

**IN THE MATTER OF: Commission of Inquiry into the Circumstances
Surrounding the Death of Phoenix Sinclair**

**AFFIDAVIT OF ALLISON LAMONTAGNE
SWORN the 11th day of May, 2012**

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**IN THE MATTER OF: Commission of Inquiry into the Circumstances
Surrounding the Death of Phoenix Sinclair**

AFFIDAVIT OF ALLISON LAMONTAGNE

I, ALLISON LAMONTAGNE, of the City of Winnipeg, in the Province of Manitoba,

MAKE OATH AND SAY THAT:

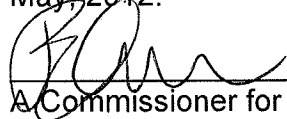
1. I am a legal assistant at Aikins, MacAulay & Thorvaldson LLP, lawyers for the Canadian Broadcasting Corporation, CTV Winnipeg, Global Winnipeg and the Winnipeg Free Press. As such I have personal knowledge of the facts and matters deposed to by me.

2. Attached hereto as Exhibit "A" is an article written by Bruce Rivers, Nico Trocmé, Deborah Goodman and Inder Marwah dated November 2002 entitled "Reporting and Beyond: Current Trends in Child Abuse and Neglect call for Broader Reforms."

3. I obtained a copy of this article on the internet at the URL <http://www.hawaii.edu/hivandaids/Voices%20for%20Children%20Child%20Abuse%20and%20Neglect.pdf>.

4. I have reviewed the material filed in respect of certain motions respecting publication of the proceedings before the Commission of Inquiry into the Circumstances surrounding the Death of Phoenix Sinclair. That material includes two Affidavits of Bruce Rivers. Based upon a review of the identification information in Exhibit "A" and the Affidavits of Bruce Rivers, it is clear that Exhibit "A" and the affidavits were authored by the same Bruce Rivers.

SWORN before me at the City)
of Winnipeg, in the Province of)
Manitoba, this 11th day of)
May, 2012.)


_____)
A Commissioner for Oaths in and)
for the Province of Manitoba.)

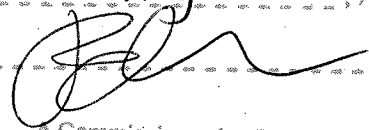
My Commission expires: 2013/06/16



ALLISON LAMONTAGNE

Voices for Children
Child Abuse and Neglect: Concerning Trends
and Child Welfare Response in Ontario

This is Exhibit " A " referred to in the
Affidavit of Allison Lamontagne
SWORN before me this 11th day
of May, A.D. 2012



A Commissioner for Oaths in and for
the Province of Manitoba

My Commission expires 2013/06/10

Reporting and Beyond: Current Trends in Child Abuse and Neglect Call for Broader Reforms

By Bruce Rivers, Nico Trocmé, Deborah Goodman & Inder Marwah

Introduction

The abuse and neglect of children is a serious and persistent problem. In recent years, there has been a dramatic increase in the number of children requiring the attention of child welfare agencies. Children experiencing neglect and exposure to domestic violence now make up the fastest growing group. There has also been a rise in the complexity and severity of problems being experienced by children. Several developments help to explain these trends: public awareness and media scrutiny have increased; more professionals are reporting their concerns; and legislated changes have broadened the scope of intervention for child welfare. Even though funding to child welfare has increased, it has not kept pace with the growing demands. At the

same time, other essential community supports such as education, children's mental health, and social housing continue to experience significant service, staffing and funding constraints.

This article presents information about the increase of reported and substantiated child abuse and neglect cases over the past few years in Ontario. It is based on the findings of the Ontario Incidence Study of Child Abuse and Neglect (2002) and highlights the experience of the Children's Aid Society of Toronto (referred to as Toronto CAS) as it responds to this growth. Several service innovations and other models will be reviewed as well.

This article aims to serve both as a reference document and as a vehicle for stimulating further discussion and action on these pressing issues. Broader reforms including new service approaches and community-based partnerships are vital to addressing the critical situation. Children's safety and well-being depend upon it.

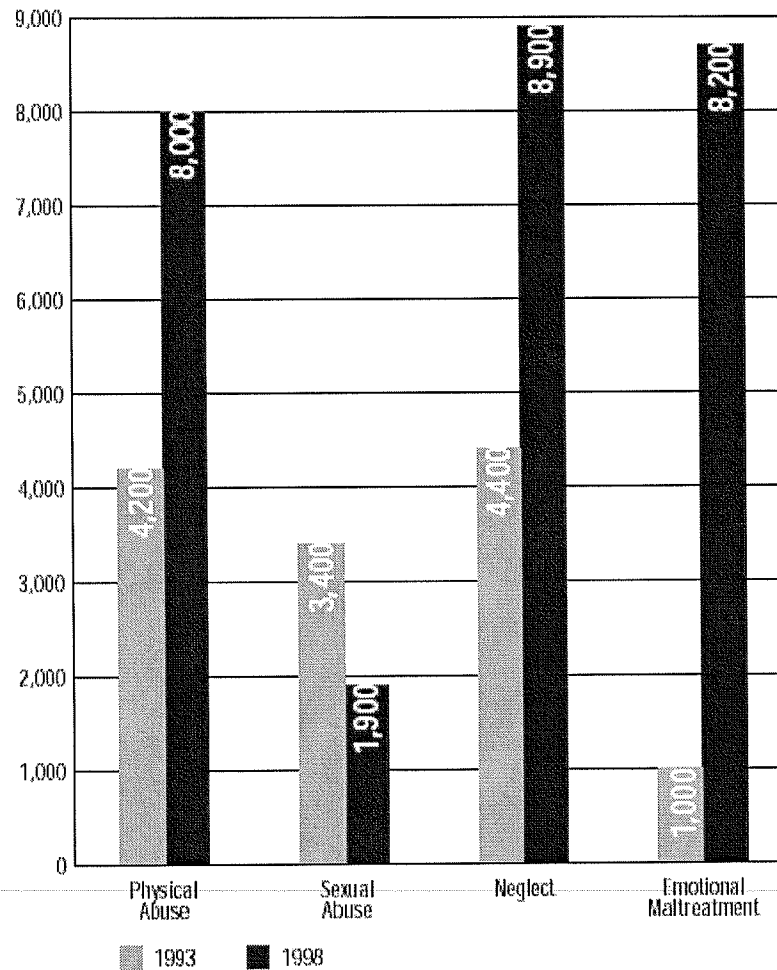
How Big is the Problem of Child Abuse and Neglect in Ontario?

We can only speak to the number of children who come to the attention of child welfare. Children, for example, whose abuse is not reported or is not known, are not included in the following information:

Trends in Child Abuse and Neglect in Ontario: 1993-2002

- Between 1993 and 1998, the estimated number of children living in Ontario who were suspected of being abused or neglected and were investigated by child welfare increased 44%. This means there were 64,800 children brought to the attention of child welfare in 1998, as compared to 44,900 in 1993.
- Between 1999 and 2001, the number of protection investigations by Toronto CAS, for example, rose nearly 70%, from 4,916 cases in 1999 to 8,262 in 2001. The overall number of families served increased 25%.
- In 1999, two-thirds of protection cases at Toronto CAS were rated as having High (25%) or Moderately High (43%) risk levels; by 2001, three-quarters were rated High (29%) or Moderately High (47%). This suggests that the risk of future harm to children investigated for maltreatment is both increasing and is being assessed at a more serious level.
- The increase in child maltreatment investigations in Ontario is primarily driven by neglect and exposure to domestic violence:
 - In Ontario, the number of substantiated investigations of neglect doubled between 1993 and 1998, rising from an estimated 4,400 investigations to 8,900.
 - In the same time frame, rates of emotional maltreatment rose 870%, an increase largely driven by investigations involving exposure to domestic violence.

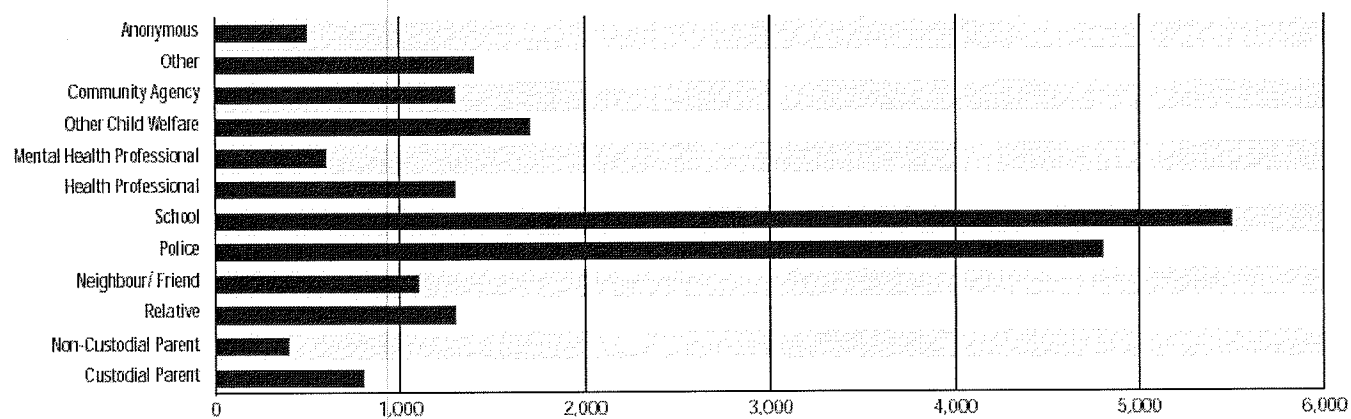
Major Forms of Substantiated Maltreatment in Ontario, 1993/1998



Source: OIS 1993/1998, Tables 2a-2d

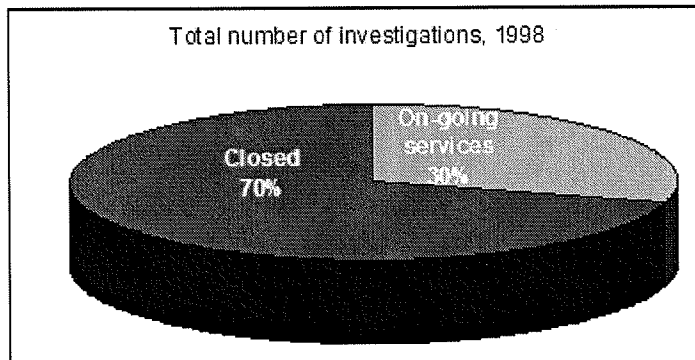
- At Toronto CAS, adult conflict or domestic violence cases made up an average of 470 cases per month in 2001. In 1999, the average was 100 cases a month.
- Increasing numbers of children in Ontario are coming into the care of child welfare agencies: while 10,419 children were placed in foster care in 1996, this rose to 15,792 by March 2001.
- Some of the increases in child maltreatment investigations can be attributed to the effects of the Ministry of Community, Family & Children's Services Child Welfare Reform initiative (1998), including amendments to the Child and Family Services Act (1999) that broadened the scope of investigations.

- In addition to these policy reform changes, an increase in the child poverty rate, a rise in homelessness, a paucity of social housing, and diminished social supports exacerbated the impacts of these changes.
- New immigrant families continue to be especially vulnerable to poverty and the risk of homelessness due to their considerable settlement needs and difficulty in securing appropriate and affordable housing. Toronto, for example, remains the most popular destination for immigrants to Canada. In 2002, Toronto CAS served families representing 136 different countries of birth and 67 languages. Children living in poverty are more vulnerable to the many risks associated with being poor.
- Reports from professionals account for most of the increase in investigations. In 1993, just over 50% of referrals were reported by professionals, while almost 75% of all 1998 investigations originated from professional referrals. In cases involving domestic violence, the influence of professionals was even more pronounced, with almost 90% of all investigations arising from professional referrals.



Source: OIS 1998, Table 8-1

- The number of substantiated investigations with families who had previously been involved with a CAS increased 129%, from 6,200 in 1993 to 14,200 in 1998. Most cases (68%), however, were closed at intake, raising concerns about the possibility of a "revolving door" syndrome, whereby families are reported, brief investigations are conducted and cases are closed without sufficient services being provided to resolve the underlying problems that led to the report.
- Between 1993 and 1998, the number of substantiated investigations resulting in a decision to provide ongoing services doubled, from 5,200 to 10,900.



Source: 1998 Ontario Incidence Study of Reported Child Abuse and Neglect, p.63
<http://www.cccw-cepb.ca/DocsEng/OIS1998Report.pdf>

Beyond Reporting

The increase in investigations and subsequent admissions to care, along with concerns about the low proportion of cases receiving ongoing services, are pressing issues across North America. In response to these challenges, new models of service delivery are emerging. These models focus on engaging community services more effectively and diverting cases from the potentially adversarial protective investigative process as well as expanding permanency options for children who cannot safely remain with their families. New service directions being taken by Toronto CAS will be reviewed and Alberta and Missouri models are highlighted.

Children's Aid Society of Toronto

Toronto CAS (www.torontocas.ca) has been experimenting with innovative approaches to service in response to the dramatic increases and to circumvent some of the difficulties associated with traditional models. As noted, the increase in child maltreatment investigations in Ontario is primarily driven by neglect and an increase in reported emotional abuse due to exposure to domestic violence. As a result, Toronto CAS has focused on developing a variety of approaches to better support children, families and the agency staff who deal with these enormous challenges on a daily basis.

Direct Service Initiatives

The initiatives detailed below are just some of the differential responses that have been developed over the last few years. Further, staff at the Toronto CAS and their counterparts through the Ontario Association of Children's Aid Societies (OACAS) are working on Best Practise Standards to guide our work with children who have suffered emotional abuse as a result of witnessing domestic violence. New working protocols with community partners such as the police and crown attorneys as well as community based agencies are an important aspect of this work in progress.

***Issue:** There is an inverse relationship between the increased funding to child welfare and cuts to other front-end services in Ontario, such as children's mental health centres, education, health and addiction sectors. This has placed even more expectations on child welfare to fill and meet those service gaps. Family Group Counselling is one response that is intended to help families who need assistance while providing for the safety and protection of the children.*

Family Group Conferencing

This collaborative approach has been jointly developed and delivered with the George Hull Children's Mental Health Centre and the Toronto Catholic CAS. Through specially trained staff, the program enlists the relatives and friends who best know the family and the child being served in the planning process. This type of intervention has been successfully applied with both protection and non-protection case situations including those involving domestic violence. Considerable staff effort is expended with pre-conference organizing and coordination leading up to the actual Family Group Conference. It may take up to a day for the family grouping to complete the plan which integrates efforts to advance child and adult safety and strengthen family unity. Participants are provided with refreshments, meals, travel arrangements and consultations with professionals.

***Issue:** Living with their family remains the best place for most children to grow up, but when that is not possible, permanency and familial ties need to be considered and explored in developing the best long-term plan of care for the child. Toronto CAS has developed a permanency model recognizing both the importance of adoption and kinship care as well as the fact that supports and financial assistance need to be in place to ensure the best chance for a successful permanency plan for the child.*

Permanency Options

Adoption recruitment efforts include the development of the Toronto CAS website to profile waiting children and to reach out to more prospective adopters. Greater emphasis on concurrent planning for children; increased focus on the development of open adoption plans so that birth family ties can be maintained where in the best interests of children; and the development of a post adoption program to provide ongoing support are key to better outcomes. As well, the promotion of an adoption subsidy program to assist in the recruitment of adoptive homes for children with special needs is a critical component of this permanency approach.

Kinship care is defined as the full-time nurturing and protection of children by relatives, members of their bands, tribes, clans, sects, or god-parents or to whomever a child, a child's parents or family members ascribe a "family" status.

As a permanency option, kinship care is a means of parenting children who cannot be cared for by their own biological parents. It differs from foster care in that it involves supports and services that allow children to remain with whom they may have had previous familial and/or affectional

ties. To enable the provision of kinship care, it must be understood that agency services may be required that involve varying levels of support including economic assistance, counselling, specialized health services, day care or other supports which may be required over the period of time a child is a dependent. Through this program, natural family ties are enhanced and supported and the child is eligible to receive agency service but need not necessarily remain in the care of the State. To accommodate this child-focused approach, funding must be flexible and follow the child regardless of legal status.

***Issue:** Family foster care remains the preferred choice for children who are admitted to care on a temporary basis. However, over the last half-decade, the foster care system has struggled to meet the demand of increasing numbers of children entering care, children with more challenging problems and the need for foster families to better reflect society's diversity. Child welfare agencies in and around Toronto have responded to the foster care system deficits by rethinking recruitment and retainment of foster families from an empowerment, collaborative approach.*

Homes for Kids

This Central Region Foster Care Project includes Durham, Peel, York, and Simcoe CASs plus the three Toronto CASs (Toronto, Catholic and Jewish). It is a collaborative effort that is designed to support and enhance the valuable work of foster families and promote retention through comprehensive training opportunities. It employs foster parents as service ambassadors to provide peer support within the agency and recruitment and retention services beyond the agency. Additionally, the project ensures equitable and prompt payments to foster parents along with support and assistance during a crisis. The first phase of joint foster parent recruitment and screening was launched in 2002.

Staff Development and Case Management Initiatives

***Issue:** With growth in service demand and complexity, Toronto CAS needed a training program that provided immediate, comprehensive and supportive on-site training opportunities to its growing complement of new front-line protection staff. A protected caseload during training and retainment of new staff were also important considerations. The New Worker Training Team was created in 2002.*

New Worker Training Team

The goal of the New Worker Training Team is to assist with the initial three-month training of child protection workers and to provide them with a protected work environment where they can focus on completing their initial training in a supportive learning milieu. Key elements in this new training approach are a team-based approach, close mentoring of the new workers by senior case workers, a limited caseload, intensive OACAS and in-house training, and exposure of the new staff to the breadth of the agency's programs.

***Issue:** A few years ago, an initiative called the Peer Support Team was launched to address an increase in critical incidents, stress and trauma in the workplace. After examining similar approaches in hospital and police settings, current staff were recruited to provide expert, volunteer counselling services to staff. Five years later, this service is not only an important and valued option for staff but this concept is being embraced by other agencies throughout North America.*

Peer Support Team

The Peer Support Team is an agency supported employee assistance type service that is offered free of charge to staff by CAS employees trained in trauma counselling and debriefing who volunteer to provide the service. Service recipient confidentiality and anonymity are hallmarks of

the program. It is well used by agency personnel, most often around work related issues, such as a death of a child or an assault.

***Issue:** Workload issues and extended boundaries of the CAS workplace both in time and space remain constant problems in the management of staff time. Toronto CAS recognizes that staff are experiencing difficulties in achieving documentation requirements due to multiple demands and systemic restrictions. Additionally, these tasks are distracting from face to face contact with clients. The following projects are an attempt to harness technological applications in support of service.*

Voice Recognition & Remote Access

Voice Recognition is a pilot stage project that allows staff, through the use of specialized software, to dictate and have the computer transcribe document formats. The sister project, Remote Access, is also being pilot tested. It is an alternative work management tool that employs a web-based system to allow staff to have secure and confidential access to work documents from venues other than the on-site office.

Alberta

At a broader, province-wide level, Alberta has been moving towards the implementation of a new model for delivering child welfare services. Three key components are:

1. a differential response intake process that refers non-urgent cases to a community-based family service system;
2. a renewed focus on permanency planning for children in long-term care; and
3. the development of community service partnerships.

The Alberta Response Model (ARM) is in its initial implementation phase, with each community developing its own model.

(<http://www.child.gov.ab.ca/whatwedo/albertaresponse/page.cfm?pg=index>) Jurisdictions across Canada are following with interest the province's evaluation of the implementation and impact of ARM.

Missouri

A number of jurisdictions in the United States have developed similar differential response models. For instance, reforms initiated in Missouri in 1994 involving a two-track approach have shifted approximately 80% of cases away from child protection investigations into a family assessment track (<http://www.iarstl.org/papers/MoFamAssess.pdf>). Cases involving serious physical and emotional abuse, and all cases of sexual abuse are the subject of full child protection investigations. Less severe cases of physical abuse and cases of neglect are handled through the family assessment stream. The focus of the family assessment track is to link families with other community resources and provide services that address underlying problems in the family, rather than focussing uniquely on the incident of the report.

This model has proven to be effective in lowering rates of recidivism and decreasing the amount of time that children spend in placement. The initiation of service activity occurs significantly

faster than it had under previous models, and greater levels of cooperation and coordination between social workers and community resources have occurred.

Conclusion

Child welfare caseloads are increasing across Ontario. A significant growth in reporting and a shift in the types of maltreatment being investigated and substantiated underlie this increase. Exposure to domestic violence has grown nine-fold and the proportion of neglect investigations has more than doubled. These trends point to three sets of issues:

1. The importance of a differential response at the point of first contact with child welfare systems that is sensitive to various forms of maltreatment. Protection investigations that are appropriate in cases of sexual abuse and severe physical abuse, for example, may not be the most appropriate model for cases involving neglect or domestic violence.
2. The importance of permanency planning and options that respect every child's need for a family.
3. Child maltreatment in its various forms requires a response that reaches beyond the authority of child welfare, and engages families and the community within which they live.

The child welfare reform focus of the future must expand beyond the immediate safety needs of children to encompass ongoing support and permanency options that are both family and community connected. This commitment to reform must be founded in integrated community-based models of service and support.

Bruce Rivers, BA, MSW is the Executive Director of the Children's Aid Society of Toronto and the President of the Child Welfare League of Canada. He is also a member of the Advisory Board to the Canadian Centre of Excellence for Child Welfare and was recently appointed to the Executive and Board of the International Forum for Child Welfare, based in Brussels. Mr. Rivers has worked in a variety of frontline, supervisory and senior management positions throughout his twenty five year career in child welfare. Contact: brivers@torontocas.ca

Nico Trocmé, MSW, PhD, is The Margaret and Wallace McCain Family Chair in Child and Family, Associate Professor of Social Work at University of Toronto and the Director of Centre of Excellence for Child Welfare. Dr. Trocmé's research includes the 1998 Canadian Incidence Study of Reported Child Abuse and Neglect, the development of an outcomes tracking framework for children receiving child welfare services, and analysis of child welfare service trends. Prior to completing his Ph.D., Dr. Trocmé worked for five years as child welfare and children's mental health social worker. Contact: nico.trocme@utoronto.ca

Deborah Goodman, MSW, RSW, PhD, is the Research & Quality Improvement Supervisor at the Children's Aid Society of Toronto. Most recently, Dr. Goodman completed the 2002 Ontario Association for Children's Aid Societies Workload Measurement Study; she is one of the contributing authors of the Eligibility Spectrum, a child welfare eligibility tool that is mandated for use across Ontario. Dr. Goodman has twenty years of direct practice, teaching and research experience in the child welfare field. Contact: dgoodman@TorontoCAS.ca

Inder Marwah, BA, MA is a research associate at the Centre of Excellence for Child Welfare at the University of Toronto. He is currently gathering and disseminating child welfare related research from the Centre of Excellence Child Welfare projects across Canada to improve access to current information and innovations for both professionals in the field and for the larger public. Contact: inder.marwah@utoronto.ca

References and Resources

Alberta Response Model:

<http://www.child.gov.ab.ca/whatwedo/albertaresponse/page.cfm?pg=index>

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