

**Consolidated Notes**  
**Dr. William Bell's Presentation**  
Bosco Homes, May 30, 2012

**"Every child needs a community of hope" quote by Dr. William Bell**

Questions:      One thing that would make this morning a success? and/or  
One thing that must change in the way the current system works for young people  
to have a greater sense of hope for a productive adulthood?

The philosophy, ultimate goal and strategies developed need to support:  
**"child/family success leads to successful adulthood"**

The pull of history is powerful! We need to recognize it, understand it and make conscious effort to change it. Historically, we have separated the child from the family and the child/family from the community. We need to re-think the paradigm to one of inclusiveness that sees the child/family and community as a whole - as the "client". (see diagram at bottom of the report)  
To have successful adults, children need a healthy family that is supported by a healthy community. If the community is not able to support families, it needs to become healthy and work needs to be done to support the community to re-build/become stronger. *(This is a concept that was also raised and identified by Dr. Bob Lonnie when he was here in November 2011.)*

There are multiple decision makers/stakeholders: federal government, provincial government, tribal government, contracted agencies, other ministries (health, education, justice) and community players that need to be included in the discussions and conversations, as to how to best achieve the desired outcomes of young people becoming successful adults.

Questions were asked as to the things that must change in the way the current system works:

- For young people to have a greater sense of hope for a productive adulthood? and
- How to support parents to do a better job?

The discussions focused upon ideas/strategies in three broad based areas that require attention:

- Work being done directly with families and children;
- Work within agencies
- Work within the sector and
- Work across traditional boundaries to include the broader community i.e. other ministries that influence and/or have impact upon children and families, schools, community groups etc.

About 25% of foster care alumni suffer Post Traumatic Stress Disorder (PTSD); nearly double the rate of U.S. war veterans.

***Findings from the Northwest Foster Care Alumni Study***

by Pecora, Kessler, Williams, O'Brien, Downs, English, White, Hiripi, Roller White, Wiggins, and Holmes,

April 2005

**To improve the work being done directly with families and children:**

- Honor the family
  - Believe in the individual
  - Value fathering
  - Increase connections to family and community
  - Earlier re-engagement of children with their families - while they are still in care, as most return to and/or re-connect to someone within their family, at some time
  - Mentorship, advocacy and stronger focus on supporting fathers
- Honor culture
  - Kids don't know where they come from, their history or how they are connected to the past
- Stability + attachment leads to healthy adults
  - Children need a sense of belonging
  - Stop moving kids around
  - Keep siblings together
  - Strong, healthy relationships for youth need worker stability
- Transitioning
  - Better follow-up after a "move"
  - More "intentionality" when working with/helping youth to transition to adulthood
  - Make the future real for children/youth – need for positive role models- seeing people making a difference who look like them and understand them (not just lip service)
  - Teach life-skills, avoid dependency
  - More support from CFSA to help with transition
  - After children leave care, they don't have anybody to support them
- Permanency
  - Reduce time spent in care through the support of kinship/reunification initiatives
  - "System abandonment" – don't be so quick to close the file when a young person AWOL's
    - Kids are abandoned too early, while in care, by the system

**Work within agencies:**

- Balance data/outcomes work with the direct work with kids – both are important
- Staff/foster parents and young people need to be inspired
- The staff/child ratio needs to be a level to allow for on-going relationships and support

**Work with in the sector:**

- Increase prevention to avoid placement – increased funding for prevention/early intervention
- Build alliances
  - Better communication, cooperation and collaboration
  - A community of agencies working together to improve foster care
- Change is not outside of us - "We" are the system
  - It is not a "we/ them"; it is "all of us"
  - We, on the contract side, need to shape the future

- Learn to embrace change.
  - Don't allow fear of loss to cause us to miss the opportunity to improve
  - Need to get "unstuck"
  - Embrace the roll-out of Outcomes Based Service Delivery (OBSD)
- Renewed sense of purpose:
  - Honor foster parents – recognize the good work that they do
  - Stay positive and work to keep other people positive – staff, foster parents, clients etc
- Improve staff training/social work education

#### **Work across traditional boundaries to include the broader community**

- We can't change the past but do have the power to influence the future.
  - Blaming doesn't help.
  - We need to control our anger and/or defensiveness (depending upon our position) when trying to move issues forward
- Fostering/nurturing of communities so that they can help families – i.e. kinship
- Improve education, training opportunities for people working with families and children
- Need for a better understanding of Aboriginal history and impact – understanding of the interconnections between youth/family, child protection, courts, health education, other (need to be represented in overlapping circles)

#### **What are the next steps?**

- Putting ideas/concepts from today into action
  - Take these new concepts /ideas to take back to staff/youth
  - Transition "forward thinking" into the agency and sector
  - Need to "push the shift" – from "thinking" on into "action"
- Continue the dialogue – conversations with partners/government/and the community at large
  - Include the community (schools, faith groups, voluntary organizations) with our work
  - Put more effort put into connecting with schools and community
  - Train frontline staff in the "how" of community engagement
  - Talk to families, other agencies and community groups about challenges and opportunities
- Multiple components/sectors involved
  - Recognition that people see things from different perspectives based upon their role, place in the system, beliefs, values and background
  - Different perspectives need to be honored:
    - We have the same goal of assisting in the development of "healthy adults", and
    - Different perspectives allow for more creativity and innovation
  - Identify and address the barriers to providing services i.e. bureaucracy, forms, repetition of "having to tell the story " ; sharing of information, unreasonable "rules", practices and/or policies etc.
  - Foster positive relationships – with family/staff/foster parents/other agencies

- Look at how we engage families :
  - Shift the nature of the discussions with families – engage people in discussions about what is going on and what help we can provide – work together on issues
    - Reduce the trauma of past experiences
    - Give power/control back to the family
    - Family involvement pre and post placement
    - Re-connect children to family earlier in the process and make it more of a priority
    - Support connections with family, extended family members and community people
  - Examine the perceptions held by those who are in the role of helper about: the biological family/mother/father/extended family/community
    - What assumptions/values are currently being held and why?
    - Are they accurate? Helpful?

**Dr. Bell, in a presentation May 29<sup>th</sup> to ministry staff outlined the following direction/suggestions to implementing change and revamping the future:**

1. There needs to be “Political Will”
  - a. The message is “child and family success = successful adults”
2. Engage the folks most impacted – children and families
3. Have planned conversations
  - a. What would you like to see different?
  - b. What can we do differently (especially families and stakeholders)?
  - c. How can you help us?
4. Develop a clear plan of action
  - a. Plan to educate the leaders
  - b. Develop a framework
5. Create a planning committee
  - a. Need the right voices
  - b. Inclusion of Indigenous groups/government
  - c. Involve government and non-governmental leaders
  - d. Contracted and non contracted agency leaders
6. Create a cross-government systems planning committee
  - a. Include people from health, education, justice, housing, employment, financial assistance
  - b. Build coalitions with intentionality
7. Data driven decision making:
  - a. Evidence of successful outcomes
  - b. Promising trends – data from newer initiatives (i.e. OBSD)
  - c. Innovative initiatives that may lead to promising trends/successful outcomes

**“Power concedes nothing without a demand or a struggle”,**  
Frederick Douglass, American Abolitionist, lecturer, author and slave (1817-1895)

The full quote is:

*"Power concedes nothing without a demand. It never did and it never will. Find out just what any people will quietly submit to and you have found out the exact measure of injustice and wrong which will be imposed upon them, and these will continue till they are resisted with either words or blows, or both. The limits of tyrants are prescribed by the endurance of those whom they oppress."*

\*Diagram from Dr. Bell's presentation representing the interconnectedness and the child/family/community as the client:

