. This is what one person had in mind when he talked about the importance of "indirectness" with many First Nations people.

One respondent spoke strongly of the importance of balancing traditional community healing approaches with clinical or professional expertise. He offered one example of a community healing program, "Flying on your Own" which was very good at surfacing deeply held emotional issues. However, some communities were left with these issues unresolved. This particular program lacked arrangements for follow-up support in which the newly surfaced emotional issues could be treated and healed. Such imbalances in healing may have serious effects on a community. Another example of contemporary healing

is the “Twelve Step Program” (A.A.)

Still another member of the learning circle spoke of the effectiveness of family counseling. She noted how such techniques work to alter patterns within dysfunctional families. She observes positive changes as she works with families over extended periods of time. Families can also receive help in reuniting, or developing basic life skills such as budgeting, to help them become more independent. Finally, family counseling is helpful in building self-esteem and healing relationships.

Targets

The recipients of traditional healing may be the victims of sexual or physical abuse, the perpetrators of abuse, or other family members. Traditional healing may also be directed to the family or community as a whole (see “Community healing”).

Traditional Healing Practices

The following traditional healing practices are used and perceived as effective:

- Healing circles
- Sweat lodges
- Cultural teachings: eg. Seven Grandfather teachings
- Ceremonies: naming ceremony
- Pow wows
- The medicine wheel
- Vision quests

Each of these could be described at length. We will focus on

The Medicine Wheel

The Medicine Wheel is a valuable cultural tool for many service providers and communities, in their planning and delivery of culture-based prevention programs. Essentially a circle of four equal parts, it is used to symbolize the parts and wholeness within the community, a family, a person, or a program. Programs use the medicine wheel as a mental device for organizing thinking and planning,

or as a tool to organize and facilitate thinking in healing processes. In short, it facilitates new ways of thinking based on the holistic perspective.

As a tool for healing, the Medicine Wheel facilitates how reality and problems can have many dimensions and many levels. One member of the learning circle talked about how she used the Medicine Wheel to help families think about problems in different ways. They see problems in their inter-connections, and thereby gain new and greater insights. For this practitioner, an important component of healing is **re-visioning and re-learning** by the person. She also facilitates collective awareness in the family group.

The Medicine Wheel as a cultural resource, used in a number of different healing practices, is fundamentally a guide towards insight, understanding and change. Other ideas advanced by our learning circle participants -- ideas related to some of the potential goals and impacts of traditional healing, include:

- The appreciation of cultural loss, and the importance of cultural recovery
- Empowerment: taking responsibility for one's own life
- Recovering a lost sense of identity

Combining Traditional Healing Practices

Traditional healing practices are also effective when used in combination. Healing and talking circles, for example, can be used prior to, or following cultural teachings. Participants can examine the personal or community implications of the teachings. Or, as one respondents said, the talking circle helps to draw out "implications for living".

Community Healing

Some Elders highlighted the effectiveness of healing opportunities for the whole community. They addressed specific needs within the community. They spoke of the emotional needs and pain related to common themes, such as abandonment, unresolved grief and residential school experiences. Many community members have suffered specific losses. Others are grieving without knowing why. Everyone, including service providers, would benefit from opportunities to hear each others' stories.

Community healing practices and institutions include:

- Community healing circles

- Healing workshops
- Healing lodges

A family counselor reported enthusiastically of her success in incorporating Native spirituality in group work. Despite effectively using the feather and smudging as tools to help strengthen families, she cautions that some participants feel uneasy about traditional practices. Native spirituality and other traditional practices must be used with sensitivity to the needs and backgrounds of the participants.

COMMUNITY DEVELOPMENT

The goal of community development as an intervention strategy is to improve the quality of life for the community as a whole - to promote community wellness. This intervention is consistent with Aboriginal People's holistic perspective, and the values and principles of traditional community life and the tribal family.

An important principle is one of helping the community take responsibility for its own growth and development. Community members plan and carry out changes as they see fit. They perceive and have confidence in their ability to influence their own environment. Community development initiatives typically build on the strengths of the community while identifying and neutralizing factors that may oppose positive change.

Tribal societies are organized to provide and promote supportive,

Project literature review

held values of wisdom, love, respect, bravery, honesty, humility and truth.

As well, healthy communities provide the opportunities, relationships and resources for those who otherwise may abuse or neglect their children. For example, families will **not** receive advise, support or even warnings - when they live in communities whose members do not naturally reach out. A single mom will **not** get a break from her stressful daily routines in a community where strong friendships are not ordinary occurrences.

Generalizing from their comments, specific recommendations from our learning circle participants identify practices which **enable or facilitate community ...**

□ **Awareness**

- **Learning**
- **Interaction and bonding between people**
- **Mutual helping**
- **Development of a collective positive self-esteem**

Finally, as one Elder noted, community development may be an important, if not necessary preliminary step, for the successful implementation of other prevention programs, such as healing lodges. Specific interventions may help accomplish some, a few or all of these objectives. These are as follows:

Development of Social and Recreational Opportunities

Several learning circle participants spoke strongly of the preventive qualities of social and recreational programs or activities. They note that First Nation communities need to organize and provide facilities for socializing and recreation. Such opportunities ...

- keep people busy in a healthy recreational life-style
- establish the medium for informal counseling
- strengthen the bonds between parents and children
- establish informal helping networks and friendships between community members
- help build positive self-esteem.
- provide a context for observing and role modeling appropriate parenting behavior

Well-designed recreational activities can promote interaction between extended family members, and with other families. One respondent reported that studies have demonstrated the helpfulness of such activities, despite deep-seated emotional problems among some community members. Simply stated, ***"It is important to keep people busy!"*** Further, the same respondent believed that recreational activities, such as crafts and arts, effectively promote involvement between all family members. Craft and arts with integrated cultural themes are even more effective.

Another respondent spoke of a prevention worker in a nearby community who ***"is there for all the children. She puts on sporting events, arts and crafts, and snacks for the children. Her program and activities attract many children. The kids hang out there!"***

Small communities can benefit from social and recreational activities without enormous expense. In this regard, The Native Community Branch, in the old Ministry Of Culture and Recreation, made important contributions to native communities.

Many respondents believe that the most effective community-wide initiatives will bring children together with Elders, provide high visibility for Elders, encourage whole family participation, recover the traditional pattern of parental visiting, and keep children and youth occupied at nights. Above all, social and recreational opportunities provide Aboriginal people with activities which are not disruptive to family life.

Community development practices for encouraging social and recreational activities can take many forms. Comments from learning circle participants identify many possible arrangements for bringing people together. Such opportunities can include ...

- social gatherings for youth
- organized programs for children which includes social play, arts and crafts
- traditional gatherings
- arts and crafts
- social\recreational activities involving whole families

Many Aboriginal communities lack the physical facilities for providing appropriate and effective social and recreational programming. Elders spoke of the need for recreation buildings, arenas, skating rinks and the like.

As a final observation, it is worth noting that many respondents feel that government does not recognize the importance of community development, including social and recreational programming, as a preventive activity for Aboriginal family life.

* * * * *

The above social and recreational arrangements provide at least some opportunities for learning. Others are organized specifically for community-wide

educational purposes. Many Elders and service providers spoke of the effectiveness of specific educational initiatives for family well-being

Community Education

Community education initiatives are community-wide interventions, provided at times of crises or normal living. They contribute to prevention by ...

- raising awareness of historical conditions affecting the maltreatment of children, such as the residential school experience and syndrome
- helping people understand child welfare issues affecting family life, such as violence, sexual abuse, alcohol abuse.
- promoting changes in community, family life or child-rearing values and standards, including child abuse prevention, non-violence, honesty, kindness and the like
- providing opportunities for developing specific skills (eg. anger management) or enhancement of self-esteem
- contributing to community togetherness and a group identity

The **practices** for providing community education include:

- community workshops
- Elder teachings
- exposure to written promotional media such as brochures, pamphlets, video
- cultural events: cultural celebrations, stories about traditional community life
- the use of local media

Community education events, as well as other community development initiatives (eg. Alkali Lake) also provide opportunities for cross-community learning through the development of educational resources and volunteers. Shawanaga First

Nation, for example, created an educational video depicting community response to the AIDS crisis.

Parent Networking and Self-Help

Parent networking initiatives provide opportunities for parents to come together within the context of specific programs, or perhaps on a less formal basis. It is beneficial in many ways: Parent networking ..

- responds to the specific issue of social isolation, bringing people together who may otherwise live a secluded life
- is a vehicle for mutual support in which people exchange tangible resources as well as practical information and ideas
- may provide opportunities for planning and carrying out other useful local activities

After speaking positively about the value of parenting circles, one learning circle member cautioned that follow-up was an important complementary service.

Mobilization of Volunteers and Natural Helpers

Our consultations also highlighted the importance of recruiting and supporting local community members to actively participate in initiatives for promoting family well-being and child maltreatment prevention. Although challenging at times, volunteers are involved in

- Family support and child welfare committees
- Carrying out specific program tasks
- Leading cultural activities and traditional ceremonies
- Membership on Boards, Councils and local committees

The **Aboriginal Head Start Program** assigns high priority to promoting parent and community volunteer involvement in the organization and delivery of its program across Canada.

“Our grand-parents were the social workers in the past - counseling, supporting and guiding their own children to parent in a good way. We, as family members, are social workers in our family - that’s how I see it.”

- Learning circle interview

Many Aboriginal child welfare models incorporate the principle of energizing the “natural helpers and supports” in their prevention initiatives with families and children. The Family Support Workers at **Ojibway Tribal Family Services**, for example, encourage local Elders, extended family members, and other community members to advise, emotionally support, and provide concrete assistance to families at risk.

Local Resource and Organizational Development

The common principle throughout all ideas is that child maltreatment prevention and protection matters should be first and foremost controlled by Aboriginal communities.

A final theme which organizes many community development ideas from our learning circle is that of resource development. Locally developed and operated resources are recommended to support the entire continuum of early intervention in child maltreatment cases. Community organizational arrangements and resources include

- Tribunal for mediation
- Aboriginal foster homes
- Customary care homes
- Child welfare committees

COUNSELING

Counseling is recognized as an important intervention for individuals implicated in the abuse or neglect of children, or those in situations placing them at possible risk of maltreating children. Counseling can be used with the perpetrators of abuse or neglect, the victims, or the entire family. Also, counseling can be used with the adult victims of previous child abuse and neglect, under the assumption that such maltreatment can negatively affect present parenting. The Mooka'am Sexual Abuse Treatment Program is a program with individual counseling.

As a therapeutic treatment modality performed by professional counselors, counseling can be used to meet the emotional needs of individuals, enhance their self-esteem, resolve inner conflicts, or otherwise address the various psychological effects of victimization. In the words of one Program Co-ordinator who strongly endorsed counseling as an effective intervention: "The counselor may be the first to hear her story and her issues".

As needed, individual counseling can be used to help resolve the identity confusion associated with the challenges of knowing and valuing oneself as an Aboriginal person in modern society.

Such counseling may be useful for those who are already implicated in child abuse or neglect, or for those whose difficulties in coping with stressful life situations threatening to affect the quality of their relationships with children or youth.

Useful counseling can also be effectively provided by trained or even lay persons familiar with the personal issues arising out of the social, economic and family conditions in Aboriginal communities. Such counseling can include the sharing of practical information for addressing crises related to family breakdown, housing, CAS involvement, drug and alcohol abuse, issues related to poverty, unemployment and other real-life situations of Aboriginal people. This counseling typically involves putting the family member in touch with specialized information, treatment or other resources related to their particular issue. Or, in the words of one Family Support Worker : ***"it helps them think properly when they are under stress"***. This type of counseling is often provided by the family support staff of First Nation child welfare organizations or urban programs.

Counseling can be provided to children who are abuse victims or who are in difficult family situations. For example, children who are identified as having problems in school may open up to a trusted outsider, and receive help to confront their parents or otherwise cope with a high-risk maltreatment or alcohol abuse situation. Working with children in these situations, particularly if the whole family becomes involved later, is an early intervention which may avoid later intervention to protect the child.

Counseling may also be useful in aiding the transition of children to substitute care families, or back again to their original family.

"Natural counseling" can also be provided by extended family members, Elders or other members of the community. Such counseling also draws upon the local wisdom of natural helpers, as well as the specific knowledge of the person in need. This, essentially "traditional counseling" practice is inherent in the fabric of the healthy tribal community.

Counseling by Elders may also incorporate: a spiritual dimension, identity counseling related to the person's Aboriginal self concept, the use of traditional medicines, ceremonials or healing practices. Again, in the case of most Aboriginal helping organizations, the role of the staff member is to put the client in touch with the traditional Elder or cultural teacher.

Spiritual counseling is used, and is seen as effective by some. To quote one Co-ordinator: ***"We find that many clients are in a state of imbalance, without the capacity to deal with and express their feelings, or know what their relation is with the Creator"***.

Finally, several learning circle participants talked about the value of day-to-day informal counseling, through interaction with other parents, or with staff of programs like Aboriginal Head Start, day-care, and others. This type of counseling does not occur through a specialized role, but results from the natural acquaintances and trust between people.

One-to-one counseling can be offered in a variety of settings, often depending on the needs and wishes of the client. One learning circle participant, the Director of Services in a child and family services agency, felt that home-based counseling was her most important option. In the privacy of their homes, clients have raised issues related to family violence, addiction and struggles with self-esteem.

This same person noted that some issues require the expertise of a professional therapist. Such complex issues are referred to professionals, although clients may want continued involvement with their initial worker. Professional clinical work is typically done in office settings, as is other office-based work requested by the client.

FAMILY SYSTEM INTERVENTION

A holistic perspective recognizes that individual behavior, thinking, feeling and even bodily states are interrelated with the state of the family as an entire group or system. Depending on one's theoretical perspective, this family state can be conceived as patterned role relationships, themes (family values, beliefs, myths), communication patterns, or shared knowledge and awareness. To produce healthy change, family system practitioners work with entire families, or else individuals and dyads from a "family perspective".

Many workers talked generally about the importance of working with whole families in order to effect long-lasting change in dysfunctional patterns affecting interaction with children. One person, a veteran of over twenty years of family work experience, recounted the effectiveness of the "family geography method" and the "circle of balance" model as tools for family intervention. Without going into clinical details, these tools help family members change by gaining insight and new ways of thinking about the family and self. The circle of balance (more often called "the medicine wheel") helps family members think about the family implications of the physical, emotional, mental and spiritual aspects of the self. Family geography methods help focus on family roles and relationships, and how family issues are implicated. As system intervention practices, these move

dysfunctional families towards common understanding and insights, and hopefully to problem resolution.

A "family perspective" is used in (i) preventative individual work with children at high risk (ii) mobilizing networks of family relatives, friends and significant community members, and as a general model in (iii) family treatment centers. Family system intervention is also promoted through traditional ceremonies and the natural helping process.

CUSTOMARY CARE

Customary care is the community's use of extended family or other local families to care for children at times of family crises, early maltreatment, or stress (respite care). Thus, customary care can function as a source of parent relief, short-term care for family problem-solving, and as an aid in coping with overwhelming and stressful family situations. It is also used to help protect children from unsafe or unhealthy circumstances.

Aboriginal people believe that "at risk" and protective situations are best identified by community members themselves, guided by their intimate knowledge of the meaning of local circumstances. One example from the consultation is that children's attendance at Pow Wows or other celebrations (however late at night) advances their cultural knowledge. Community members are all responsible for the child's safety and well-being.

As we will see, customary care arrangements can also facilitate the strengthening of parenting, through family networking and links with community resources.

The customary care process takes place through the informal and natural caring involvements of the extended family or other community members, or else is facilitated by an agency. Modern customary care arrangements have evolved from the traditional tribal community, particularly the principle of community care.

Customary Care as Prevention

According to our learning circle participants, customary care helps keep children out of intrusive and expensive child protection through the following processes:

- Early intervention in high risk families
- Referral opportunities (treatment, education) for natural parents, while

children are in care

- Parent education for natural parents through supportive interaction with customary care parents
- Parent stress relief
- Short-term special circumstance relief (eg. illness)
- Opportunity to identify special needs in the children, such as fetal alcohol syndrome
- Community-based messages to dysfunctional parents to change their behavior and parenting

Learning Opportunities for Children in Customary Care

Customary care placements may also contribute to the children's learning. Finding themselves in a less dysfunctional environment, they may learn behaviors which contribute to their own safety, while giving up the negative tactics that help them survive in a dysfunctional home. Ideally, they will take their learning back to their natural parents.

Benefits to Customary Care Families

The benefits for customary care parents cannot be underestimated, as they become more active members of the community process. They achieve status as care-givers, sometimes developing new meaning in their own lives. Some develop knowledge about special needs children, and child-rearing in general.

Customary care parents, some with unfortunate life experiences themselves, have an opportunity to use and share their growth with the natural parents. Sharing helps to build a relationship with the child's parents, while contributing to the customary care parents' own healing process. Depending on the Customary Care programs, they have opportunities to receive training and support through workshops with other parents.

In modern arrangements, customary care parents (through agency support) may have other growth experiences. For example, as part of a community network, they become more experienced in working with community resources. They then generally have a richer environment for their own children. In short, their experience as customary care parents strengthens their participation in the caring community.

Customary care minimizes the potential separation trauma for the child.

Differences in language, family and community culture are minimized. As well, if the child is placed out of the community with a relative or friend, the repatriation process is much easier.

Depending on the circumstances, sensitive customary care parents can talk to the natural parents and help them deal with their previous circumstances.

In some communities, informal customary care arrangements take place without official recognition or procedural steps. Even so, many Aboriginal families require financial assistance to support the children on temporary basis.

Enhancing the Effectiveness of Customary Care

One respondent, a customary care and foster care parent, described customary care and its limitations: ***"the original concept of customary care was a process to encourage extended family members to care for children, assuming that they had the space, stability and were without problems. Children would stay within the community, and would be in customary care for a short period while the family received help. This is not happening: some children are staying for extended periods, families are not receiving help, and some kids are going out of the community. The customary care concept is not applicable to urban settings -- it is foster care. In the First Nation communities, the help families need sometimes is professional, and this often is not available"***.

Customary care placements are most effective when follow-up support is provided to the natural and customary care parents. The most ideal scenario, describe by another learning circle participant, is one where the natural parents' learning and growth is supported through the coordinated efforts of customary care parents, the enabling agency, and other community resources.

Another respondent was more specific: Such resources would include NNADAP, CHR's and Family Support Workers. Even Economic Development Officers should be involved, helping to find summer employment for young people returning from school.

This co-ordination does not happen in all communities - due to community dynamics, alcohol abuse by the natural parents, and the resistance to the customary care placement. Again, depending on circumstances and available resources, many customary care placements are accompanied by referrals to treatment centers and parent education programs.

To be effective, customary care is appropriate when the household facilities and resources can accommodate children. For example, the economic circumstances of Aboriginal families often do not permit the number of rooms for children's

privacy and well-being. Funding for capital development would help solve this problem.

Customary care placements are appropriate and effective when a co-parent relationship is established between the natural and the customary care parents. Such parenting relationships are consistent with the values and practices of tribal communities. At times of difficulties and survival, other community members participated in the care and support of the child. In modern times, this may not happen when forces such as alcohol abuse or resistance to the relationship undermine the co-operative parenting relationship.

As one informant mentioned, the rules enabling customary care in Aboriginal communities need to recognize local criteria for selecting appropriate customary care homes. Because of Aboriginal social, economic or community situations, or because of cultural differences, customary care homes may not adhere to Provincial standards. Flourishing community care supports in First Nation communities will rest on freely established local standards. Such standards will recognize the unique environments and community concepts of healthy and appropriate child-rearing, as well as the culturally unique foundations for motivations to participate in customary care.

PARENT EDUCATION

Parent education was the most frequently mentioned intervention for strengthening parenting, hence avoiding child maltreatment. Several people talked about the need for parent education among single parents and adolescents.

Parent education provides a range of skills, knowledge and values. It helps parents learn the techniques (eg. appropriate discipline, listening to their children, teaching independent thought) for raising children. It helps them to prepare nutritious and satisfying meals. It provides relevant life skills such as budgeting. In some programs it provides stress management techniques for coping with the challenges of raising children. Above all, traditional parent education reinforces the values of respecting the child as a gift from the Creator, while honoring the contributions of parents.

Most practitioners would prefer both parents in parent education programs. This may not be possible in single parent situations, or where fathers are reluctant to attend, or are unavailable. As a consequence, most parenting education programs only involve mothers.

Parent Education as Prevention

“Parents should spend time with children, involve others in their lives for sharing of experiences, teach the children responsibility and be available to them”

Parent education targets three different categories of parents, hence can be categorized as primary, secondary or tertiary

- Learning circle Elder

prevention. As primary prevention, parent education workshops typically provide learning opportunities for the whole community. Such occasions may be prescriptive in nature, with Elders sharing their expectations for parenting.

Secondary prevention events are targeted to high-risk parents such as single mothers, teenagers or parents whose family life or parenting style places the child's safety or well-being at risk.

Finally, parenting education may be required through Customary Care Agreements or court orders. In these, parent education becomes a tool for minimizing the conditions for future abuse or neglect - tertiary prevention.

Parent Education Formats

Parent education can be provided through many different formats, including community workshops, one-to-one family support, shelters, advocacy relationships, parent support circles, or through the informal day-to-day interactions between staff and other parents in other kinds of programs, such as day-care. For example, parent education may be incorporated in a child welfare agency's service or customary care plan.

Parent education usually is based on an assumption that the causes of child maltreatment are parental "deficiencies". However, most informants place these deficiencies in the broader context of historical experiences such as residential schools, or current dysfunctional family relationships. Other respondents see parenting behavior in relation to (i) the division of parenting role responsibility (ii) the breakdown of extended family systems as sources of support and learning, or (iii) stress-related socioeconomic and community difficulties.

Parent Education Resources

Most parent education initiatives are planned, organized and delivered by program staff. Others have Elders as the core resource people. Still others ("parenting circles") draw mainly from the wisdom of parents themselves.

Many urban programs adapt pre-packaged curricula, such as "Positive Indian Parenting" (American) or "Raising the Children". Both of these examples have content based on traditional values and parenting practice, although the former is judged as more main-stream.

Traditional Culture in Parent Education

Effective parent education programs incorporate, or are based in, traditional Aboriginal culture in the following ways:

- Curricula content contains references to traditional values and parenting practices
- Elders and grandparent participation, teaching parenting according to traditional values
- Traditional healing practices may accompany the teaching process
- Effective parenting is viewed within a holistic context of total family relationships, extended family systems, community factors, and historical circumstances

Enhancing Parent Education Effectiveness

Learning circle participants offered several recommendations to improve the effectiveness of parent education programs. These include:

- Group activities such as community kitchens

- Parent participation in identifying curriculum topics
- A holistic assessment perspective allowing the distinction between the lack of parenting skills (a deficiency model) and difficulties in life
- The curriculum incorporates awareness of how wider family and life situations affect parenting, and how to deal with such circumstances
- Encouraging total family participation, by making such arrangements as baby sitting

The Executive Director of a family violence center described a case where the young single woman's parenting abilities were misjudged, leading to her children's apprehension. This woman had placed three calls to a Children's Aid Society essentially seeking help for stressful circumstances. The process ultimately resulted in her children being apprehended. In the Executive Director's judgement, this parent was overwhelmed by life circumstances, yet was a good parent. Her support system had failed her. What she really needed was relief from her parenting duties, possibly a home for respite care. Six months later, her children were returned.

- The utilization of flexible packaged curricula which allows a holistic perspective and culture-based resources

- Staff training in techniques for facilitating full turnout
- Strong linkages with family support services
- Help men become better parents through men's circles
- Remove parent education from child protection agencies

These recommendations make parent education fit with a holistic perspective.

CHILDREN'S PROGRAMS

Many learning circle participants talked about the value of children's programs as preventive measures. Children's programs bring young children together for a variety of activities: learning, playing, talking, expanded community experiences, cultural activities and healing. Children's programs supplement the family situation for children's growth, giving them the skills and awareness for survival. By expanding the life space of their homes, such programs enrich children's learning opportunities, provide immediate enjoyment and fun, prepare children for immediate and lifelong development tasks, and teach appropriate community behavior.

Prevention in Children's Programs

The activities in children's programs are preventive in many ways. Some teach safety skills to enable children to recognize unsafe situations and take the appropriate actions. They may learn, for example, to respond to situations in nonviolent ways.

Other activities are early socialization activities which teach values, principles and behaviors for later life. They may, for example learn the foundations for nonviolent living and a substance-free life style. Peer socialization opportunities give them interpersonal skills which they may not acquire at home. Some programs, such as Aboriginal Head Start, have as a core component the preparation of children for participation in the school system.

Cultural education is another important component. It helps children develop a positive self-esteem through Aboriginal pride. Part of this is the removal of negative stereotypes concerning Aboriginal people. Still other activities empower children to take responsibility for developing their own self-esteem. Through cultural learning and the participation in cultural activities, children learn that they are part of a larger Aboriginal community. Their lives extend beyond the sometimes isolated lives of their own families.

The learning opportunities are designed to create a resiliency in the child, based on identity, self-esteem, social and interpersonal skills. The learning environments in children's programs supplement or take the place of dysfunctional environments in the home. Survival skills may even be used in their own home situations, for example, as children learn communication skills for sharing their pain. They learn not to take blame for family problems. In all programs, children are treated in ways that are different from the home. As so many staff say: **“they are treated with respect”**.

Children's programs, with opportunities for play as well as learning, provide healthy alternatives to the stressful situations in the home. They experience different types of relationships with others, under relaxed conditions.

Some children's programs, such as Aboriginal Head Start or day-care, encourage the participation of parents in the program. Parents have the opportunity to observe staff and other parents interact with all children. As well, they may have opportunities to talk to parents and staff concerning specific behaviors which their children display in the program and at home. Thus, some children's programs provide **parent education** opportunities.

Depending on staff skills and program orientation, children may have healing opportunities. In children's circles or informal conversations, staff may encourage children to express the painful issues in their lives, and their accompanying feelings. Apart from the opportunities for catharsis, staff may offer healthier interpretations or practical steps.

Like adult programs, children's programs provide healing opportunities through cultural teaching, the enhancement of self-esteem, and opportunities to engage in community activities. Effective children's programs provide opportunities for children to participate in the community at large, through special community events and traditional ceremonies, field trips to interesting and important organizations, and the involvement of community resource people in the program.

Finally, children's programs afford an opportunity for early identification of possible abuse or neglect. Several learning circle participants talked about the opportunity to recognize symptomatic behavior or appearance, and take steps to reach out to troubled families, or report to child protection authorities. Essentially, children's programs function as gatekeepers to early help or protection.

The Contexts of Children's Programs

Our consultations indicate that activities for children take place in a variety of community settings: schools, agencies, day-care centers, camps and housing complexes.

Practices in Children’s Programs

Consultations also show that numerous practices are used, including:

-
- Cultural education and participation
- Art therapy
- Social play and play therapy
- Community outings
- School outreach and linkage
- Life skills (eg. safety) teaching
- Role modeling by Aboriginal staff

Children's circles

A learning circle participant

Anecdotal evidence of the effectiveness of this program: Since its cancellation, an increase in suicides and suicide attempts among Aboriginal children and youth have been reported.

This culture-based program provided social and recreational opportunities, while teaching children the values and social skills for friendships, family life and community participation. The program was also a venue for staff identification of child abuse or neglect.

Resources for Children’s Programs

Like adult programs, children's programs utilize a variety of human and material resources:

- Cultural materials
- Elders and other visitors from the community
- Prepackaged curricula (example: “Good Touch\Bad Touch”)
- Traditional medicines
- Videos
- Games and materials

Effectiveness of Children’s Programs

According to one respondent, children's programming may be most effective way of impacting the future quality of family life. In some communities it is most

difficult to secure the broad and consistent participation of adults in parenting and other prevention programs. Ideally, the children, through their cultural learning, may indirectly effect parents through their comments and behavior in the home. Numerous stories are told, for example, of parental interest in cultural revitalization through their children's experiences. As another respondent said: ***"Children need to be encouraged to challenge their families to return to cultural normalcy"***

Children's programs are seen as more effective when they :

- Link with other family resource programs, such as family support
- Encourage parental participation
- Promote participation in the community
- Offer cultural learning opportunities
- Reinforce the parents role

YOUTH PROGRAMS

Youth programs are other important elements in the prevention of child abuse and neglect. They teach responsibilities at puberty before starting families. They offer support for youth issues, and provide teachings to help youth sort out the moral, health and safety issues related to such topics as sexuality and the use of drugs or alcohol. As one Elder summed up: ***"adolescents want to experience life; we need to put things in place for their safety"***. Programs for youth attempt to support young people so they can plan their lives, secure a good education, and meet their immediate growth-related emotional needs. This is particularly important for adolescent parents.

Effective programs educate youth in matters relating to sexuality, including appropriate gender relationships, birth control, and safe sex. Many of the programs prepare young people for their parenting roles. As well, they learn the appropriate values and standards for marital relationships including an expectation for mutual respect, rather than abuse. They learn how to create stable and safe, healthy environments for children. This may include awareness and even warnings against alcohol abuse, and how it effects family life and parenting.

Through some programs, youth are counseled with families involved with child welfare agencies. Such counseling helps to bring about the changes which either helps them to remain at home, or make an easy transition to independent living.

Youth programs may also incorporate talking or healing circles in which participants are free to raise personal issues, recognize that they share issues with other young people, and learn from others' experiences. Like healing components for other age groups, cultural learning is also beneficial to the movement to health and well-being.

Individual counseling or therapy is also available in some programs, as is the opportunity for referrals. One program supervisor for example, talked about her experience with a young woman who had been living with a dysfunctional family member. Prior to moving into a foster home, this person was referred for treatment.

Help for youth must recognize the other community problems affecting youth. Resources must be available so that children's and youth problems, for example, are identified quickly in the school system. Immediate help, such as counseling within schools would be very effective.

Another learning circle participant felt that the most effective prevention was to ***"get them early at the community level in the school system. Provide information on topics such as drug prevention and sexual abuse."***

In some communities, a lack of social and recreational opportunities is the major issue for youth. The neglected 12-16 year olds often have nothing to do but get into trouble. The communities perhaps most affected are isolated without transportation facilities. As one respondent said, ***"these kids want programs, but the communities may not have the capacity to make them succeed. Successful programs are those which have leaders who have the personality, skills and respect for the kids."***

Economic opportunities are equally important. As one respondent urged, ***"Economic Development Officers must take the responsibility of finding or creating jobs for youth during the summer season"***.

Preventive Aspects of Youth Programs

In summary, youth programs in Aboriginal communities contribute to the prevention of child abuse and neglect by ...

- appropriately preparing young men and women for their adult roles, particularly in the family
- helping them become aware of the dangers of certain excesses (eg. substance abuse) which may affect later family life

- helping them to increase their self-esteem, through such experiences as the development of Aboriginal pride
- helping them to address personal, family and developmental issues which may impact adulthood; and facilitate their involvement into appropriate traditional or contemporary healing opportunities
- supporting their involvement into Aboriginal community life, where they can secure access to supportive resources, friendship, growth opportunities - and participate in a collective self-esteem.
- provide social and recreational opportunities, which keep them out of trouble at an early age and prevent the onset of a troubled life

Contexts of Youth Programs

Like children's programs, preventative activities for youth take place in different settings:

- Agencies
- Housing complexes
- Summer camps
- First Nation communities

Culture and Traditions in Youth Programs

Programs for youths share with adult and children's programs many of the same cultural components. They have cultural education, the development of Aboriginal pride, involvement of Elders, talking circle formats for peer support, and participation in cultural events and ceremonies.

Particularly important to youth, are the cultural teachings concerning gender relationships, sexuality, and transitional mile-stones. Young women receive teachings on the beliefs and traditions related to menstrual periods ("moon-times"). Young men learn about such traditions as the vision quest.

ADVOCACY

Families at risk of maltreating their children may experience enormous stress in their lives, as a result of their socio-economic or family conditions. Some stress may flow directly from their contacts with community authorities or institutions. Isolated and generally lacking in the

capacity to use or interact with community resources, they struggle to meet their needs in the best possible ways.

Some respondents talked about the effectiveness of their advocacy work with clients. They are involved with clients in dealings with Children's Aid Societies, the courts, social assistance, landlords, and schools.

Although there are enormous difficulties with this role, some Aboriginal family workers support families through their liaison work with Children's Aid Societies. Such roles are provided by Family Support Workers in urban settings, and by Band Family Service Workers in First Nation communities.

At least part of the liaison work with Children's Aid Societies involves an advocacy role. In this, workers support the process by ...

- facilitating communication between the parties
- supporting the family through the child protection process by providing emotional support, interpretation and clarification
- helping the family get their children back by teaching and encouraging safer parenting and household conditions

As one urban worker said: "Most parents are co-operative in working to change" Another staff person in a day-care spoke of her advocacy work on behalf of children in the community at large. Although unsure of whether this was appropriate, she told of drawing attention to certain conditions which threatened the safety of all children in her community.

HOME VISITATIONS

As indicated earlier, some counseling is done through visits to the client's home. Home visits are used by Family Support Workers and other program staff (eg. Aboriginal Head Start) to reach families who, having fallen into long-standing **patterns of social isolation**, are reluctant to participate in community programs. Contact from a friendly Aboriginal worker is an important first step in breaking down the barriers.

Also, as one staff member pointed out, some parents **interrupt their participation** in programs because of crises, illness, emotional withdrawal and the like. With information from children in the program, or possibly neighbors, staff can contact and encourage them through home visits.

A Metis respondent suggested that home visits for some parents are effective if they are more **intensive**. As an alternative to apprehensions and/or office-based teaching, the safety of children in some homes is better assured through longer

visits, possibly by more than one staff, for more days at a time. Her rationale is that this “home-maker” or “home-builder” model is more appropriate for families needing constant interaction, observation, role modeling and support to help build structure in their lives.

Algoma CAS’ Parent Mutual Aid Program is one of many programs across Ontario with home visitation as a core program component.

RESPITE CARE

Staff in different types of programs believe that providing opportunities for parent relief is an effective contribution to preventing child maltreatment. It does this primarily by contributing to **relief of stress** in families exposed to such stressors as poverty, large families or parenting inexperience. With secure, steady opportunities for relief, there is less frustration. They are less likely to take personal issues out on children.

As well, respite care opportunities help to bring **socially isolated parents** into the community, particularly if other activities are available. Finally, with stress relief and interaction with staff or other parents, there is opportunity for **problem-solving** through referral, staff counsel or natural advice. In the words of one respondent: “... **they will attend (other programs) regularly after having a trusting comfort level ... some parents have a need for counseling in a safe environment**”.

There is a risk that respite care opportunities will be abused by people looking for inexpensive baby-sitting. This can be avoided, though, with appropriate policies, internal resources or linkages to other programs.

Parent relief can be provided through

- **Drop-in programs**
- **Day care**
- **Customary care**
- **Early intervention programs (eg. Aboriginal Head Start)**

A program staff member spoke of Maureen, a young sixteen year old parent who loved kids. She ran into problems with alcohol, as well as an “on-again, off-again” partner who would visit and leave her pregnant. She was very busy with her kids, and often felt that “she was going crazy”. Parent relief in the program helped, but she didn’t know what to do with her spare time. The pressures of parenting had not allowed her to organize herself to meet personal needs and complete other tasks. The staff helped her to plan her spare time and get things done...

SUPPORTIVE ROLES FOR PREVENTION INTERVENTIONS AND PRACTICES

Program experience and research in recent years indicate that services provided in isolation are neither effective nor efficient. The Ministry of Community and Social Services has indicated that a “co-ordinated set of services” for families and individuals is one of several goals in a new policy framework.

The Aboriginal holistic philosophy and cultural emphasis on the importance of relationships marks a clear cultural compatibility with this goal. Traditional tribal communities depended for their survival on close interdependence and cooperation. Today, several organizational arrangements in rural First Nation and urban communities attest to the value placed on coordinated service delivery. These include: local family support and child welfare committees (Eg. Ojibway Tribal Family Services, Weechi-it-te-win Child and Family Services), integrated service models (Dilico Child and Family Services), partnership projects (Native Child and Family Services), and Friendship Centre-based family support and other services.

Our consultations with key informant service providers indicate that preventing child maltreatment and avoiding the need for intrusive child welfare is a community-wide endeavor. There is enormous reliance on a network of collaborating resources. Recent evaluations confirm this fact. What is now needed is a documentation of the interdependence of prevention services with other local resources.

This section seeks to describe the interconnections between prevention services and other community resources, both Aboriginal and non-Aboriginal. Information is summarized for each intervention category described in this report.

Cultural Revitalization and Traditional Healing

Cultural education practices and traditional healing primarily relies on the contributions of Aboriginal cultural or traditional specialists, or spiritual Elders. According to tradition, one presents all Elders with tobacco upon requesting their help. Some are also given a stipend or per diem; others donate their time or charge a fee for service. Otherwise, when payment is required or offered, funding usually comes from a program or project operational budget. Payment may also come from donations from participants. For example, at a recent Sweat Lodge healing ceremony organized by an Aboriginal Head Start program, participants paid \$20 each for the Elder, and \$20 each for the Fire Keeper.

The **supportive roles of Elders** in cultural education, traditional healing services

or other cultural revitalization activities are as follows:

- Program development consultation
- Participation in program activities
- Participation on Boards or Committees
- Teaching traditional culture, particularly family life, child-rearing, etc.
- Conducting traditional ceremonial events
- Conducting traditional healing: sweat lodges, counseling, healing circles.

Parent Education

As we have seen, parent education as preventative intervention seeks to improve the quality of parenting. It does this primarily by sharing specific knowledge (eg. child development), techniques (eg. child-rearing, nutritional cooking), and principles for assuring the child's safety and well-being.

Our consultations clearly indicate that effective parent education relies on a host of Aboriginal and non-Aboriginal community resources and supports. In fact, the trend in parent and children's programs is to embed "education" in a much broader family support system. This holistic delivery perspective is fed by the recognition that parent-child interaction is nested within family group and larger community influences.

Our learning circle parent education advisors identify the following sources of supports for their parent educational activities:

- Traditional resource people: Elders, cultural specialists, seniors
- Substance abuse specialists
- Child development and problem specialists
- Health professionals: consultants, health centers
- Nutritionists
- CAS personnel
- Family support services

Resource personnel who assist with training contribute the following:

- Curriculum development
- Advice on curriculum resources
- Participation in delivery of training: co-facilitators
- Baby-sitting

Cultural specialists and seniors contribute their knowledge of culture and traditional family life and child-rearing, including family life standards and parenting. Depending on the needs of the program, traditionalists may also advise parents on traditional medicines, Aboriginal foods and nutrition.

Health professionals give talks or advice on special topics, like HIV, lice, nutrition, or message therapy for children.

In some instances CAS staff co-facilitate, to provide appropriate parent training for parents with children in care.

Although family support personnel may not be directly involved in training, they are available to parent education staff for consultation around special problems or referrals.

Finally, for off-reserve communities across Ontario, the Ontario Federation of Indian Friendship Centers (OFIFC) provides numerous supportive functions for parent education and other preventative interventions. Through their administration and co-ordination of many programs (Aboriginal Family Support Program, Aboriginal Healing and Wellness Coordinators Program, and Aboriginal Health Outreach Workers Program, and others), OFIFC and its various Program Co-ordinators provide (i) administration development
(ii) consultation concerning design, development, delivery and evaluation
(iii) field visit support, and (iv) local, regional and provincial training

Customary Care

Customary care is one intervention which relies on other supportive resource people for its success. Apart from the natural sources of help from the community (eg. Extended family members, community members) who may be involved in the process with the original family, the program heavily relies on the availability of a pool of **Customary Care parents** who are available for child placement, often at short notice. Those involved in Customary Care programs spend much of their time in securing the most appropriate families.

The roles of Customary Care parents are as follows. They

- participate in assessment concerning their suitability as a home
- receive orientation and training concerning their general roles, and roles specific to in-coming special needs children (eg. Abused, neglected, other special needs)
- provide family setting and parenting for children; integrate new children into family
- liaise with Customary Care staff and specialists, if necessary
- liaise with children's natural parents, possibly providing informal counsel and parenting advice.
- assist with re-integration of child back to natural family.

Depending on the local communities and the accessibility to other resources, effective programs are supported by

- local community committees: community representation, advice, problem-solving, and emergency care
- regional Aboriginal child welfare organizations or local family service personnel: recruitment, orientation and training, child placement, follow-up support to both families, re-integration of child
- clinical specialists: specialized help to children and families treatment clinics or parent educational specialists

As indicated in a previous section, the success of Customary Care depends on the availability of resources to help the child's original family during the temporary placement. As well, since some placements evoke negative community dynamics, there are important contributions that can be made by local community members (eg. Chief and Council, the police, extended family members, local tribunals or other peace-making bodies, and others) to contribute to an orderly process.

CHILD PROTECTION: PRACTICES AT TIMES OF CHILD ABUSE OR NEGLECT

Aboriginal people believe that building strengths or wellness in communities and families is the best answer to the question of how to protect children. The

implication is that by building strong communities and families, there are no instances of child maltreatment and therefore no need for protection.

However, since every community may at times fall short of this ideal, what arrangements can be made to protect children? This question was put to the Elders in our learning circle. Some general themes emerged: Most opposed intervention by Children's Aid Societies before the Aboriginal community had an opportunity to take immediate steps to help the family. Several argued in favor of removing the perpetrator of abuse rather than the child victim. Nearly all favored a culture-based teaching and healing approach to help parents become better parents, strengthen their family life, and develop more appropriate problem-solving skills.

The specific suggestions for Aboriginal community-based interventions included the following practices:

Local community staff interventions

- through home visitations
- using traditional, culturally-appropriate practices and natural processes
- respecting confidentiality and establishing a safe atmosphere
- working indirectly by encouraging relatives or other community members to influence the parents
- talking to the parents, telling them neglect or abuse is wrong

Parent and family life education

- Elders become involved in teaching
- giving attention to such topics as: parenting techniques; showing true feelings; crisis resolution; and helping themselves.

Mobilization of extended family members who may ...

- Stay with family during crisis
- Help the family learn the value of problem-solving
- Open their homes for children during crisis, and contribute to child-rearing

- Teach that child maltreatment is wrong, and remind parents of their obligations as parents
- Work with staff to develop a planning strategy for keeping the family together

Intervention by traditional helpers

- Called on by workers, with family's request or agreement
- Cultural specialists, Elders or Medicine people
- Provide help through specific advice about the crisis; ceremonies; talking circles; sharing experience and knowledge; cultural and historical teachings; and guidance to children
- With back-up from safe-house

Working with child protection authorities

Even though Elders emphasized that families must remain intact, and that children should not be taken from the community, a handful spoke of the need for back-up child protection support from their local Children's Aid Society. However, any mainstream interventions must be adapted and integrated with local culture and services, which would allow

- co-operative, but immediate, investigations of serious cases which have not responded to local assistance
- the use of local family safe-houses
- the development of local policies, protocols and procedures with the C.A.S.
- the use of foster homes in particularly dangerous family situations, without labeling them as part of child apprehension

ENHANCING THE IMPLEMENTATION OF INTERVENTIONS

All human service planners and staff face challenges when putting into place a new program. Research has shown that implementation challenges come from a variety of sources. Research has also demonstrated that community members are excellent sources of wisdom concerning challenges. As well they are good sources of information about how improvements can be made so as to enhance effectiveness. Our learning circle participants were asked for suggestions concerning challenges and

possible improvements in the delivery of various prevention initiatives. Their responses can be grouped into the following recommendations and themes:

Services

- Holistic service approach in which all contributing issues are addressed
- More children-focused activities to balance initiatives for parents
- In abuse cases, focus on the perpetrators and not the victims
- Northern community services should include social and recreational preventive programming, to balance crisis-oriented services
- Youth programs:
 - include social and recreational opportunities, and nurturing environment, to respond to issues of lack of facilities and boredom, and missing nurturance in the family.
 - reach and involve particularly difficult youth who may develop serious and costly problems in future generations; both on- and off-reserve
 - consider ideas from USA “youth gang” models
- Services should empower the people

Staffing

- Staff training and learning to include technical, cultural, and personal development
- Staff attitudes and behavior: emphasis on outreach, and community presence.
- Youth programs:
 - special leadership required to (i) command respect (ii) assure that youth buy into, and help run the program and (iii) train youth leaders (Eg. mentoring) for future programs.

Service Development and Organization

- Slower pace of development
- Know program limitations; don't try too much

- Avoid excessive case loads
- Local integration of services and programs
- Promote awareness in non-Native society
- Encourage client choice of services

Utilization of Cultural Education and Traditional Methods

- Recognize that traditional methods do not provide quick fixes: “For some families, change is a long path!”
- Utilize Elders
- Encourage client choice of traditional or cultural education methods

Funding

- Enhancement of existing programs through funding; in some situations, increased staffing is needed.
- Funding approaches which integrate local service delivery; cost-effective
- Support of healing for families with children in care
- Support for social and recreational facilities and programming

Supervision

- Case management: careful supervision to assure consistent following of service plans
- Field-based support by MCSS; early identification of financial problems

Community Involvement and Support

- Community-based solutions
- Community education and awareness of issues and programs
- Community input and participation in the program
- Community trust-building

- First Nation leadership acknowledgment of local issues, and support of important values
- Separate services from local politics
- Reduction of community divisions; political process creates divisions
- Expect ethical behavior and accountability from politicians and Elders

Program Evaluation

- Insufficient program evaluation: outcomes are unknown; demonstration projects are unavailable for learning in other communities
- Ethical objective assessments of service should be done which include service delivery providers in the process
- Evaluations must be done which focus on program success with difficult clients

Societal Changes

- Native justice system
- Native child welfare act

