

aah chishtipistihch awaash-uschiniichisiu
sikischaayimuwiniiyu
Cree Youth Protection Commission

MAAMIINUPITIHTAAU: The Final Report From the Chaashtipishtihch

Bella Moses Petawabano
Lorraine Spencer

September 2025



A project proudly led by:



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CONSEIL CRI DE LA SANTÉ ET DES SERVICES SOCIAUX DE LA BAIE JAMES
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FROM THE CHAASHTIPISHTIHCH

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Preface



Message from the Task Force Chair



Jonathan Sutherland,

*Assistant Executive Director (interim)
Pimuhtheu, CBHSSJB*

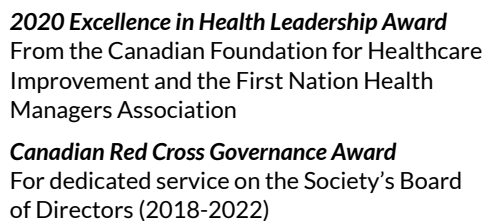
I received the mandate to Chair the *Awaash Uschiniichisuu Sikischchaayimuwinuu* (AUS) Task Force when I assumed the role of interim Assistant Executive Director for the Pimuhtheu Department of the CBHSSJB in 2022. Pimuhtheu, which means “we walk together,” includes Youth Protection and Youth Healing Services as well as other regional services that work in collaboration to protect and support youth and families in Eeyou Istchee.

Between April 2023 and June 2024, the *Chaashtipishtihch* travelled to every community to listen to what people had to say. I joined them for part of the tour, and saw how much work went into meeting with different groups and individuals in each community, always in an atmosphere of confidentiality and respect, and with the focus on what’s best for the children and families.

The Task Force met at key intervals to listen to progress reports and provide high level guidance. A smaller Working Group met regularly and helped shape this report into what we hope will be a useful tool to inform action planning by all partners. I thank both the Task Force representatives and the Working Group members for their efforts.

The publication of this report is an important step, but the most important steps remain ahead of us, as we work with our partners to respond to the recommendations with a collective action plan. I will be working with my team to review the recommendations in depth, and to identify specific objectives, and we will stay connected with our partners to coordinate next steps.

We do this work as part of our commitment to the safety and wellbeing of our children.



Bella Moses Petawabano has worked for more than 40 years in health and social services for the wellbeing of our people.

Bella started as a social aide and community worker in Mistissini and served for 15 years as a senior manager at the Cree Health Board before she was elected Chairperson in 2012, serving two terms in this role. A lifelong leader, she also served as councillor in Mistissini for several years.

Bella was born on her family's trapline on the Eastmain River and was raised there up to age ten; she attended residential school in Fort George from 1961 to 1965 and in 1966-67.

In 1965-66, she received teachings for a girl with her family on their lands, learning skills and teachings that she has carried into adult life. She graduated from high school in Rouyn-Noranda, learning French while boarding with a francophone family, and then undertook Medical Secretary training at Algonquin College in the early 70s. After getting married to Buckley Petawabano and starting a family, Bella completed a Certificate of Social Work at the University of Quebec at Chicoutimi, and went on to earn a Bachelor of Social Work at McGill University.

Bella's contribution to the Cree Health Board as Chairperson includes a reformed governance model that is now being looked at as an example of best practice by First Nations across Canada. She initiated the two regional health assemblies where representatives of our communities, including the youth, identified their priorities for health and social services. These priorities are now at the core of the Cree Health Board's strategic regional plan. Bella's lifelong dream of bringing birthing back to Eeyou Istchee is now a reality. Bella is a recognized leader in Indigenous health.



Lorraine Spencer

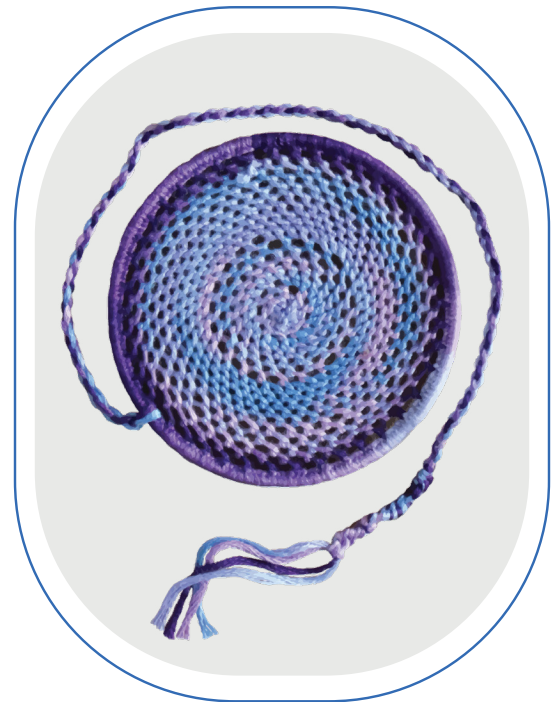
Lorraine Spencer is an iiyiyiu psychologist from Chisasibi who has always served her people and dedicated herself to healing and empowerment, specializing in helping those who have experienced developmental and intergenerational trauma.

Having worked with post-secondary students within the Cree School Board for many years, she transitioned to the Justice and Correctional Services Department of Cree Nation Government where she dedicated herself to clinical work with individuals who had extreme difficulties in managing some of the consequences of their traumas, notably addictions and other forms of abuses and violence toward themselves or others.

Her thirst for improving the way she could best serve those in need and recreating how and with whom she worked, she recently developed her private practice, learning about the world of entrepreneurship and leadership as a result. This culminated in her founding Siikuun, an Indigenous Healing & Transformational Retreat.

Obtaining a graduate degree in Counselling Psychology from McGill University, as well as being certified in various healing modalities, such as Trauma Sensitive Yoga Therapy, Lorraine believes that the most sacred and powerful tool any helper can have is relationship building, and that this is where true potential for growth resides.

The story of the awaash ihiipish (baby net), logo of the aah chishtipistihch *awaash-uschiniichisiu* *sikischaayimuwiniyiu*



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The pregnant woman had to prepare the *awaash ihiipish*, or baby net, before the arrival of her baby. After completing it, the mother attached it directly on the baby-wrap to protect this gift of life from anything bad or evil, including bad dreams and nightmares.

Woven in a continuous web, the *awaash ihiipish* reminds us of our connections and how our customary systems, law and knowledge provided the web of security for our children over thousands of years within their extended family and with their community.

Today, we have important work to do to overcome the effects of foreign, and often harmful, policies and practices imposed on Indigenous families. *iiyiyiuch/iinuuch* are in the best position to come together to determine how to transform child and youth protection into *awaash-uschiniichisiu sikischaayimuwin*.

Coming together we will weave our reconnections to relearn, revive and reclaim our own values and knowledge, practices and approaches around raising healthy and thriving children and youth. The *awaash ihiipish* reminds us of this, and helps us to acknowledge the strengths of *iiyiyiu/iinuu* family structures and protective practices.

Acknowledgements

It requires a significant team effort to hold successful consultations throughout Eeyou Istchee so that all Eeyouch have the opportunity to participate, and all relevant Eeyou entities have the chance to contribute. We would like to thank everyone from the communities who participated in the sessions, particularly those Eeyouch who shared their personal experiences and views, including those from the Eeyou entities who shared their perspectives. You told us what was important and we hope we have captured this in the reports.

Special thanks to our local teams who worked to organize the community meetings and events, and thanks also to the *Awash-Uschiniichisuu Shikascheimuun* Task Force members who helped us with this important work.

Importantly, the community consultations also involved CBHSSJB staff working at the local and regional levels, and especially employees working in the Department of Youth Protection, at Youth Healing Services and for the Communications Department and the Human Resources Department. Your contributions have been invaluable to help us better understand the issues within youth protection and services.

These consultations came about through the determination of the CBHSSJB Board of Directors, initiated under the former Chair, Mr. Bertie Wapachee, and now continued under the current Chair, Mrs. Jeannie Pelletier, to transform youth protection services into *sikischaayimuwin* for *awaashich* and *uschiniichisiuch*. We hope that we have met your expectations and that our work will help with these changes. And finally, this has been an amazing journey with our dedicated Working Group. Meegwetch!

Glossary¹

Term	Definition
Â Mashkûpimâtsît Awash Program	A comprehensive support program for families with children aged 0 to 6 adapted from the SIPPE Program (<i>Services intégrés en périnatalité et pour la petite enfance: Integrated Perinatal and Early Childhood Services</i>) offered in the rest of Quebec.
<i>aah chishtipistihch</i>	Overseeing and guiding the process
<i>aah chishtipistihch awaash-uschiniichisiu sikischaayimuwiniiyu</i>	Cree Youth Protection Commission; overseeing and guiding the process of children's and youth security and wellbeing
<i>'aanischehtaakanuuhch pimaatisiwin</i>	Refers to source of life
<i>aatiyuuhkaanh</i>	Legends and lessons found in legends
<i>awaash ihiipish</i>	Baby net; the graphic adopted by the <i>Chaashtipishtihch</i>
<i>Awaash-Uchiniichisiu</i>	Child/youth
<i>chaa chiihkaayaapihtikiniwich iiyiuch ukischihuniwaa miishkuch chaa chiih uhchi mishkiwikaapuwich</i>	Cree ways should be recognized so that they can stand strong; Cree rights/ways should be recognized in order for Cree identity to be strengthened. In English, roughly "decolonization."
<i>Chaashtipishtihch</i>	The people entrusted to do this; Commissioners
<i>Chaashtipishtihk</i>	Commissioner
<i>chiishtaanuuch</i>	Extended family we inherit
<i>chiyaamaayihtimuwin</i>	Family harmony or living with peace and harmony
<i>E uhchipaapiiwiyich</i>	Descendants

Term	Definition
<i>E Aah waahkumitunaanuuch</i>	Anyone you are related to; “inheriting in-laws”
<i>Eeyou; Eeyouch</i>	Cree person(s) - Northern dialect (“e” spelling); <i>Eenou/Eenouch</i> (not standardized spelling)
<i>Eeyou Indoh-hoh Istchee</i>	Traditional and historical family hunting territories (not standardized spelling)
<i>liyimiichim</i>	Food from the land
<i>Isinihkaasunh</i>	To name people by their relation to you
<i>liiyiyuyimuwin</i>	Cree language
<i>liiyiu, liiyiuch</i>	Cree person(s) - Northern dialect (“i” spelling); <i>linu/linuuch</i>
<i>liiyiu e nituhkuhiikut</i>	Cree healing methods
<i>liiyiu iitaayihtimuwin</i>	the Cree way of understanding things, or the Cree perspective
<i>liiyiu liyituuwin</i>	the Cree way of doing things/Cree culture
<i>liiyiu kischihuwin</i>	Cree traditional skills or strengths
<i>kaaniishtimistihch</i>	First responders
<i>kischihuwin</i>	liiyiu rights
“Life Plan”/Permanent plan	A long-term living arrangement plan for a child placed by DYP
<i>maamiinupiihtaau</i>	Let’s keep guiding it in the right direction

Term	Definition
<i>maamuu tipaachimuusinahiikan</i>	A little bit of what is talked about or summary report
<i>miyupimaatisiin</i>	“Being alive well”, global concept of “health” including one’s relationships, the environment and the animals.
<i>niistamisinuuch</i>	Extended family
<i>nishiiyuu</i>	Future generations/modern-day man
<i>nitutamhich</i>	My relations, my friends
<i>pimaatisiwin</i>	Life
<i>sikischaayimuwin</i>	To be and feel secure; to have a sense of security and safety; from a place of wellbeing
Signalement	A French term for a youth protection report made to the DYP. It is the commonly used term in English in Quebec.
<i>chishaaminituu</i>	Creator
<i>tipaayihchichaawin</i>	Governance
<i>uwaahkumaakiniwaauh</i>	Their relatives
<i>waahkumaakinich</i>	Relatives

1. The Chaashtipishtihch worked with translators and an ad hoc Language Working Group to develop the *iiyiyuymuwin* for the terminology around youth protection and youth criminal justice. These 150 or so terms have not yet been validated in both Northern and Southern dialects. Hopefully the work in this area will continue to enable youth protection and youth criminal justice workers to have terminology so that they will be able to carry out their work in *Iiyuu-ayimuwin*; and so that the CBHSSJB Communications Department will be able to produce videos and materials explaining the YPA and the YCJA to Eeyouch. This report uses the Northern dialect for simplicity and both the “I” and “e” spelling for *eeyou/iiyiyu* as is customary. Using the pronoun “she” when the sentence could imply a “he”, is not discordant in *iiyiyuymuwin*. The name of the Task Force is written in the Southern dialect; the name of the Commission in the Northern. The non-standardized spellings for *Nishiiyuu* and *Miyupimaatisiin* used by the CBHSSJB are retained in the text.

Acronyms

Acronym	Definition
AMA	<i>Â Mashkûpimâtsît Awash Program</i>
AUS	<i>Awash-Uchiniichisuu Shikascheimuun</i>
Bill C-92	An Act respecting First Nations, Inuit and Métis children, youth and families (federal)
CBHSSJB	Cree Board of Health and Social Services of James Bay
CMC	Cree Miyupiimatisiun Centre, or “local clinic”
CNG	Cree Nation Government
CSB	Cree School Board
Director of YP	Director of Youth Protection
DYP	Department of Youth Protection
EAP	Employee Assistant Program
EEPF	Eeyou Eenou Police Force
FN	First Nation(s)
HR	Human Resources Department of the CBHSSJB
RTS	The Reception, Treatment, and <i>Signalement</i> Team which does YP intake
YCJ	Youth Criminal Justice
YCJA	<i>Youth Criminal Justice Act (Federal)</i>
YP	Youth Protection
YPA	<i>Youth Protection Act (Quebec - Provincial)</i>
WHO	World Health Organization

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A

Executive Summary



The Cree Board of Health and Social Services of James Bay (CBHSSJB) Board of Directors created the special *Awaash Uschiniichisuu Sikischchaayimuwinuu* (AUS) Task Force in April 2021 to advise it on points of significant concern regarding youth protection and youth criminal justice matters under the authority of the CBHSSJB, and on ways to address these concerns.

This was an innovative approach as the Task Force represents all relevant departments of the CBHSSJB, as well as inviting representatives from each of the Cree entities with responsibilities for child and family wellness to participate in its work.

The *Chaashtipishtihch* were appointed in November 2022 to assist the Task Force with its mandate by hearing the views of community members and other stakeholders, including the local community front-line workers of the CBHSSJB.

The intent of this report is to help the AUS Task Force, and ultimately the CBHSSJB Board of Directors, to consider and implement ways to improve and adapt youth protection and youth criminal justice matters under the authority of the CBHSSJB in view of the specific needs and realities of Eeyou Istchee. The AUS Task Force may choose to endorse or modify all or certain of these recommendations of the *Chaashtipishtihch*, before submitting them to the CBHSSJB Board of Directors.

The *Chaashtipishtihch* held extensive consultations between April 2023 and June 2024 with Eeyouch across Eeyou Istchee, including people from the nine communities and from relevant Eeyou entities.

This was the first time Eeyouch had been consulted on a social topic like this in such detail and depth.

Since the mid-1980s, many Eeyou children and youth have been apprehended from their families by the youth protection system to protect them from harm or the threat of harm. The numbers of children apprehended in Eeyou Istchee has always been significantly higher than in most other areas of the province.

The *Chaashtipishtihch* found two elements that stand out from the consultations overall: first, the *Chaashtipishtihch* were directed to identify the roots of the problem with the existing system to protect children and youth from abuse and to care for those who fall into the criminal justice system; and, second, they were directed to make recommendations that would strengthen the system from its roots through an *liiyiu* transformation of services.

The *Chaashtipishtihch* were told during the consultations that the roots of our issues with “our” youth protection system lie in our collective past and the changes and upheavals we have gone through, ranging from: the attitude of missionaries towards *liiyiu liyituwin*; our previous status as “non-citizens” under the discriminatory Indian Act; residential schooling; government actions pushing our relocation into year-round communities; the disruptions from major development projects in our territory; and the introduction of the Quebec youth protection system in Eeyou Istchee.

The *Chaashtipishtihch* point out that in our communities in the past, we always had ways of caring for children who were “at risk”, and that these approaches were disrupted by these social changes.

There have been recent changes to the legal frameworks that apply to youth protection for Indigenous people in Quebec. This includes changes to the Quebec *Youth Protection Act* (YPA) and through *An Act respecting First Nations, Inuit and Métis children, youth and families* (the federal law often called “Bill C-92”). Among other things, Bill C-92 sets out minimum national standards and principles for the provision of youth protection services to Indigenous children, and that apply alongside the YPA.

Both the YPA and Bill C-92 set out principles relating to cultural continuity, particular factors relating to the best interests of an Indigenous child and a priority emphasis on preventive services, among other things.

However, even with these important changes, the *Chaashtipishtihch* believe that there are issues with how the YPA is applied in Eeyou Istchee. While youth protection is intended to be a last-resort measure, certain *Eeyouch* told the *Chaashtipishtihch* that they view the formal youth protection system as a “babysitting service”, meaning the system is used too frequently and not as a last resort and because they perceive the system has been used this way over a long period by certain people. Others said that the system is perpetuating the pattern of residential schooling because of the numbers of children removed from the care of their parents and the approach we have adopted.

Overall, Eeyouch reported to the *Chaashtipishtihch* that too many children are removed from their homes and families in situations that could have been prevented or addressed differently, that there are no specific services helping families involved with the DYP, and that the youth protection system is not adapted to *liiyiyu iitaayihimuwin*.

It is true that the Youth Protection Act permits children to be taken away from their families in order to protect them. However, the law holds this as a last resort after other types of interventions and preventive actions have been taken to support the children’s families and keep the children safe in their homes. In Eeyou Istchee, these supports to help families stay strong have not been systematically developed. It is not the role of the Department of Youth Protection to develop these types of programs but rather that role lies with other health and social services in the CBHSSJB, with other regionally managed programs, such as through the CNG, and with programs developed in the communities.

The *Chaashtipishtihch* point to some very positive developments in the efforts of the CBHSSJB to improve its youth protection services. For instance, the new Family Group Conferencing Services organized by the CBHSSJB Nishiiyu Miyupimaatisiun Group are using an *liiyiyu liyituuwuwin* approach in *iiyiyuymuwuwin* and working with families in need. And for the longer term, the *Chaashtipishtihch* see the new Cree Customary Adoption and Guardianship certification process as being based on our ways, while also ensuring children’s security and well-being among extended family or other community members, all according to our customs.

The *Chaashtipishtihch* considered if it would be appropriate to develop a new, *liiyiyu* youth protection law to address the issues raised with them through the consultations concerning the current youth protection system. After careful consideration of what they had heard from the perspectives of the many participants recounting their experiences through this extensive process, the *Chaashtipishtihch* do not recommend this approach, at least for now.

Instead, the *Chaashtipishtihch* recommend that the existing youth protection legislation be applied in more appropriate ways in Eeyou Istchee, and that the delivery of these services also be improved, before trying to embark on developing and implementing a whole new system of youth protection for Eeyou Istchee.

The *Chaashtipishtihch* understand that the YPA can be applied with some flexibility, particularly in light of its new provisions respecting Indigenous children and in view of the similar principles of Bill C-92 regarding youth protection for Indigenous children that apply across the country, including in Quebec. This flexibility has not yet been fully taken advantage of within Eeyou Istchee in their view, notably with regard to providing complementary preventive services, and tailoring YP services to *liiyiyu iitaayihntimuwini*.

Additionally, in their view, it is important to understand that the CBHSSJB is responsible for YP services and also for other health and social services in Eeyou Istchee, including preventive and early intervention services. The CBHSSJB may organize and coordinate these services in the territory in the ways that work best for our people and our context, according to the *Chaashtipishtihch*.

Therefore, at this time, the *Chaashtipishtihch* do not advise negotiating or proposing to develop a new youth protection law for Eeyou Istchee as a solution to the current situation. Instead, for now, they suggest addressing the situation by acting on the final recommendations of the AUS Task Force and continuing to pursue application of the YPA in a manner that is more grounded in, and based upon, *liiyiyu iiyituuwin*.

In other words, the *Chaashtipishtihch* are telling us to fix what is not working well with the system, build on and improve what is working well, and do it all in a collaborative way, both within the CBHSSJB and with other Eeyou entities in Eeyou Istchee.

In terms of the *Chaashtipishtihch* “getting to the root” of the issue, certain people told them that this is found in *chaa chiihkaayaapihtikiniwich iiyiyiuch ukischihuniwaau miishkuch chaa chiih uhchi mishkiwikaapuwich*.² In other words, Eeyou ways should be recognized so that they can stand strong, or to put it another way, that *liiyiyu* rights/ways should be recognized in order for *liiyiyu* identity to be strengthened.

2. This Cree way to think of the concept of decolonization was stated by then Deputy Grand Chief Norman Wapachee in the 2021-22 Annual Report of the Cree Nation Government/Grand Council of the Crees (Eeyou Istchee). This is a complex issue which is rooted in the example used by the *Chaashtipishtihch* above which is a way to express the English term “decolonization”. See Section C.2.

The *Chaashtipishtihch* believe that expressing this in *iiyiyuymuwun* refers us back to the intent of the Eeyou negotiators of the JBNQA. With this perspective, the focus is on strengthening Eeyouch from an *liiyiu iitaayihmuwin*. It is not a passive process of no longer being dominated by someone else. Rather it is an active assertion of rights and identity from an *liiyiu iitaayihmuwin*.

In this report, the *Chaashtipishtihch* suggest that change should begin with a focus on finding and reinforcing common values as the basis for reorienting services and strengthening *iiyiyuymuwun* as the core way to articulate our values.

The *Chaashtipishtihch* are pleased to present their report from these consultations in three documents:

- The *Nuum Wiihtimaachaawin* of the final report (summary report)
- *Maamiinupitihtaau*: the final report from the *Chaashtipishtihch*.

The Summary Report presents an overview of the issues, describes what happened during the consultations, and then goes through the recommendations of the *Chaashtipishtihch* in a narrative ("story telling") format, followed by the list of all of these recommendations.

The *Chaashtipishtihch* emphasize that we have important work to do to overcome the effects of foreign, and often harmful, policies and practices imposed on our *liiyiu* families, and that *liiyiuch/linuuch* are in the best position to come together to determine how to transform child and youth protection into *awaah uschiniichisiu sikischaayimuwin*.

The *Chaashtipishtihch* tell us that by coming together we can weave our reconnections to relearn, revive and reclaim our own values and knowledge, practices and approaches around raising healthy and thriving children and youth, including to acknowledge the strengths of *liiyiu/linuu* family structures and protective practices.

Please note that the views and perspectives set out in this report are those of the *Chaashtipishtihch*, and do not necessarily reflect the views or positions of the CBHSSJB or of any other *liiyiu* or entity.³



Cree Family Value:
Child Rearing

3. See page 26.

B

Welcome to the Report from the *Chaashtipishtihch*

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- B.1. The *aah ahishtipistihch* *awaash uschiniichisiu sikischaayimuwiniiyu*
 - B.2. What the *Chaashtipishtihch* Did
 - B.3. The Sources of the Material in This Report
 - B.4. Further Reading
 - B.5. Points to Keep in Mind When Reading This Report



B.1.

The *aah chishtipistihch awaash uschiniichisiu sikischaayimuwiniiyu*

In April 2021, the Board of Directors of the Cree Board of Health and Social Services of James Bay (CBHSSJB) set up the *Awaash Uschiniichisiu Sikischaayimuwinuu* (AUS) Task Force to advise the Board on ways to better adapt and improve youth protection and youth criminal justice matters under the authority of the CBHSSJB to the needs and realities of the Cree context.

A year and a half later in November 2022, the CBHSSJB began to organize the *aah chishtipistihch awaash uschiniichisiu sikischaayimuwiniiyu* (AUS), or Commission, to assist the Task Force with its mandate, including to consult with the population in Eeyou Istchee about these matters and to report back to the Task Force. In setting up the Task Force in 2021 and the Commission in late 2022, the CBHSSJB gave special attention to the long-standing issues surrounding the application of the *Youth Protection Act* and the *Youth Criminal Justice Act* in Eeyou Istchee.

B.2.

What the *Chaashtipishtihch* Did

Between April 2023 and June 2024, the *Chaashtipishtihch* conducted consultations throughout Eeyou Istchee and at regional offices of Cree entities in Montreal. In total, they consulted with **1,177** people.

Among the people consulted from the communities: 764 of them were met during the community consultations; and 38 were met in meetings with groups from relevant regional Eeyou entities and departments including *Miyuuhpichinaausuwin Apatisiwin* (formerly Child & Family Services of the Cree Nation Government), the Eeyou Eenou Police Force (EPPF), the Nishiiyuu Council of Elders and Robin's Nest.⁴

Within the CBHSSJB, 375 employees were met: 181 of whom were working in the community CMCs (but not for YP or YHS); 124 of whom were working for YP or YHS; and 70 of whom were working for CBHSSJB regional offices such as Wiichihiituwin, Human Resources, the Service Quality and Complaints Commissioner, the Director of Professional Services and Quality Assurance - Psychosocial, the Public Health Group, mental health services, the Foster Home Department and regional managers of services.

In addition to these consultations, the *Chaashtipishtihch* received 21 written briefs from individuals managing Cree entities, including 11 specific departments of the CBHSSJB, 6 Cree First Nations, the Cree School Board, and 2 Departments of the Cree Nation Government.

4. Although Robin's Nest is managed by the CBHSSJB it is included here because the *Chaashtipishtihch* consider that its concerns with YP are like those of an external group.

B.3.

The Sources of the Material In This Report

The conclusions in this report come from three principal sources. First, the *Chaashtipishtihch* took notes during consultation meetings or relied on transcripts from audio recordings of the consultations they carried out. The summaries of these notes and the written briefs are the basis for the detailed reports found in *Background and Complementary Information to Maamiinupitihtaau: The Final Report from the Chaashtipishtihch*, a companion document to this Report.

The second principal source was various CBHSSJB documents and information concerning youth protection, and youth criminal justice as well as documents and information from Youth Healing Services. The third source is outside materials which consist of different kinds of documents from Cree entities, as well as various materials touching on the broad area of youth protection/child welfare.⁵

B.4.

Further Reading

In addition to this report, the Commissioners prepared a Summary Report which was used to support discussions among the Task Force partners and with the Board of Directors of the CBHSSJB. The Summary Report was a working document which is replaced by this Final Report.

Additional material from the project, including a compilation of *Background and Complementary Information*, can be found on the website: creehealth.org.

The reports from the community consultations, including the CMC consultations, have been prepared as stand-alone reports which will be sent to the groups and entities in each community that participated in the consultations. They are not confidential, but it will be up to these groups and entities to share them as they see fit.

5. Youth protection services are commonly referred to in other provinces and territories in Canada as “child welfare services.”

B.5.

Points to Keep in Mind When Reading This Report

The consultations happened at a specific point in time and involved specific people who agreed to participate, and who chose to share their personal perspectives and experiences with the *Chaashtipishtihch*.

In other words, the report on the consultations can be understood as a snapshot of perspectives and experiences of the specific people who decided to voice their comments, and which were also provided at a specific time (i.e. the time of the consultations). The same goes for the briefs, which were written by the stakeholders who agreed to participate, and according to their experience of the services at the time of writing their briefs.

For those who participated from the CBHSSJB, this consultation process began in mid-April 2023 and ended in May 2024. Similarly, the internal documents from the CBHSSJB that were considered for this report were all produced before September 2024.

The consultations in the communities are a snapshot of views shared with the *Chaashtipishtihch* by certain people between mid-April 2023 and June 2024. Any major changes or events after these dates are not reflected in this report.

A reminder about how to read this report:

- It is a consultation report made by the *Chaashtipishtihch*, not a research paper or social sciences research project;
- It is based on what people from each of the communities told the *Chaashtipishtihch* between April 2023 and June 2024, and on the content of the briefs received during the same period;
- It is a report on what people think based on their experiences, perceptions and possible biases;
- It may include partial information about something if this is the only information the *Chaashtipishtihch* were told;
- It reflects what people chose to tell the *Chaashtipishtihch*, whether or not these views may have been accurate, inaccurate, fair or biased;
- It sometimes includes direct contradictions which reflect the views of different people about the same or similar situations;
- It tries to accurately reflect what the *Chaashtipishtihch* were told by people at that time, and not what might have changed since then;
- It reflects the understanding of the *Chaashtipishtihch* based on what was shared with them.



C

liiyiyiu liyituuwin

-
- C.1. *liiyiyiu liyituuwin*: The Political Context
 - C.2. *liiyiyiu liyituuwin*: The Linguistic Context
 - C.3. The *aah chishtipistihch* and the Touchstones of Hope
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 - C.5. *liiyiyiu liyituuwin* in Services Has Been Slow in Coming



C.1.

liiyiyu iiyituuwin: The Political Context

Introduction

Two elements stand out from the consultations overall, and were clearly voiced in all communities: first, the *Chaashtipishtihch* were directed to identify the roots of the problem with our present system to provide security for children and youth within our services; and, second, they were directed to make recommendations that would strengthen the system from its roots through an *liiyiyu* transformation of services.

This chapter sets out what is behind one of the root issues we are facing with our services and that is the unresolved tension between our desire to develop our affairs from *liiyiyu iitaayihimuwin* and the structures we inherited from elsewhere to organize our services. It all began with the negotiations and signing of the JBNQA.

Since that time in the mid-1970s and early 1980s, the view of the *Chaashtipishtihch* is that we have been in charge of our own system, to an extent.⁶ This qualifier is important in relation to the matters addressed in this report because it identifies the tension the CBHSSJB and all *liiyiyuch* have been dealing with between running our own system, “to an extent”, but effectively running a system adopted entirely from Quebec and operated according to a specific Quebec law, the *Youth Protection Act*.

This tension was evident to the *Chaashtipishtihch* during the consultations as people criticized the youth protection system, complained that it was not *liiyiyu liiyiyuch*, while agreeing that we need a system to ensure the security of children and youth, but one that makes sense to *liiyiyuch* in the way that it operates with our families.

The *Chaashtipishtihch* believe that understanding the Eeyou intent behind the JBNQA offers an important lesson if that intent can be carried through to today.

The Negotiations

Former Chief and JBNQA signatory Robert Kanatawat described how the Eeyou negotiators prepared for the negotiations. “When they started the work in protecting the rights of *liiyiyuch*, they had nothing to help them with the process. What they had was the guidance of the Elders and the people who lived on the land who had survived from generation to generation with their oral teachings and practices that were passed on. The Elders knew nothing of the Whiteman’s ways. What we knew then is what we learned from our Elders and now it is our responsibility to pass this on to future generations. What we knew for sure was that we had to hang on to the land, our *liiyiyu iiyituuwin* and *liiyiyu kischiuwin*.”⁷

Similarly, Dr. Philip Awashish, also a signatory of the JBNQA explained, “We consulted the people [...], we used *Iliiyiyuyimuwin*, so the *liiyiyuch* were spoken to in *liiyiyuyimuwin* when it came to the negotiations for the JBNQA. Mostly if not all, it was *liiyiyu* communication that helped people understand what our intentions were. The government had to understand and we had to understand...exclusively in *liiyiyuyimuwin*.”⁸

6. The history leading from the JBNQA to the AUS Task Force in 2021 is detailed in this report. See Section E and *Background and Complementary Information to Maamiinupitihatau: The Final Report from the Chaashtipishtihch*.

7. Robert Kanatawat, speaking at the Cree Nation Government, Annual General Assembly, Wemindji, 2024.

8. Dr. Philip Awashish, pre-meeting notes and discourse at the AUS Task Force meeting, Montreal, December 2, 2024.

The Context for liiyiyu iiyituuwin

Robert Kanatawat said, “liiyiyu iiyituuwin was our guide.” Dr. Awashish explained what this implies. “For liiyiyuch of Eeyou Istchee, the JBNQA is about liiyiyuch/linuuch, Eeyou Istchee and iiyituuwin. The Agreement, as our modern Treaty, recognizes and protects liiyiyu rights, settles the status of Eeyou Istchee and promotes the continuance of liiyiyu iiyituuwin.”

He continued, “The liiyiyu iiyituuwin that the Elders spoke about centers around the liiyiyu homeland – Eeyou Istchee – which is comprised of Eeyou Indoh-hoh Istchee. The Elders spoke about the liiyiyu homeland as a vast land of animals, fish, birds, forests, rivers and lakes where hunting and fishing are essential components of the lives and culture of the liiyiyuch. For the liiyiyuch of Eeyou Istchee, hunting and fishing is far more than the pursuit of fish and game. The presence of Nature everywhere brings great blessings on the people. Consequently, the liiyiyu presence in the land of their ancestors is essential for their wellbeing in mind, body and spirit. The Elders call this holistic wellbeing miyupimaatisiun which liiyiyuch must seek, achieve and maintain in their lives. Therefore, according to the Elders, liiyiyuch maintain a strong bonding relationship with their land – its waters, its forests, its plants, its animals, its fish, its spirit – and what the people have become as a result – that’s part of the nature of being liiyiyu.”

And importantly he stressed that we are not talking about the past.

“In the exercise of the right of self-determination, liiyiyu iiyituuwin is not just the way we do things and the way we live in the past. liiyiyu iiyituuwin is the way we do things now and the way we live now as determined by liiyiyuch. And we will continue to determine liiyiyu iiyituuwin in the future.”

liiyiyu iiyituuwin As Our Guide

Dr. Awashish also pointed out what needs to happen to transform our services.

“liiyiyuch also consider their culture, language and traditions as fundamental and central to their collective and individual identities. Therefore, liiyiyu vision of self-government embraces two distinct but related goals. The first involves greater authority over Eeyou Istchee and its inhabitants, whether this territory be exclusive to liiyiyuch or shared with others. The second involves greater control over matters that affect liiyiyuch: our culture, identity and collective well-being.

The James Bay and Northern Quebec Agreement enhances the capacity of the Eeyou/Eenou Nation to realize their own cultural, educational, economic, environmental and political objectives through foundational actions of their own design and initiation.

Few people realize that the proper implementation of the James Bay and Northern Quebec Agreement is a decolonization process which involves Nation-building and Nation-rebuilding in accordance with the will and aspirations of the liiyiyuch of Eeyou Istchee. In this process, liiyiyuch are already well on their way to restoring their governance systems and institutions and recapturing their cultural integrity and sense of historical identity.”

In conclusion, Dr. Awashish wrote “There is a lot of colonial philosophy in the JBNQA, but also there is liiyiyu philosophy in the JBNQA.”

The Chaashtipishtihch recognize that we are working within the Youth Protection Act and the Youth Criminal Justice Act and now also the federal Bill C-92 – the Act respecting First Nations, Inuit and Métis children, youth and families, which were developed through a “colonial philosophy”, albeit with increasing recognition of Indigenous distinctions in youth protection/child welfare with recent amendments. Now, transforming our services means returning to the original intent of the Eeyou negotiators of the JBNQA and bringing liiyiyu iitaayihimuwin so our services will be carried out in liiyiyu iiyituuwin in Eeyou Istchee.

C.2.

liiyiyu liyituuwin: The Linguistic Context

During the consultations, many participants voiced their long-standing concern that they feel their health and social services, including youth protection, do not come from an *liiyiyu iitaayih timuwīn* with the result that services are not delivered through *liiyiyu liyituuwin*. In this report, the *Chaashtipishtihch* suggest that change should begin with a focus on finding and reinforcing common values as the basis for reorienting services and strengthening *liiyiyu yimuwīn* as the core way to articulate our values.

This is a complex issue. One side of it is explained in the example used by the *Chaashtipishtihch* when they quoted *chaa chiihkaayaapihtikiniwich iiyiyiuch ukischihuniwaau miishkuch chaa chiih uhchi mishkiwikaapuwich*, which is a way to express the English term “decolonization”.⁹ The English term has two parts: the prefix which means “separation from”, followed by the notion of “having been colonised”. To put it another way, “decolonization brings about the repatriation of Indigenous land and life...”¹⁰

However, the way of expressing this in *liiyiyu yimuwīn* refers us back to the intent of the Eeyouch negotiators of the JBNQA because it says that *liiyiyu* ways should be recognized so that they can stand strong, or to put it another way, that Cree rights/ways should be recognized in order for Cree identity to be strengthened. With this perspective, the focus is on strengthening Eeyouch from an *liiyiyu iitaayih timuwīn*. It is not a passive process of no longer being dominated by someone else. Rather it is an active assertion of rights and identity from an *liiyiyu iitaayih timuwīn*.

The late Mary Head Bearskin of Chisasibi explained, “*Aatiyuuhkaanh* refers to legends where we find our guiding principles to maintain *miyupimaatisiun*. The land is our source of energy. She is our Mother. We have to keep going back to Her to nurture our own well-being, our spirit and life. It is the garden of the Creator, and we belong in this garden. Our role is to look after it well, use it and learn from it. The Creator is forever close to us more than we ever know and watching as we move about. In the Creator, we move and exist. No one knows how old these teachings are, they were there since time immemorial as *Tsheymando* wanted, so we must live by them.”¹¹

As recounted by Roderick Pachano,¹² the late Elder David Neeposh of Waswanipi centred this same teaching on the family when, in the mid-1990s he explained to the Eeyou Chiefs that ‘*aanischehtaakanuuhch pimaatisiwin*’ focused on the newborn child and the mother who brought this life into being. Elder Neeposh had explained that it assumes that the man is there to provide all that the mother and child need and to protect the child until she is able to provide and care for herself, and, further, that this responsibility also goes to the extended family, and to the whole village. This is the foundation of our society. Roderick Pachano summarized this teaching as: “Do not harm the children. Look at the Nishiiyuu Life document. Go back to that and nothing will be difficult. Always view others with caring and respect. Do no harm. If we understood this, we would have no problems.”

9. The Cree way to think of the concept of decolonization was stated by then Deputy Grand Chief Norman Wapachee in the 2021-22 Annual Report of the Cree Nation Government/Grand Council of the Crees (Eeyou Istchee).

10. Tuck E, Yang KW. (2012). Decolonization is not a metaphor. *Decolonization: Indigeneity, Education & Society*. 1,1, p. 1-40.

11. This teaching is part of the Nishiiyuu Miyupimaatisiun Group Framework.

12. Meeting notes from the Language Working Group, Chisasibi, October 28, 2024.

The *Chaashtipishtihch* see this teaching as the basis for transforming the way we care for children and youth at risk. The *Chaashtipishtihch* worked with an *ad hoc* Language Working Group to discuss about their work in *liiyiyuymuwun*. First, they decided that the focus was on *Awash-Uschiniichisuu Shikascheimuun* or making children and youth feel secure and with a sense of security and safety and from a place of wellbeing. As with the terms discussed above, the English word “protection” has the idea of someone on the outside acting to protect a child. Instead, the *liiyiyuymuwun* puts the focus on the needs of the child to be secure, safe and with wellbeing. The teaching from the late Elder Neeposh is that the responsibility to ensure this lies for each child within the family, the extended family and the community.

The slogan of the *Aah chishtipistihch awaash-uschiniichisuu sikischaayimuwiniiyu is maamiinupitihtaau* meaning “let’s keep guiding it in the right direction”. To the *Chaashtipishtihch*, this means:

- Reconnecting with *liiyiyu* childrearing practices, values, approaches and knowledge about healthy and thriving children and youth;
- Focusing on our strengths and resilience as *liiyiyu* families, communities and Nation;
- Building a system that reflects our values, our traditions, our ways of healing and of caring together for our children;
- Working with our partners to build a plan to make our youth protection system represent *liiyiyu liyituuwin*;

- Understanding the roots of the problem and how to strengthen our collective efforts to restore and shape the way our communities and the CBHSSJB take care of our children in need;
- Learning how the past has affected us and what has worked for us;
- Addressing harms to make sure they do not happen again;
- Creating solutions together;
- Continuing with whatever it takes;
- *Maamiinupitihtaau mak!*

The way to see this happening is easier to understand in *liiyiyuymuwun* than in English. As the *Chaashtipishtihch* discuss in more detail further on in this report,¹³ we do not use names but refer to people by how we are related to them. Our relationships are not only within our family, but also with our friends, as well as extended family. In our society, immediate family includes grandparents, grandchildren, great grandchildren and great grandparents. There are many different Cree terms that relate to these concepts, which in turn are important sources of the strength of our families and our communities. This was how our negotiators were thinking when they signed our Treaty.

13. See Section F, 1-4 on culture and values.

C.3.

The aah chishtipistihch and the Touchstones of Hope

The slogan of the *aah chishtipistihch* *awaash-uschiniichisiu sikischaayimuwiniiyu* is *maamiinupitihtaau*, or “let’s keep guiding it in the right direction”. This slogan was chosen explicitly to keep us on guard as we move forward so that we do not slip back into our old patterns with youth protection services in Eeyou Istchee. Essentially, as set out elsewhere in this report, these old patterns we have been relying on include an approach whereby there is essentially “one-stop shopping” at the DYP for services when there are problems in families involving children and youth. It seems that it has been primarily the DYP that has sought to address interpersonal problems in the families with children and youth who are receiving YP services. Within the CBHSSJB and with other community partners, the prevention and early intervention services for this “clientele” have effectively remained underdeveloped and undercoordinated.

The *Chaashtipishtihch* are proposing approaches and recommended solutions for the AUS Task Force, and ultimately for the CBHSSJB, to set out how we might, collectively, begin to change this pattern.

The *Chaashtipishtihch* believe that as a point of departure we need to recognize that to make this change, we are not reacting against and taking control from a non-Eeyou youth protection agency which has been controlling our services from the outside. We are the ones who have been in charge of implementing and managing the youth protection system in our region from the outset.

Now is the time for us to completely rethink how we are doing this, while always keeping these important services in place for our children and youth.

In the previous chapter discussing language, the *Chaashtipishtihch* outlined steps we need to take to advance our slogan, *maamiinupitihtaau*, in practice. This chapter focuses on the process that the *Chaashtipishtihch* believe we will need to follow for this to continue to happen.

In *Reconciliation in Child Welfare: Touchstones of Hope for Indigenous Children, Youth and Families*, the First Nations Caring Society of Canada says:

*“Standing at the shoreline of professional change can be daunting and uncertain. The process of reconciliation can be difficult as it necessarily calls on us all to see with new eyes, to acknowledge responsibility for past wrongs, and breathe life into the commitment to optimize child welfare outcomes for Indigenous children, youth and their families.”*¹⁴

The report sets out four touchstones, or “the high standards and values that guide action in each of the four phases of reconciliation.” These are truth telling, acknowledging, restoring and relating.

“Truth telling” is the open exchange regarding the past of youth protection (child welfare) in our region. The authors put an emphasis on truth telling to explore “the harm caused by child welfare by all who were, or are still, involved.” They say that harm is the “first property of those who experienced it” while “acknowledging the harm and learning from it is the first obligation

14. Blackstock C, Cross T, George J, Brown I, Formsma J. (2006). *Reconciliation in child welfare: Touchstones of Hope for Indigenous Children, Youth and Families*. Ottawa, ON, Canada: First Nations Child & Family Caring Society of Canada / Portland, OR, USA: National Indian Child Welfare Association P. 7.

of those who perpetrated it.” The work of the *Chaashtipishtihch* in carrying out the consultations, and this report and its recommendations, is the initial work on this process to open the doors for truth telling. It is not yet complete and, with this report, the process now passes to the AUS Task Force and ultimately to the CBHSSJB and other relevant Eeyou entities to continue.

“Acknowledging” is to learn from our past, to realise the need for a new path and to embrace new possibilities for the future. The steps outlined in the previous chapter by the *Chaashtipishtihch* are suggestions for how we might begin to think of this.

“Restoring” is addressing the problems of the past and creating a better path for the future, so that we do not slip back to our old patterns. This process is now the opportunity of the AUS Task Force and the CBHSSJB to begin to set in motion what the *Chaashtipishtihch* have begun, in collaboration with relevant Eeyou entities.

And finally, “relating” is moving forward respectfully along a new path, which is our slogan, *maamiinupitihtaau*, which is so fundamentally important. We will need to design our new approaches, implement them and never forget to monitor and report on how our system is performing.

As Dr. Blackstock and the other authors explain, *“reconciliation is not a one-time event or pronouncement but rather an investment in a new way of being and a relationship to achieve a broader goal: a child welfare system that supports the safety and well-being of Indigenous children and youth.”*

Importantly, they identify the five key values which need to guide the four phases in the process: self-determination, culture and language, a holistic approach, structural interventions and non-discrimination.

During the consultations with the *Chaashtipishtihch*, participants stressed that our services need to reflect *liiyiu liyituuwin* and that by doing this we will bring the values of self-determination and culture and language into new practices for ensuring security for our children and youth.

To promote a holistic approach within our services, we must begin with “the child at the centre.” This means addressing the many issues identified by the *Chaashtipishtihch* in this report. For this to happen, we will need to develop a habit of self-reflection to always assess our practices against the steps in reconciliation and these guiding values.

Importantly, according to the findings in this report, the value of “structural interventions” is not yet built into and behind how we are delivering youth protection services in Eeyou Istchee, but it is essential if our long-term goal is to reduce the number of children and youth in care. As the authors write, *“protecting the safety of children and youth must include resolving risk at the level of the child, family and community.”*

This means addressing difficult issues like poverty and addictions for example, and to do this the CBHSSJB will need to work collectively and collaborate assiduously with its regional and local partners.

The *Chaashtipishtihch* also emphasize the need to strive continually for non-discrimination in our services. This means providing top quality services that are addressing the needs of the children, youth and families involved with the DYP while supporting our ways of knowing through *liiyiu yimuwin* and *liiyiu liyituuwin*.

C.4.

Other Indigenous Groups Doing It Their Way

When *Iiyiyiuch* took over youth protection services from 1978, no Indigenous groups in Canada were running their own services based on social work models of the time.¹⁵ Today the landscape is very different and there are many models for and examples of services designed to ensure the security and safety of children and youth that are planned and run by Indigenous peoples for their own communities, and culturally reflecting their communities.

The *Chaashtipishtihch* had access to several summaries of Canadian and international examples of successful systems designed and run by Indigenous peoples. The Indigenous groups developing these new programs have understood that services supporting families and ensuring security and safety for children and youth are part of community healing from historical, but continuing traumas. They share four defining features: a clear jurisdiction; a system built from local knowledge and practices; use of various types of community groups as part of the services; and, the combining of preventive services, such as prenatal care for mothers and families, with protection services for removing children from a harmful family environment into a continuum of care.

Jurisdiction

Successful Indigenous systems clearly define their jurisdiction and the scope of their authority. This can be based on membership or geography, or a mix. How an Indigenous group defines its jurisdiction in child welfare depends to a large extent on its specific context.

Another decision about jurisdiction concerns the age at which youth who have been placed by the system, but not with family, will be considered to be independent. Technically, age of majority in Canada is age 18 or 19, but many Indigenous, and some non-Indigenous, child welfare or protection agencies develop programs to support youth with the transition from care to independence. In some of the Indigenous examples, youth were supported for a minimum of three years up to seven.

Many Indigenous organizations directly link their child protection services with their customary adoption and guardianship process. This is a point recommended by the *Chaashtipishtihch* for Eeyou Istchee because it has the potential help children and youth become part of new families while also reducing dependency upon the DYP.

In some places, these processes are aided by having Indigenous courts and tribunals to manage the legal aspects of child protection, adoption and guardianship. These courts may also play a role in monitoring intervention plans with families arranged between the child welfare agency and the family. In these instances, the fact that all of the authorities are from the same Indigenous community helps to ensure cultural safety within the system.

In other places, forms of conflict resolution processes, such as community circles, are set up as an alternative to using the courts.

15. Many places, including Eeyou Istchee, have always continued customary practices.



System Built From Local Knowledge and Practices

A major strength of an Indigenous-run system is that it is built upon local knowledge and practices and uses local definitions of the best interest of the child and family group. As a base, these systems rely on local and customised definitions of risk, especially in the area of suspected neglect. This is part of using local understandings of the best interests of the child and family group. Some put an emphasis on keeping communication open with the immediate and extended family of the children; ensuring children past a certain age understand what is happening and why they are being placed; and, ensuring that older youth are part of making decisions that concern them.

The Indigenous planned and run agencies may operate and deliver services in the local language, but they all put a focus on integrating cultural practices into care. At the same time, because the systems delivering services are local, some of them report the importance of having the services reflect the rhythm of local life.

Use of Various Types of Community Groups

Many Indigenous-run systems have set up various types of community groups to support the local services. These have different names depending upon their roles and the places where they are happening: the Grandmothers' group,

Elders Council, community board, Circle of Helpers, Family Council. Some are decision-making, others only advisory. The type of roles undertaken may include providing advice, making evaluations, making placement decisions, doing follow-ups, and providing support for decisions. In one example, the child welfare agency may make an emergency placement but the community group then makes the decision about continuing the placement or not, depending on their knowledge about what is happening in the family. Another function of some community groups is to inspect and/or approve care homes and foster families in the community.

Combining Preventive and Protection Services in the Same Agency

A strong feature of Indigenous-led agencies is to offer a continuum of services based on the interests of the child in the short and long-term. They support the protection of children and youth by making space for culturally responsive measures to try to "heal" the situation in the family. The continuum of services ranges from preventive services around prenatal care and family support, to protection services which remove children at risk and then offer supportive interventions to the family. These agencies are set up to provide remedial and rehabilitation services and only remove children when active efforts to keep the family together are not working.

C.5.

liiyiyu liyituuwin in Services Has Been Slow in Coming

Section C of this report explores the *liiyiyu* context of youth protection in Eeyou Istchee. The overarching question in talking about services ensuring *sikischaayimuwin* for children and youth is why we have not yet succeeded in integrating *liiyiyu liyituuwin* as our source of overarching values guiding how our services operate. Especially with what we call “youth protection” services, we have not integrated our own *liiyiyu iitaayihtimuwin* into our *liiyiyu liyituuwin* in caring for children and youth at risk.

Today, many other Indigenous groups have taken legal and organizational control of their systems to ensure the security and care of children and youth. They have also adapted these systems to their ways of doing and seeing. We have yet to do this and this is the question which led the CBHSSJB Board of Directors to set up the AUS Task Force and Commission.

Dr. Philip Awashish discussed the gap between the English language of the JBNQA Treaty and how it was originally explained and understood in *iiyiyuimuwin*. What follows is paraphrased from what he has written and also told to the *Chaashtipishtihch* with explanations by the *Chaashtipishtihch*. He said that we negotiated the Treaty to protect our land, have our governance recognized and, with the JBNQA Section 14, to have control over health and social services and ensure they were of the same quality as elsewhere. That is what the Treaty gives us in the written English text. But importantly, our fight was based on our *liiyiyu* aspirations to run our own institutions, what we call self-government, and not to be bulldozed by Canada, Quebec or Hydro Quebec.

According to Dr. Awashish, when we came “out of the bush” in 1971 to begin fighting for our rights, we were moving into new territory in Canada. There were no Indigenous models for what we were doing. Dr. Awashish went on to recount that we succeeded with our court cases and negotiations, but only in part. Right away from 1975 the changes came very quickly for us. By 1978 we were operating a Quebec regional health and social services entity and providing regional and local services. The CBHSSJB was generally modelled on the Quebec health and social services bodies in effect at the time, but with *liiyiyu* governance of the organization through a Board of Directors composed of a majority of *liiyiyuch*.

Dr. Awashish stressed it is important to remember that the changes happened fast, and in a context where the terms of our Treaty were not immediately respected in many important regards. For instance, the CBHSSJB struggled financially for over two and a half decades until Treaty funding obligations for the CBHSSJB were finally addressed.

From the perspectives of the *Chaashtipishtihch*, given the context where meeting payroll for clinic nurses was balanced against paying airfares to send ill patients to hospital in other regions, our aspirations for incorporating *liiyiyu iitaayihtimuwin* and *liiyiyu liyituuwin* in services were effectively put on hold for over twenty-five years until the successful negotiations resulting in the historic Paix des Braves agreement between the Eeyouch and Quebec in 2002, followed by the Cree-Quebec Health Agreements and Funding Frameworks (concluded as of 2005 and onwards) contemplated by the Paix des Braves.

Importantly during this period from the inception of the CBHSSJB to the mid-2000s, when youth protection services were seriously underfunded, the demands for services had increased exponentially during the construction developments around the James Bay hydroelectric project.¹⁶

So why didn't our *liiyiyu* institutions reflect our *liiyiyu* aspirations for *liiyiyu iitaayih timuwin* and *liiyiyu liyituuwin*?

- We started too early, before Indigenous aspirations for their institutions had become a norm.
- We started out too quickly and were immersed in extremely complex bureaucratic pressures without adequate resources but with many obligations and responsibilities.
- Because we had already “built” our health system on an old Quebec model, we didn't need to innovate.

Until today.



Cree Family Value:
Hope

16. From recent internal documents of the DYP shared with the Chaashtipishtihch, the percentage of youth in Eeyou Istchee aged 0 to 17 and under the DYP through the YPA accounted for 20.8% of all youth in 2018-19; 25.8% of all youth in 2021-22; and 24.9% of all youth in 2023-24. For historical statistics, see also Torrie J (ed). 2005. Torrie J, Bobet E, Kischuk N, Webster A. Evolution of health status and health determinants in the Cree Region (Eeyou Istchee); Eastmain 1A Powerhouse and Rupert Diversion Sectoral Report. Vol.1. Series 4. # e Report on the Health Status of the Population. Cree Board of Health and Social Services of James Bay. Pp. 57-59. And Vol. 2, 36-38.

D

Who Is and Has Been Responsible for a Child in Eeyou Istchee

D.1. Phase One: Self-Determination and Introduction

D.2. Phase Two: The *Indian Act*

D.3. Phase Three: The *Indian Act* Enforced

D.4. Phase Four: Coming Out From Under the *Indian Act*

D.6. Phase Five: Return to Self-Determination



D.1.

Phase One: Self-Determination and Introduction

The story of who has been and is responsible for children in general in Eeyou Istchee can be discussed in five phases. *liiyiyiuch* share this history with other First Nations but not with the general public. However, different First Nations peoples went through the phases at different time periods depending upon where they were living in Canada.

In the first phase, the parents, extended family and community were responsible for caring for children. Before the *Indian Act*, *liiyiyiuch* had “self-determination” in their childcare. The traditional approach to supporting children who were not being properly or fully cared for by their parents involved the children being taken in by other families, whether they were related or not. These traditional approaches to supporting children and their families have always been part of Eeyou custom. It continued through the centuries following the arrival of the Hudson Bay Company and other traders and even during the enforcing of the Indian Act on families in Eeyou Istchee, and the development of the Cree Youth Protection Department.

This period lasted longer in Eeyou Istchee than for other Indigenous peoples in many areas to the south.

This began to change when the Indian Act was first adopted in 1876 and gave the Government of Canada legal authority over “Indians” (phase 2).¹⁷ However, in the area that is now called Northern Quebec, this control was effectively not put into practice widely for the Eeyouch until much later.

The third phase began when the *Indian Act* was enforced in Eeyou Istchee, including the sending of “Indian” children away to residential schools and restricting *liiyiyiuch* from hunting and fishing. During this phase the Government of Canada was legally responsible for protecting “Indian” children from harm which involved periodic visits from a visiting social worker in areas of southern Eeyou Istchee.¹⁸ There were no “services” as such. This responsibility was gradually turned over to provincial authorities in a somewhat haphazard process.

In the fourth phase, Eeyouch began a process of coming out from under the application of the *Indian Act* as a result of the *James Bay and Northern Quebec Agreement* (JBQNA), which resulted in the CBHSSJB being responsible for health and social services in Eeyou Istchee, including youth protection services, pursuant to JBNQA Section 14. This process is still happening with some other First Nations, but for *liiyiyiuch* the change happened, as someone said in the consultations, “almost overnight” with the coming into effect of the JBNQA. Elsewhere during this fourth phase, provincial youth protection/child welfare agencies became increasingly involved with “Indian” child protection and certain new Indigenous-led agencies began to develop across the country.

The fifth phase is defined by self-determination and in Eeyou Istchee, reassertion of *liiyiyiutipeyihchichesuu*.

17. The *British North America Act of 1867*, now the *Constitution Act, 1867*, specifically allocated responsibility for “Indians and Land reserved for Indians” to the federal Parliament: *Constitution Act, 1867 (U.K.)*, 30 & 31 Vict., c. 3, s. 72, para. 24 reprinted in R.S.C. 1995, App. II, c. 5.

18. Torrie, J. et al. Vol. 1, 93.

D.2.

Phase Two: The *Indian Act*



In Eeyou Istchee, every liyiyiu has either lived under the *Indian Act*,¹⁹ which was first adopted in 1876, or this was the case with their parents, grandparents and up to many times great grandparents, all of whom were legally “wards” of the Canadian government under this law.²⁰ This separates the family histories of liyiyiuch and other First Nations peoples from the histories of all other Quebec citizens.

Long before youth protection services came to Eeyou Istchee, the *Indian Act* had already made it lawful for official services to intervene at will in how liyiyiuch cared for and raised their children. Technically, every Canadian “Indian” was under the provisions of the *Indian Act*. But how and when the *Indian Act* was actively enforced over First Nations peoples depended, in practice, upon when they began to become displaced from their traditional territories by settlers. The *Indian Act* was a legal mechanism that allowed this to happen and the process followed the settlers, in time and place. As a result, in Northern Quebec, although the *Indian Act* was technically in force over “Indians”, active interventions through the Act only happened decades after they were implemented in other areas further south in the province, and in other provinces.

19. Indian Acts: 1876, 1880, 1886, 1951, 1985. CAID. Library/Law Documents/Select Laws. Canadian and International Laws Affecting Indigenous Peoples Accessed July 6, 2025.

20. Hurley MC. November 23, 2009. The Indian Act. Social Affairs Division. Parliamentary Information and Research Service.

[The Indian Act / \[by\] Mary C. Hurley. : YM32-6/09-12E-PDF - Government of Canada Publications - Canada.ca](#). Accessed July 6, 2025.

D.3.

Phase Three: The *Indian Act* Enforced

Under the *Indian Act*, “Indians” were “wards” of the federal government. From the 1930s, the authority of the *Indian Act* to move children at will from their families began to be slowly applied to the education of Eeyou children and youth. It began in southern areas of Eeyou Istchee with certain children sent to the Chapleau Indian Residential School where they stayed for years with no contact with their families, and in the north with the two schools on Fort George Island, that received not only Eeyou children but, later, children from other First Nations as well. But in the 1950s, the enforced removal of all Eeyou children from their families became mandatory and standardized across Eeyou Istchee. Some attended the two schools in Fort George, but most were flown or later bused to schools far away from home, in some cases, thousands of miles away.

When mandatory residential schooling for children became enforced in Eeyou Istchee in the 1950s, people in the southern areas were experiencing growing economic destitution and social disruptions within families as traditional land use and social patterns were disrupted in the context of settlers and developments which began in the Abitibi and moved northwards.²¹

Dr. Philip Awashish recently recounted his personal experience with having the *Indian Act* enforced in Eeyou Istchee over the right to use land for hunting and fishing. “We were always told that we had no rights; in the past we were treated as if we had no rights, or no hunting rights to the land. In the 1960s, I remember we had been hunting on our land with my father, they told us we had no fishing rights, or hunting rights under their laws.”²²

Amendments to the *Indian Act* in 1951 effectively gave provinces jurisdiction over “Indian” child welfare/youth protection programs,²³ albeit without any additional funding to support this new responsibility. Initially, Quebec did not accept any responsibility for services provided to “Registered Indians” and Canada did not provide social services in the region to help to mitigate the impact of the social dislocation happening to families. During the 1950s and 1960s, social workers from federal Indian Health Services of the Medical Services Branch of the Department of National Health and Welfare made periodic visits in the southern areas of the region on contract with services in the Abitibi and that appears to have been the extent of services offered to the people in Eeyou Istchee.²⁴

21. Torrie, J. et al. Vol 1., 92-93; Vol. 2, 177-179.

22. Meeting of the AUS Task Force, December 2, 2024, Montreal.

23. As mentioned elsewhere in this report, the term “youth protection” is used in Quebec, while other provinces and the Government of Canada typically use the term “child welfare” or “child and family services”.

24. Torrie et al. Vol. 1, 93; Vol.2. Chapter 7. At this time social services were managed through the Indian Affairs Department while health services were under the Indian Health, Medical Services Branch as a “humanitarian” gesture on the part of the federal government who always claimed at the time in annual reports they had no inherent legal responsibility for “Indian” health. See Mashford & Pringle A, Webb D. Appraising Canada’s 1979 Indian Health Policy: Informing co-development of distinctions-based Indigenous health legislation. Can Public Admin. 2023; 66:62–77. [Appraising Canada’s 1979 Indian Health Policy: Informing co-development of distinctions-based Indigenous health legislation](#). Accessed July 6, 2025.

D.4.

Phase Four: Coming Out From Under the *Indian Act*

In these decades, youth protection agencies developed in Quebec and many children, both Indigenous and non-Indigenous, were removed from their families and homes by youth protection authorities and placed with other families or in institutions, with the asserted aim of protecting these children from potential or real harm.²⁵ But the proportions soared when it came to Indigenous children.²⁶ This was also the period of the “‘60s Scoop”, a period during which high numbers of Indigenous children were removed from their families and adopted across Canada, and sometimes into the United States.²⁷

According to data collected in 2008, although Indigenous children made up only 2% of children in Quebec, they still represented 10% of children who were placed outside their homes under the youth protection system.²⁸ Under the guise of protecting neglected or maltreated children, youth protection/child welfare agencies across Canada chose to remove these children from their homes rather than provide supports and resources to the families and communities to ensure the children's well-being.

Iiyiyiuch began their fight to come out from under the Indian Act beginning in 1971 after the Quebec government announced the James Bay Hydroelectric Project. Galvanized by this threat to their very existence, the Cree and Inuit peoples resisted with court challenges and negotiations to finally sign the *James Bay and Northern Québec Agreement* (JBNQA) between the Grand Council of the Crees (of Québec) – as it was then, the Northern Quebec Inuit Association, the governments of Quebec and Canada, and Hydro-Québec and other parties.

Chapter 14 of the JBNQA provides for the creation of the Cree Board of Health and Social Services of James Bay (CBHSSJB) as a health and social services institution of Quebec, but with a special status, along with its jurisdiction over “Category I” lands (exclusively) and “Category II” lands (concurrently with another health and social services “board”).²⁹

In 1978 the CBHSSJB was established officially and responsibility for the delivery of health and social services in the Eeyou communities, including youth protection, transferred from Canada to the CBHSSJB. Responsibility for the financing and legislative implementation of health and social services delivered by the CBHSSJB moved effectively from Canada to Quebec.

25. Joyal, R., Chatillon, C. 1996. Le placement des enfants au Québec, des années 1930 à aujourd'hui. Une mesure trop souvent utilisée? Constatations et hypothèses. *Service social*, 45(2), 31-50. [Le placement des enfants au Québec, des années 1930 à aujourd'hui. Une mesure trop souvent utilisée? Constatations et hypothèses](#). Accessed July 6, 2025.

26. Sinha, V., Trocmé, N., Fallon, B., MacLaurin, B., Fast, E., et al. (2011). Kiskisik Awasisak: Remember the Children. Understanding the Overrepresentation of First Nations Children in the Child Welfare System, Ottawa : Assemblée des Premières Nations. [Kiskisik Awasisak: Remember the Children. Understanding the Overrepresentation of First Nations Children in the Child Welfare System](#) | [Canadian Child Welfare Research Portal](#). Accessed July 6, 2025.

27. Guay, C., Jacques, E., Grammond, S. (2014). “La protection des enfants autochtones: se tourner vers l'expérience américaine pour contrer la surreprésentation”. *Canadian Social Work Review*, 31(2,) pp. 195-209. Sinclair NJ, Dainard S. June 22, 2016 (2024). Sixties Scoop. *The Canadian Encyclopedia*. [Sixties Scoop | The Canadian Encyclopedia](#). Accessed June 15, 2025.

28. Breton, A., Dufour, S. et Lavergne, C. 2012. Les enfants autochtones en protection de la jeunesse au Québec: Leur réalité comparée à celle des autres enfants. *Criminologie*, 45(2), 157-185.

29. JBNQA, paragraph 14.0.5.

The 1970s were a period of great activity when many groups were fighting for and claiming Indigenous rights in Canada, especially following the 1969 release of the federal government's "White Paper" proposal to abolish the *Indian Act*, all treaties, and all recognition of a distinct "Indian" status.³⁰ As set out elsewhere in this report, within this time period, the JBNQA was concluded as the first modern treaty in Canada in 1975.³¹ At the time, Indigenous political organizations were nascent and "Indians" in Canada were still subject to the *Indian Act*.

In 1984, the federal *Cree Naskapi* (of Quebec) Act came into effect which, among other things, effectively replaced the *Indian Act* for the Cree "bands", their federal "reserve" lands³² and their members for most, if not all, intents and purposes.

With these major changes, Iiyiyiuch achieved significant levels of self-government, which were further solidified, expanded and enhanced by the *Paix des Braves* Agreement in 2002 with Quebec. This Agreement opened the way to a new partnership between the Eeyouch and Quebec based on mutual respect and Nation-to-Nation collaboration, and in relation to the JBNQA Section 14 funding obligations specifically, it led to the Cree-Quebec Health Agreements and Funding Frameworks (concluded as of 2005 and onwards), and the *New Relationship Agreement* of 2008 with Canada as well as subsequent agreements with both levels of government.

As described in Section C of this report, the intent of the Eeyou negotiators of the JBNQA included providing for Iiyiyiu rights to self-government and to continue Iiyiyiu Iiyituuwini. However, the changes for Iiyiyiuch came very suddenly, and in certain cases, seemingly without sufficient time to consult and plan how services based on Iiyiyiu Iiyituuwini could be organized. The result was that the CBHSSJB was similar in many respects to other health and social service bodies in Quebec at the time the CBHSSJB was established, including the nature of its relationship with the Quebec Minister of Health and Social Services, and with the Iiyiyiu iitaayihimuwini mostly evident in Eeyou governance of the CBHSSJB on the basis of a majority of Iiyiyiuch on its Board of Directors.

Along with other health and social services in the territory of the CBHSSJB, the CBHSSJB effectively became responsible for applying Quebec's new *Youth Protection Act* which was passed in 1978 and came into effect in January 1979. Since that time, these services have been based on the authority and responsibility of the CBHSSJB to apply Quebec's *Youth Protection Act* (YPA) as well as aspects of the federal *Youth Criminal Justice Act*³³. To carry out these responsibilities, the CBHSSJB has its own Department of Youth Protection, led by a Director of Youth Protection.

From the outset, youth protection services within the CBHSSJB were seriously underfinanced (which was also the case more generally for health and

30. Government Statement on Indian Policy (The White Paper), June 25, 1969. [WhiPap1969.pdf](#). Accessed July 6, 2025.

31. In 1982, the JBNQA received constitutional protection as a treaty under the Constitution Act, 1982 meaning effectively that the rights of the Crees provided for in the JBNQA are recognized and affirmed as existing treaty rights. This includes Cree rights for the CBHSSJB to provide health and social services in its territory, including youth protection, and related funding guarantees provided for in Section 14 of the JBNQA.

32. Which essentially became "Category 1A" lands.

33. At its first adoption it was known as the *Juvenile Delinquent Act*.

social services in the territory), until the mid-2000s when the Quebec government effectively started to fulfill its treaty funding obligations relating to health and social services in Eeyou Istchee.³⁴ At the same time, the original version of the YPA did not accommodate adaptations for the protection of Indigenous children and youth; nor were community-based preventative approaches to youth protection part of the mindset of the time. These factors were to shape the development of youth protection services and approaches in Eeyou Istchee in the subsequent decades.

As the CBHSSJB was generally developing and implementing its health and social services across Eeyou Istchee at local and regional levels, its youth protection services were also developing. The CBHSSJB Department of Youth Protection began with a very small workforce and was based on a model taken directly from services offered in the south under the YPA, with little adaptation for Iiyiyiu culture, values and realities. So even though the CBHSSJB had authority over youth protection, it was managing with inadequate funding, a lack of training for workers and a practice within the Department that did not align with Iiyiyiu culture and traditions.³⁵

Quebec's YPA has been adapted and improved since 1979, and now includes provisions enabling an Indigenous Nation to create a special youth protection system within the framework of the YPA. In 2016, the YPA was amended to recognize kinship or customary care of Indigenous children by family members or relatives; the cultural identity of children had to be considered when placing an Indigenous child, and the placement family or organization was expected to preserve that cultural identity. The involvement of the Indigenous governments was expanded in the case of an Indigenous child from their Nation being reported to a youth protection department outside of territory.

Further, in 2018 the Civil Code of Quebec was modified to include customary adoption and customary guardianship for Indigenous children, along with certain related changes to the YPA at the time. The YPA was again amended in 2022 to include a chapter specific to Indigenous children, consolidating existing provisions specific to Indigenous children and also adding significant new provisions applicable specifically to Indigenous people. Among other things, the YPA now recognizes that Indigenous people are best placed to respond to the needs of their children, and that cultural safety is essential to the well-being of Indigenous children. These changes in the YPA favour keeping Indigenous children within their families, communities and Nations.

These changes to the YPA have been further strengthened by the 2020 federal law known as Bill C-92 – the *Act respecting First Nations, Inuit and Métis children, youth and families* – which was developed in response to, among



Cree Family Value:
Courage

34. By virtue of the historic Paix des Braves agreement between the Crees and Quebec (2002) which opened the way to a new partnership based on mutual respect and Nation-to-Nation collaboration, and in relation to the JBNQA Section 14 funding obligations specifically, the Cree-Quebec Health Agreements and Funding Frameworks (concluded as of 2005 and onwards). See *Background and Complementary Information to Maamiinupititaaui: The Final Report from the Chaashtipshtihch*.

35. Torrie, et al. Vol.1, 59, App. B. 111, App. C. 116; Vol.2, 233-245.

D.5.

Phase 5: Return to Self- Determination

other things, the recommendations of the Truth and Reconciliation Commission concerning youth protection services provided to Indigenous children and families.³⁶ Bill C-92 affirms the inherent right of Indigenous peoples to govern their youth protection services and establishes principles and standards that apply to all youth protection services provided to Indigenous children across Canada, including youth protection services operating under provincial law, like in Eeyou Istchee.³⁷ The first part of Bill C-92 sets out the standards to be met by all youth protection workers and organizations providing services for Indigenous children, while the second part describes a process through which Indigenous governments can adopt their own youth protection laws.

Similarly, the CBHSSJB's Department of Youth Protection is also responsible for providing services under the federal law known since 2003 as the *Youth Criminal Justice Act* (YCJA),³⁸ which establishes processes for dealing with youth who have committed a crime. While significant resources have been dedicated to building infrastructures in Eeyou Istchee to hold youth in custody, a literal interpretation of procedures has become entrenched when intervening in cases of youth crime, rather than efforts to foster clinically and culturally based approaches. There remains much to do both in preventive and intervention programs across the communities.

Since the JBNQA and subsequent agreements with provincial and federal levels of government, Iiyiyiuch have unique Nation-to-Nation relationships with Quebec and Canada which are fundamentally grounded in the JBNQA Treaty, which among other things gives the CBHSSJB responsibility for youth protection services in Eeyou Istchee pursuant to JBNQA Section 14. This unique position of the CBHSSJB is also reflected in the Quebec law that is intended to implement Section 14 of the JBNQA and which governs the CBHSSJB, *An Act respecting health services and social services for Cree Native persons* (referred to as Chapter S-5³⁹).

As a result of the JBNQA, Chapter S-5 and the YPA, the responsibility for youth protection and the forms it may take in Eeyou Istchee lies with the CBHSSJB's Department of Youth Protection. While the Department of Youth Protection must follow standards established in the YPA and Bill C-92 applicable specifically to Indigenous children and youth (many of which are quite similar), the CBHSSJB retains its status as having the authority and responsibility for youth protection services in its territory. Further, the funding to support this youth protection responsibility is enshrined in the treaty rights set out the JBNQA.

Eeyou customary adoption and other forms of customary care such as customary guardianship are aspects of Iiyiyiu traditional life, and are also Cree rights confirmed by the JBNQA. The Chaashtipishtihch understand that in customary adoption (distinct from guardianship), a child who is not being cared for by parents is cared for by

36. The term "youth protection" is used in Quebec, while other provinces and the Government of Canada typically use the term "child welfare" or "child and family services".

37. For details on Bill C-92, see Section K and Appendix C.

38. This act supplanted the Young Offenders Act (1984-2003), which in turn had replaced the Juvenile Delinquent Act (1908-1984).

39. By virtue of its legislative citation: CQLR, c. S-5.

another family, which may or may not be related to the child, and the child becomes part of that family, according to the custom. However, the Chaashtipishtihch learned that for years the legal effects of customary adoption frequently went unacknowledged by government officials. The lack of legal recognition meant that the liyiyiuch caring for the child in this way could not make many important official decisions for the child, including decisions around education and health. Changes to Quebec law in 2017 helped to address this problem so that the legal effects of customary adoption and customary guardianship can now be recognized easily by government authorities through a certification process under the authority of the relevant Indigenous “competent authority”.⁴⁰

The Chaashtipishtihch learned that through the Cree certification process of an liyiyiu customary adoption, the adoption is “permanent” and the adopting parents effectively assume the rights and responsibilities related to raising the adopted child as if the child were theirs by birth. At the same time, this certification of customary adoption breaks the legal bond between the biological parents and the child (filiation).

Through the Cree certification process of an liyiyiu customary guardianship, the legal effects can be understood to be temporary, not permanent. While the parental rights and responsibilities of the biological parents are effectively suspended during the guardianship, they are resumed if the period of guardianship comes to an end, or otherwise comes to an end automatically when the young person reaches the age of majority at age eighteen.

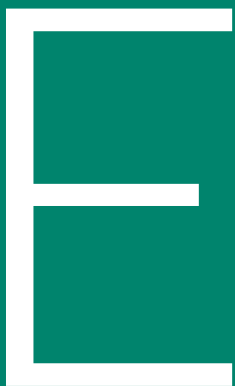
The decision to proceed with customary adoption or guardianship follows the applicable liyiyiu custom, and is made by the biological parents, the adopters or guardians, and sometimes the child and extended family members. According to liyiyiu custom, a critical deciding factor is always what is best for the child (the “best interests of the child”).

It was clarified to the Chaashtipishtihch that the Cree Nation Government is not involved in this customary decision, although a certification from the Cree Nation Government can be sought to facilitate the recognition of the legal effects of a customary adoption or guardianship. If this certification is sought, it would also be coordinated with the CBHSSJB’s Department of Youth Protection and with a local committee established by interested Cree First Nations.

Essentially, the Chaashtipishtihch understand that the certification by the Cree Nation Government of a customary adoption or guardianship formalizes a customary event that has already take place, according to the customary decision of the family members involved. The child is not being placed by the Cree Nation Government, the CBHSSJB or a Cree First Nation in a new home, but rather has already been in that home, and is being cared for there, according to the liyiyiu custom.

The Chaashtipishtihch see these approaches to customary care, and the related Cree certification process, as a long-term solution to the over-dependence on youth protection services in Eeyou Istchee and one part of the process of bringing liyiyiu liyituuwin into how we provide security and safety for children and youth.

40. The Cree Nation Government serves as this “competent authority” for the Eeyouch of Eeyou Istchee, and works in close collaboration with other Cree entities such as the CBHSSJB and interested Cree First Nations. Please refer to *Background and Complementary Information to Maamiinupitihtaau: The Final Report from the Chaashtipishtihch* for more information on this subject.



This section examines the current organizational system of youth protection and youth criminal justice within the CBHSSJB and identifies some specific features which blocked, or advanced, efforts to revise and transform aspects of the system in the past. It begins with a short discussion of the institutional context of the CBHSSJB.

Chapter two looks at the gap between how services in Eeyou Istchee have yet to be transformed within the existing legal framework. As mentioned in earlier sections of this report, the YPA provides greater scope for cultural and local adaptations in its implementation than is seen in the practices in Eeyou Istchee.

Chapter three then documents the continuous efforts within the CBHSSJB to improve the system in the past with some successes and some inadequacies. Significantly, the *Chaashtipishtihch* believe that if previous recommendations and pilot projects had been carried through, the AUS Task Force and Commission would not have been needed because we would already be running a different system today.

The Current System of Youth Protection and Youth Criminal Justice

E.1. Institutional Context

E.2. The Gap Between the Laws and the Practice

E.3. Past Efforts to Improve the System



E.1.

The Institutional Context

The chapter presents an overview of some features of the CBHSSJB which may currently hinder lasting transformation of the youth protection and youth criminal justice system.

In the experience of the *Chaashtipishtihch*, social and psychosocial services have been historically less developed within the CBHSSJB relative to physical health services. Since its inception, the CBHSSJB's primary focus has been on physical health services which have been and are well organized and professional. This was the model of services inherited by the CBHSSJB from federal Medical Services in 1978, and it also reflected the predominant service model applied by Quebec at that time.

It is interesting for the *Chaashtipishtihch* to speculate how services might have been thought of if an *liiyiyu iitaayihtimuwin* had specifically informed the planning of services with the *liiyiyu liyituuwin* in those early days. For instance, a recurrent example of this perspective, in the view of the *Chaashtipishtihch*, is reflected in past reports on diabetes in the region,⁴¹ which would typically conclude by saying that the entry point for reducing and better managing the diabetes "epidemic" (or other chronic diseases) was through strong psychosocial services. Only recently, the NISK model for services in Chisasibi is incorporating social and psychosocial services into the service offer for clients with diabetes.⁴² It is not surprising to the *Chaashtipishtihch* to note that in 2024 the Board of Directors received a report from the

Miyupimaatisiun Group showing statistically significant improvements in how clients with diabetes were managing their illnesses. For the *Chaashtipishtihch* it is important to keep in mind that historically social and psychosocial services have been a weak point for the CBHSSJB.⁴³

The *Chaashtipishtihch* see the CBHSSJB as a hierarchical organization controlled generally at the regional level.⁴⁴ In the past, the CBHSSJB has not supported certain initiatives at the community level although these might have made a difference in providing preventive services. The hope is that this will remain in the past as the *Chaashtipishtihch* recommend that local initiatives will be supported, tracked and be accountable through the Miyupimaatisiun Committees.⁴⁵

Under the YPA and the YCJA, the CBHSSJB, specifically the Director of Youth Protection acting under the direct authority of the Executive Director of the organization, has sole authority to manage youth protection and some aspects of youth criminal justice services in Eeyou Istchee. The Executive Director also has certain specific responsibilities, particularly with respect to a young person placed in an intensive supervision unit.

These services are different from the authority exercised by the CBHSSJB to manage most other health and social services because they are not always provided voluntarily and clients do not always have the right to refuse services.⁴⁶

41. CBHSSJB. Annual Report 2013-14. P.15. [Annual Reports of the CBHSSJB | Cree Health](#). Accessed July 6, 2025.

42. See Section F.2.2.

43. Torrie et al. Vol.1, 67.

44. Torrie et al. Vol. 1, Section 5.8, p. 67 for the historical continuity.

45. See Section F.3.6: *Local Control*.

46. This is similar to treatment orders in clinical care when the person is unable to consent to treatment.

To transform YP services to *liiyiu iitaayih timuwîn* and *liiyiu liyituuwîn*, the *Chaashtipishtihch* believe that the goal must be to provide preventive programs and intervention services for families in distress before the strong arm of the DYP needs to intervene when children's security is at risk. According to the *Chaashtipishtihch*, this is the way that potential clients could be diverted away from youth protection services before the DYP needs to become involved. For this to happen, specific kinds of services targeting this very high-risk group would need to be offered by the social services of the CBHSSJB in collaboration with relevant Eeyou partners in the communities, such as the Cree First Nations, the Cree Nation Government and other Eeyou entities.

The *Chaashtipishtihch* heard repeatedly during the consultations that these services do not yet exist within the CBHSSJB so, as they also heard during the consultations, the DYP has been used for many decades as the entry point for families in need of social services. The result is a DYP always trying to deal with too many cases, a portion of which would more properly be handled by social services. This point came up in the consultations when participants complained to the *Chaashtipishtihch* that when they reported or signaled a case to the DYP, the report was not necessarily retained. As the *Chaashtipishtihch* commented, it is possible these cases were not retained because they were more properly social services cases but this becomes an issue when the DYP is used as the point of entry for all of these kinds of social issues.

As YP and YCJ services must remain dedicated services, the CBHSSJB By-law on Youth Protection gives the Director of YP the authority to *"Involve all CBHSSJB departments which contribute to the mission of youth protection by supporting the Director of Youth Protection in their application of the Youth Protection Act"*, while, also relying on *"a network of support from other CBHSSJB Departments..."*⁴⁷

The *Chaashtipishtihch* were not told of any examples where the Director of YP has called upon the "network of support" in a systematic way. However, they were told many times that the services operate in "silos" which is a way of saying there is no close communication and collaboration within the organization, and this was voiced at regional and local levels.

As Chapter 3 below discusses, many excellent initiatives have been started within the CBHSSJB but implementation has not been completed. Specifically, for YP services, this includes pilot projects and protocols to clarify roles and communication patterns with partners. The *Chaashtipishtihch* were not made aware of any reports concerning accountability for the lack of implementation of these pilot projects and protocols within the organization.

The CBHSSJB Public Health Group did not participate significantly in the consultations although they have a mandate for developing prevention programming and for designing programs for at-risk groups. The Laurent Commission specifically mentioned that the youth protection crisis is a serious public health issue for Quebec and that the Public Health authorities have a major role to play.⁴⁸

And finally, as discussed in the findings of this report, a major problem with YP services is the turnover of staff which creates instability in the team and is a block to the continuity for improvements. The *Chaashtipishtihch* also experienced this phenomenon within the AUS Task Force where there has been very little stability of personnel.

47. Section F.2.2.

48. Commission spéciale sur les droits des enfants et la protection de la jeunesse (Laurent Commission). April 2021. *Instaurer une société bienveillante pour nos enfants et nos jeunes*. Gouvernement du Québec. P. 92.

E.2.

The Gap Between the Laws And the Practice

E.2.1.

The Youth Protection Act

The purpose of the Youth Protection Act is to protect children and youth (0-17 years old) whose security or development is in danger, aiming to prevent and end situations that put them at risk, and supplementing the Civil Code of Quebec rules regarding adoption.

The Youth Protection Act includes certain premises and principles which recognize the child's rights to protection and that are meant to guide all social and judicial interventions.

a) When to intervene

The Youth Protection Act is not inherently designed to do prevention or early intervention with vulnerable families.⁴⁹ The missions of prevention, early intervention, and treatment are primarily addressed by other legislations.⁵⁰

For example, the purpose of the Act respecting health services and social services for Cree Native persons is worded as follows:

- a) *"improve the state of the health of the population, the state of the social environment in which they live and the social conditions of individuals, families and groups;"*
- b) *"make accessible to every person, continuously and throughout his lifetime, the complete range of health services and social services, including prevention and rehabilitation, to meet the needs of individuals, families and groups from a physical, mental and social standpoint..."*⁵¹

The right of individuals to receive the appropriate health and social services is also outlined in the YPA: *"The child and the parents are entitled to receive, with continuity, in a personalized manner and with the required intensity, health services and social services that are appropriate from a scientific, human and social standpoint, taking into account the legislative and regulatory provisions governing the organization and operation of the institution providing those services, as well as its human, material and financial resources."*⁵²

This right is upheld by providing therapeutic services to youth and families, including professional psycho-social services, specialized services and referrals to community supports. However, these services, including outreach programs designed to engage more vulnerable families, are currently inadequate in Eeyou Istchee.

YP workers must inform youth and families about the services that may be beneficial for them, refer them to these services, and support their participation, as outlined in the child's intervention plan (now called the Miyupimaatisiun plan).

As per their mandate, the YP workers do not provide all services directly, but they must support youth and families in addressing the issues that led to YP involvement. They can offer individual counselling, parental coaching and family meetings, as outlined in the YPA, beyond court-ordered measures of control and surveillance.

49. However, as noted in *Background and Complementary Information to Maamiinupitihtaau: The Final Report from the Chaashtipshtihch*, the YPA mandates a DYP to prevent the recurrence of situations in which the security or the development of a child is in danger (e.g. Sections 2, 51.1 and 52).

50. Notably, YPA paragraph (d) of subsection 131.1 provides that the provisions of the YPA applicable specifically to Indigenous people aim to foster the priority intervention of health and social services providers to prevent the situation of an Indigenous child from being taken in charge by a Director of YP.

51. *Act respecting health services and social services for Cree Native persons*, chapter S-5, 1991, General Provisions.

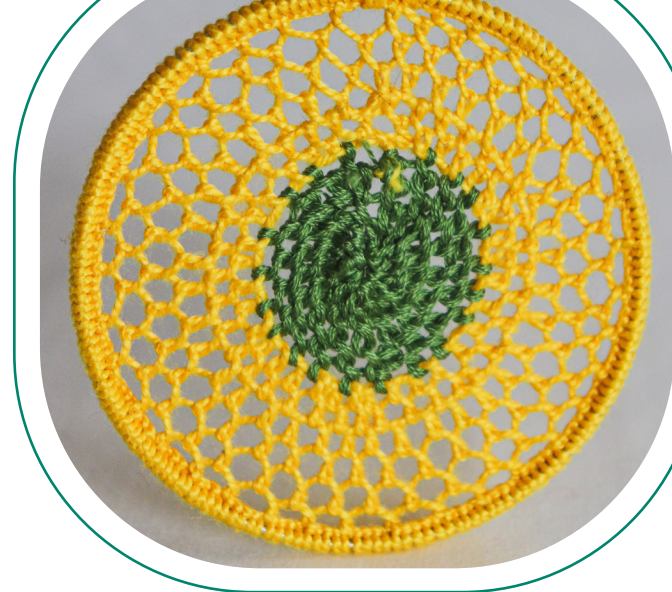
52. *Youth Protection Act*, CQLR, c. P-34.1, Art.8.

Throughout the consultations, this particular function of aid, counsel and assistance of the YP services has been found by the *Chaashtipishtihch* to be significantly deficient, both in terms of developing intervention plans with families and collaborators, but also in terms of actual follow-up of children once the YP orientation has been completed and the case moves to the “application of measures” phase. Essentially, it appears to the *Chaashtipishtihch* that youth protection services in Eeyou Istchee evolved historically with a focus on applying the law in an authoritarian manner, with an emphasis on investigating situations rather than supporting families, and generally do not use culturally adapted practices to address the situations of neglect and maltreatment.

b) A law of exception means a community and a network of services dedicated to the welfare of the children, in a mobilized and coordinated manner

The *Youth Protection Act* is a law of exception, which means that it is only used when other legislation and social services are not enough to ensure the safety or development of a child, mainly because the parents are not assuming their parental responsibilities in keeping their children safe, supervised, educated and adequately provided for.

The YPA recognizes that some situations require an intervention by the DYP, but it compels the YP workers to carefully screen for elements that would highlight the protective factors which can compensate for the risk factors.



The YP worker must therefore enquire what positive/protective actions the parent(s) are taking and if there are people or services that can come to the aid of the family. If so, could these safety measures be enough to rule out the need for the YP services to be involved? Is the family willing to receive those services?

This balanced and personalized approach is crucial, especially under the new YPA rules for Indigenous children reported for neglect, which require YP workers to consider the following factors:

- a) *“The measures taken by the parents to meet the child’s fundamental needs and the cooperation offered to the providers offering health services and social services to the community.”*
- b) *“The services offered by the service providers to support the parents in the exercise of their responsibilities and to help them meet those needs.”⁵³*

In its introduction, the YPA states that protection of children is a collective responsibility and that the YP services should be used as a last measure: *“...as the protection of children is a collective responsibility that requires the mobilization and collaboration of all the resources in the community in order to limit the State’s authority intervention in the lives of families under this Act to exceptional situations.”⁵⁴*

53. Ibid, s. 131.6.

54. *Youth Protection Act*, CQLR, c. P-34.1, Preamble.

The CBHSSJB By-Law on youth protection⁵⁵ was adopted in 2017 and worded to reflect the idea that the DYP must be able to rely upon the collaboration of all CBHSSJB departments and other entities in the community.

- However, the consultations of this Commission highlight to the *Chaashtipishtihch* how isolated the YP services are within the CBHSSJB.
- Accessing first-line or specialized services remains challenging in the view of the *Chaashtipishtihch*, with participants citing inefficient pathways and reluctance from some services to work with young people and their families.
- Case discussions and co-interventions among different services of the CBHSSJB seem to be the exception rather than the rule based on the understanding of the *Chaashtipishtihch* further to the consultations.
- Collaboration protocols with CMC services and with YHS were developed but are not consistently applied, based on the information received by the *Chaashtipishtihch*.
- The *Chaashtipishtihch* also understand that the joint Protocol between the CBHSSJB (DYP) and the Cree School Board was developed and adopted but has not been implemented properly.
- It seems to the *Chaashtipishtihch* that insufficient information is shared between YP and collaborators, in spite of the new provisions of the YPA enabling the communication of information for the purpose of providing needed services. This impedes collaboration among professionals within the CBHSSJB and with external partners, with the effect that

youth, families, and other caregivers may not receive essential, necessary support to address situations that may endanger their children, according to the *Chaashtipishtihch*.

- Additionally, it seems to the *Chaashtipishtihch* that existing prevention and early intervention services are insufficient to address the needs of families to prevent their children from being put at risk.
- The *Chaashtipishtihch* are also of the view, based on the information that they considered, that vulnerable families are inadequately supported, which results in children being placed outside of their parents' care via a YP intervention rather than benefitting from a planned S-5 respite placement, such as when a single parent requires hospitalization and has no alternative caregiver for their children while they are away.

The YPA further clarifies the expectations regarding the involvement of not only parents but the whole community:

"Institutions, bodies and persons having responsibilities towards a child under this Act and persons called upon to make decisions with respect to a child under this Act shall:

- a) *encourage the participation of the child and the parents, and the involvement of the community;*
- b) *cooperate with each other and see to obtaining in an optimal manner the cooperation of resources in the community; they act in concert with those resources willing to cooperate with them, to ensure that their interventions are coordinated."*⁵⁶

55. By-law on youth protection and on the application of the Youth Protection Act CBHSSJB # 01/157/17 March 13, 2017. See Section F.2.2.

56. Op. cit., s. 4.5

The *Chaashtipishtihch* understand that this means that if the YP ask for services or support from other people, departments or organizations that deal with children, everyone is expected to work together.

This collaboration is especially important to the *Chaashtipishtihch* when they think about the dual purpose of the YP intervention, defined as follows in Section 2:

*“The purpose of this Act is to protect children whose security or development is or may be considered to be in danger. The Act also aims to put an end to and prevent the recurrence of situations in which the security or the development of a child is in danger.”*⁵⁷

In their view, the collaboration and the coordination of services must occur **during** the intervention of the YP but also **afterwards**, to ensure that the child is protected in the future as well.

c) The right to be informed and to be consulted

As per the YPA, the rights of children and parents include the right to be informed about their rights, about what to expect from the YP involvement, to have *“the opportunity to present their points of view, express their concerns and be heard at the appropriate time during the intervention.”*⁵⁸

→ The *Chaashtipishtihch* found that information leaflets provided to clients of the Cree YP services are outdated; they are not available in the Cree language and, in their view, are not adapted to the organization of services in Eeyou Istchee.

→ The *Chaashtipishtihch* also found that while the children and parents are usually interviewed in the process of initially assessing the situation (their opinion must be included in the reports produced by the YP workers), the opportunities to discuss plans to correct the situation and to ensure the security and development of the children are currently limited, based on the input of participants in both the community and internal CBHSSJB consultations.

The *Chaashtipishtihch* were informed that processes were developed in other regions to create a forum (such as orientation tables, permanency planning meetings and personalized review meetings) during which families and stakeholders can contribute to the planning and the review of YP situations.

→ However, based on the information received by the *Chaashtipishtihch*, this practice has not yet been introduced at the CBHSSJB DYP department although they understand that the newly trained Cree reviewers are anticipating holding personalized reviews in the next year or so. Minimally, the *Chaashtipishtihch* think that there should be a discussion with the family, during which the YP worker presents their clinical hypothesis and recommendations. Based on the consultations, it also seems to the *Chaashtipishtihch* that the crisis mode of the department and the apparent lack of comfort of the YP workers to chair such meetings often seem to prevent these meetings from happening so far.

57. Ibid, s. 2

58. Ibid, s. 6.1 c)

Finally, the *Chaashtipishtihch* were told that the YPA aims to mobilize the families involved in addressing the factors that are putting their child's security and development at risk by favoring the use of voluntary agreements, but the YPA also contains several provisions to frame the use of the justice system, such as the Youth Court, when necessary.

Further to the consultations and other information considered by the *Chaashtipishtihch*, the judicial process is cumbersome and often alienating for those concerned. For instance, it reportedly often fosters an adversarial atmosphere between families and the DYP, rather than promoting collaborative decision-making. The *Chaashtipishtihch* note the possibility to use more consensual approaches that have been included in the YPA, such as settlement conferences or case management conferences⁵⁹. Given the stress and cultural clashes in court proceedings, consensual processes align better with Cree conflict resolution methods from the perspective of the *Chaashtipishtihch*.

→ While the *Chaashtipishtihch* understand that there are many possibilities to avoid judicializing a case in YP, the pressure to come to a decision quickly and the natural resistance of many families at the beginning of YP involvement seems to the *Chaashtipishtihch* to create a real challenge for the YP workers. This seems to them to contribute to a disproportionate number of situations being brought to court instead of having reached agreements on voluntary measures.

d) Time is precious

The YPA also speaks of the necessity to: *"act diligently to ensure the child's security or development, given that a child's perception of time differs from that of adults"*⁶⁰

Standards of practice were developed in 1988 by the Quebec Ministry of Health and Social Services⁶¹ which established timelines by which the reports made to the YP services are to be processed.

The consultations suggest to the *Chaashtipishtihch* that Cree YP services historically faced challenges in adhering to the standards due to the department's incomplete structure and staffing, insufficient training for workers, and a high volume of reports. The YP was often misunderstood as the entry point to services in the CBHSSJB, as set out elsewhere in this report.

→ The *Chaashtipishtihch* understand that this resulted in significant delays in processing reports but also in completing evaluations of situations of children, developing mobilizing protection plans and obtaining final judgements based on internal Cree DYP information.

Of note is that all the YP services in the province have been struggling to meet the timelines and the MSSS initiated a revision of these standards of practice in 2020.⁶²

Nevertheless, the *Chaashtipishtihch* note that the CBHSSJB DYP department has accumulated a backlog of reports to process, which they

59. Ibid, ss. 76.0.5, 76.3

60. Ibid, s.4.4 b)

61. Harvey J. (1988). Rapport sur l'analyse des activités de réception et de traitement des signalements, et d'évaluation et d'orientation en protection de la jeunesse, Montréal, MSSS, 82 p.

62. MSSS, 2024. Incarner le changement, Rapport annuel de la directrice nationale de la protection de la jeunesse 2023-2024, Direction générale des services sociaux, p. 9

understand it is still struggling to clear to date, in spite of internal action plans being initiated to correct the situation.

→ Based on the internal Cree DYP information considered by the Chaashtipishtihch, the number of children still waiting for an evaluation of their situation or an intervention plan remains significantly high.

e) Children need roots to grow

According to the YPA, the emotional stability and security of children are considered to be major determinants in ensuring their healthy development. The Chaashtipishtihch were informed that it is for this reason that the law states that maintaining children at home with their parents or returning the children to their care as soon as possible should be favoured, if it is in the children's interest.⁶³

→ The YP data for the Cree territory suggests to the Chaashtipishtihch that a significantly high number of children are being placed outside of their parents' care, which on its face, does not seem to be in line with the spirit of the law in the view of the Chaashtipishtihch. Based on the information received through the consultation process, many of these YP placements are done on an emergency basis and are brief, while other placements get extended for a long period, some until the youth turns 18 years old.

When a child cannot return home, the YP intervention must prioritize first *"entrusting the child to the persons most important to him, in particular the grandparents or other members*

*of the extended family"*⁶⁴; second, to an environment most closely resembling a family environment, e.g. a foster home; or, alternatively, to a readaptation centre which in Eeyou Istchee is the YHS.

That being said, the notion of family and of healthy attachment has to be examined through the lens of the Cree culture and history. Living in more than one family home at the same time or sequentially may not necessarily be negative, given that Cree children often grow up alongside their extended relatives, who become proper attachment figures just as parents typically are. When these informal arrangements are made pro-actively and in agreement with all concerned, the children feel secure and are generally safe.

The modifications made to the YPA in 2022 underscore the obligation to foster the cultural continuity of Indigenous children⁶⁵ and reflect this vision as they indicate the sequence in which the placement of an Indigenous child must be considered:

"Where an Indigenous child must, under this Act, be entrusted to an alternative living environment, the living environment chosen must be the one that, considering the interest of that child, is suitable for him in the following order of priority:

- (a) the child's extended family;*
- (b) members of his community;*
- (c) members of a different community of the same nation as the child's nation;*
- (d) members of a nation other than the child's nation;*
- (e) any other environment."*⁶⁶

63. Ibid, s.4

64. Ibid, s.4

65. Op.cit., s. 131.3

66. Op. cit., s. 131.5

In situations of need, it seems to the *Chaashtipishtihch* that respite care under S.5 could be used much more frequently by the medical and psychosocial services of CBHSSJB.

→ The negative impacts to children reported by the YP workers and other participants in the consultations reside in the trauma the children experience when their parents do not/cannot plan how to care for them and the situation escalates quickly into a crisis situation, triggering an authoritative intervention by the DYP instead of empowering families with the support of the community. In some cases, families have grown to expect the YP services to take over their caregiving responsibilities temporarily, not considering the upheaval and sense of abandonment that this creates for their children who may have stay with strangers, sometimes away from their community.

→ The *Chaashtipishtihch* learned that entrusting Cree children in alternative care under the YPA, that is, subsidized placement with extended family, foster care or care in a readaptation centre has expanded over time and has become a widespread practice supported by the CBHSSJB.

The law also states that children should not be without a permanent home for too long. Therefore, *“If returning the child to his family environment is not in his interest, the decision must, on a permanent basis, ensure continuity of care and the stability of his relationships and of living conditions appropriate to his needs and age.”*⁶⁷ The *Chaashtipishtihch* were told that this obligation to establish a permanent plan rests with the YP services and must remain at the forefront of the intervention planning throughout the YP intervention.

→ Given what the *Chaashtipishtihch* learned through the consultations, the crisis mode in which the Cree YP services currently operate seems to make long-term planning very challenging. The lack of intervention planning and proper follow up once an agreement on voluntary measures has been signed or a decision has been rendered by the court also leave children and families in a void of treatment and with little direction for the future of the children, according to the *Chaashtipishtihch* based on what they learned in the course of the Commission’s work.

The YPA provides several options to ensure that children who cannot stay with their parents have an alternate “forever” home. Some of these options even allow for the YP file to be closed, and include subsidized tutorship or adoption plans, and more recently customary guardianship or customary adoption plans.

It seems to the *Chaashtipishtihch* that these options are respectively underutilized or not yet implemented.

Regardless of where the child is living in care, the law also states importance of maintaining ties with the parents and with the siblings, including fostering parents’ involvement with a view to encouraging or helping them to exercise their parental responsibilities, and placing children together in the same home or resource as much as possible.⁶⁸

→ The participants in the consultations reported to the *Chaashtipishtihch* that this is not necessarily the case in many situations of placement, especially if the children are placed outside of the parents’ community.

67. Ibid, s.4

68. Ibid, s. 4.1

Finally, the YP workers are expected to visit the youth wherever they are placed and to ensure that their living conditions are adequate.⁶⁹

The *Chaashtipishtihch* were informed that this means that the DYP has a say in how the youth are treated in foster care and in YHS, although these departments retain autonomy to plan their services and manage their human resources.

→ Monitoring of children in care by YP services was reported by some consultation participants as being irregular and mostly absent.

→ Consultation participants also indicated to the *Chaashtipishtihch* that foster families and Youth Healing Services often feel unprepared to handle their responsibilities due to inadequate training, a lack of specialized services, unclear intervention plans, and decision-making ambiguities.

f) Offering services of quality

The YPA assigns to the Director of Youth Protection and the people she authorizes to act in her name the responsibility of assessing and intervening in complex psychosocial situations. The YPA assumes that the DYP and their staff possess the knowledge and competence to differentiate between concepts such as normal child development and failure to thrive due to neglect, as well as to engage with adolescents or parents in therapeutic processes, among other things.

In line with the YPA, the CBHSSJB By-Law on youth protection stipulates that:

"The Director has to ensure that the person he authorizes:

- a) has the necessary competencies and qualifications to achieve the exercise the responsibilities entrusted to him;*
- b) understands the protocols, standards, criteria, reference frameworks and guidelines, allowing for the exercise of the responsibilities entrusted to him;*
- c) complies with the application processes of the Act, receives the supervision for an adequate control of the decisions made by him and complies with such decisions."*⁷⁰

In the other regions of Quebec, the persons hired as Youth Protection workers or managers in Youth Protection have university-level academic backgrounds, which has often included student placements in their future place of work. Based on the consultations, the *Chaashtipishtihch* are under the impression this is often not the case in Eeyou Istchee.

- The *Chaashtipishtihch* think that such a lack of academic training of the Youth Protection team members likely contributes to the staff quickly feeling overwhelmed, including in view of the strict expectations of the YP practice and with the complex and emotionally charged situations that they face on a daily basis.
- The same lack of academic training in managerial skills also means that some of the YP team managers and team leaders struggle with their roles as supervisors/managers, based on the information heard by the *Chaashtipishtihch* in the consultations.
- For the *Chaashtipishtihch*, comprehensive orientation and intensive on-the-job training are crucial, but maintaining consistency and ensuring that YP staff and collaborators are trained seems to be challenging.

69. Ibid., s. 62

70. By-law on youth protection and on the application of the Youth Protection Act CBHSSJB # 01/157/17 March 13, 2017, Art.8.4. See Section F.2.2.

In conclusion, the *Chaashtipishtihch* are of the view that there are significant disparities between the spirit of the *Youth Protection Act* and the ways in which it is applied in Eeyou Istchee. The YPA attributes a fundamental role to the family, immediate and extended, as the foundation of children's healthy development, and to the notion of children's well-being as a collective responsibility. YP interventions should be used sparingly and when they are necessary, they are meant to be done in partnership with the family, the community and the service providers, which means fostering the participation and empowerment of the youth and families. The *Chaashtipishtihch* believe that implementing the Commission's recommendations will help to address these gaps between the law and current practice.

E.2.2. The Youth Criminal Justice Act: Seeing Youth With a Different Lens Than Adults

The youth criminal justice system is a separate legal system governed by Canada's *Youth Criminal Justice Act*, and therefore it must be considered separately from the *Youth Protection Act*. However, in Quebec, the "Provincial Director" as they are named in the YCJA, responsible for the psychosocial intervention in issues of youth criminal justice, is actually the Director of Youth Protection.

Overall, the Commissioners received remarkably little feedback on the application of the *Youth Criminal Justice Act* on the territory and when they

did, it revealed a certain confusion in people's minds as participants often amalgamated the two laws, as well as the professionals and processes involved.

Many of the observations and comments reported concerned both the Youth Protection department and the "Young Offenders" team in terms of clarity of processes, the voice of youth and family, the trauma of placement, and coordination with other services.

More specific to the YCJA, gaps were noted in terms of fully implementing the modalities of the YCJA that could enhance the participation of all stakeholders in addressing juvenile delinquency issues on the territory in a culturally adapted manner.

- For example, extrajudicial measures which can be applied by the police for minor offenses are not integrated into the practice of the EEPF, and Justice committees adapted to Cree culture are in operation for adult offenders but are very rarely used for young offenders, nor are Youth Justice conferences.
- The Youth Criminal Justice Act aims to protect society by holding youth responsible for the crimes they commit. However, it does so by taking into consideration the lower level of maturity of adolescents and emphasizes the responsibility of the society to rehabilitate adolescents who have broken the law.⁷¹
- The YCJA frames the intervention not just as a punishment but an opportunity to rehabilitate a youth. This rehabilitation process is founded upon clinical concepts and programs that include psycho-social development, social skills learning, moral judgment growth, attachment theory, trauma informed interventions and anger management.

71. Youth Criminal Justice Act, S.C. 2002, c.1, s.3 (1)

In the view of the *Chaashtipishtihch*, while imposing a sentence of custody in a readaptation centre is necessary in some more serious situations, it should come with a culturally adapted therapeutic approach, including specialized programs and activities that promote the positive reinsertion of the youth in their community.

→ On the basis of the consultations, it appears that a lot of work and resources have gone into developing the physical facilities in Eeyou Istchee, especially the Mistissini Youth Healing Centre, but the treatment component of the program has yet to be fully implemented, including the use of land-based activities.

The consultations also suggest to the *Chaashtipishtihch* that for the Young Offender workers team, efforts have been made to introducing the judicial and psychosocial processes linked to criminal offenses and infractions committed by youth, for example the pre-decisional reports.

→ Culturally meaningful programs such as the Youth Justice Conferences have yet to be developed or used to their full potential, in the view of the *Chaashtipishtihch*.

The YCJA recognizes the role of parents in the rehabilitation process of their child and expects that parents and extended family will be involved in the young person's rehabilitation and reintegration; that parents will be informed of measures and proceedings and be encouraged to offer their support; and that the youth custody system (YHS) facilitates parents' involvement.⁷²

→ The data reviewed by *Chaashtipishtihch* indicates that parents are generally involved by the Young Offender worker when the youth has been declared guilty and it is time to prepare a pre-decisional report for the court or when extrajudicial sanctions are being considered. However, parents report that they are not always informed by the police, nor the court system when their child gets arrested. Communication with the YHS also does not seem systematic, based on the information considered by the *Chaashtipishtihch*.

The Young Offender worker has the mandate to facilitate the social reintegration of the youth into his/her community and is expected to develop an Intervention Plan to that effect with the youth and the youth's parents.

→ The data reviewed by the *Chaashtipishtihch* suggests that this is not done consistently.

→ Effective Miyupimaatisiun plans often include referring the youth to psychosocial services and community supports, which seems to remain problematic to the *Chaashtipishtihch* in terms of accessibility and coordination of services.

As reported to the *Chaashtipishtihch*, work is already underway to close the gaps between the possible supports provided for under the law and current practices, and implementation of the Commission's recommendations will further close these gaps in the view of the *Chaashtipishtihch*.

72. Youth Criminal Justice Act, S.C. 2002, c.1, ss. 3(1) (c) and (d) Ibid S. 3(1) (c) and (d)

E.3.

Recent Attempts to Improve The System

E.3.1. Improving Youth Protection Services and Youth Healing Services

Since it became responsible for youth protection and youth criminal justice services, the *Chaashtipishtihch* learned that the CBHSSJB has always been actively working to address and resolve issues within these complex services.⁷³ However, the focus of this chapter begins in 2010 when the tragic death of a child under the care of the DYP led the Commission des droits de la personne et des droits de la jeunesse (CDPDJ) to carry out a systemic investigation into the DYP in Eeyou Istchee. The *Chaashtipishtihch* understand that these events had the effect of galvanizing the CBHSSJB into concrete actions which ultimately led in due course, in early 2021, to the creation of the AUS Task Force, in November of 2022 to the creation of the Commission, and in 2025 to this current report.

This chapter summarises internal CBHSSJB reports on the YP and YCJ system from 2012⁷⁴ that were considered by the *Chaashtipishtihch* as part of this process and then mentions a number of integrated, multi-disciplinary services and programs to illustrate that the CBHSSJB and its partners have already developed some models for improved approaches within certain services, even if these approaches have not yet been specifically developed or applied for YP and YCJ services (according to the information received by the *Chaashtipishtihch*).

Following the investigation by the CDPDJ, in 2012 the Director of Youth Protection and a consultant developed an action plan. The outcomes from this plan were reviewed in the consultants' 2016 audit report on YP services, which also presented their opinion on the clinical plan for the new YHS facility.

The 2016 report on the audit detailed many suggested improvements: the creation of a regional social emergency reporting and intake service (RTS); the training of the DYP staff on YP concepts and related interventions; the equipping of staff with adequate tools such as computers and a client data system; the hiring of more staff and managers; the filling of two new permanent DYP lawyer positions; and the contracting of consultants to support the CBHSSJB team leaders in their clinical functions. As well, the DYP had begun to develop collaborations with partners; to amend the CBHSSJB foster care policy; and, to advocate for fair funding for foster parents, amongst other improvements. With regards to the YCJ services, the report noted that because of improved efficacy of the staff, 50 files had not had to go to court.

However, this first detailed audit also listed areas requiring improvement. These stand out because they are not substantially different from the same areas still needing improvement and highlighted during the consultations carried out by the *Chaashtipishtihch*. These include: lack of intervention plans; insufficient training; poor administrative support; problems with internal communications; high staff turnover; lack of collaboration with

73. See the CBHSSJB Annual Reports. [Annual Reports of the CBHSSJB | Cree Health](#). Accessed July 6, 2025.

74. For more information on the youth protection, youth criminal justice and youth healing services systems, see Section E.2 and *Background and Complementary Information to Maamiinupitihtaau: The Final Report from the Chaashtipishtihch*, which presents the summaries from the consultations; and sets out the history of social services and youth protection in Eeyou Istchee.

partners; case-loads of workers; difficulty in closing files; and lack of clarity with roles.

For YHS, the report focused on developing an evidence-based readaptation program with psychosocial services, strengthening management, addressing staffing issues including long-term training, proposing a Healing Home pilot project in Waskaganish which would intervene with families in crisis, providing parenting training and offering aftercare. They also recommended a new Readaptation Centre facility.

In April of 2016, the CBHSSJB's special health assembly in Waskaganish identified youth protection as a priority for the organization and the region. Internally, in October 2016, the CBHSSJB Board of Directors adopted an action plan for the Directors of YP and YHS, and a clinical plan for the YHS, and these were submitted to the Quebec Ministry of Health and Social Services in January 2017. In March 2017, the CBHSSJB Board of Directors adopted the CBHSSJB Youth Protection By-law.

During the spring of 2017, consultants developed a plan for a joint clinical process for YP and YHS, which was fully endorsed by the directors of both services. However, the training on the plan only began in 2019 and the turnover of staff made it difficult to keep staff trained and invested in the application of the plan. Additionally, the staff participating in the consultations with the *Chaashtipishtihch* reported that the monitoring of the process has been inconsistent in recent years, and the progress initially observed in admissions processes and joint intervention planning was not maintained.

Immediately after submitting the plan for the joint clinical process in the spring of 2017, the CBHSSJB: signed a three-year training agreement with an external training provider for YHS workers; developed an action plan on the "readaptation" service in the *Weesapou* Group Home; and created supervision tools for YHS managers.⁷⁵ At the end of 2018, this training was extended for one year and the workers completing the training also received recognition through university credits. The *Chaashtipishtihch* understand that this program has been discontinued since that time and only a few CBHSSJB staff trained in the approach remain working for YHS.

A second audit report was carried out in 2017 and presented to the CBHSSJB Board of Directors in September 2017. It was focused on a portrait of first-line services to youth and families in each of the nine communities along with an analysis of the related resources needed in the CBHSSJB.

In 2017 and 2018, various CBHSSJB policies and procedures were developed in order to implement the ministerial orientations and legal obligations set out in the YPA with regards to the revision of control measures, confidential communication and educational measures in the YHS. Similarly, a policy and procedure on intensive supervision was developed in 2019. While the policies were duly adopted by the CBHSSJB Board of Directors and training provided to some staff from YHS and the DYP, it is not clear to the *Chaashtipishtihch* whether the procedures were fully developed and implemented in the YHS services.

75. Although these were reported by the participants during the consultations as still not having been in use in September 2020.

An internal report from a consultant in 2000 summarized that both of the audits of 2016 and 2017 identified that the DYP “seemed to be the entry door for services for youth and families”, that the DYP and the CMCs “hardly worked together” and the audit authors strongly recommended “that first line services should be more involved with families in a preventive way.”⁷⁶

The audit of first line services completed in 2017 identified the need to develop more effective mechanisms for collaboration between YP and first line services. This led to the *“Collaboration Protocol between Youth Protection Services and Community Miyupimaatisiun Centers: A Collaborative Clinical Process”* which was presented to the CBHSSJB Board in September 2018. Essentially, the protocol presents a description of the roles and responsibilities of first-line services and YP services when working with families in need of their services. The document is structured to follow the step-by-step process of the YPA when receiving a report and for each step, it defines the responsibilities of the CMCs and the DYP. It also includes guidelines on case discussions and sharing of information between the two entities.

Leadership from CBHSSJB managers to implement the protocol was considered essential and in 2019, managers from CMCs, YP team leaders as well as some professionals were trained on the protocol and given tools to train their own staff.

A retrospective summary about the implementation prepared for the Board of Directors, pointed out that after the initial training, there were a few localized attempts to implement the protocol in a few CMCs, but these had stopped during COVID. During the consultations with the *Chaashtipishtihch*,

the protocol was mentioned once or twice as a “failed attempt”. However, a few professionals mentioned their CMC held periodic case conferencing with YP workers but, in their view, this appeared to depend upon the personal leadership of certain managers and team leaders.

Another major investigation by the CDPDJ was launched in 2019, following the tragic death of a youth in the care of the DYP. The CDPDJ presented several recommendations to the CBHSSJB as a result. This was followed in November 2019 with a report to the Quebec Ministry of Health and Social Services about the situation and an update on the CBHSSJB’s action plan resulting from the investigation. Notably, the majority of the recommendations have been fully implemented. Rules pertaining to sharing confidential information were clarified; dialogue with the EEPF has been initiated and a working group created; an orientation process for new YP workers was developed; training on intervening with suicidal youth has been requested and work is underway to better address situations of youth in distress throughout the territory; and, team leaders were offered training on supervision, case monitoring and intervention planning. Collaboration with all CBHSSJB service providers who work with youth and families remains an essential component to successfully ensuring the safety and well-being of children and youth on the territory, in the view of the *Chaashtipishtihch*.

After productive discussions between the CBHSSJB Director of Youth Protection and representatives of the Cree School Board, the *“Protocol for the joint provision of services to youth between the CSB and the CBHSSJB: Youth Protection*

76. As with all the documents used to prepare this report, this was an internal, unpublished report to the Board of Directors with very limited circulation.

and Youth Healing Services” that had been signed in 2016 was updated in 2020 and now includes all services of the CBHSSJB responsible for ensuring joint provision of services to youth in need, when the CSB is also involved (i.e. YP, YHS and CMCs). Trainings and sensitizations, local joint team meetings and monitoring mechanisms have yet to be instituted in practice, according to the information received by the *Chaashtipishtihch*.

Early in 2020, an action plan on safety issues at the YHS was developed but it seems to the *Chaashtipishtihch* that only certain items were addressed that year, based on the information that they received.

Active planning within the CBHSSJB for the AUS Task Force began in January 2021.

E.3.2. Two Failed Attempts To Improve Youth Protection Services

The *Chaashtipishtihch* learned that the CBHSSJB has partnered in two significant pilot projects with the objective of transforming YP services into collaborative, client-centered approaches with a focus on prevention programs and early intervention services. However, the *Chaashtipishtihch* also heard from participants that these pilot projects were not successful. The *Chaashtipishtihch* are not aware of the specifics of what happened, as among other things, they did not see any evaluations, retrospective assessments or high-level reports discussing why each project stopped after beginning with such high hopes among the participants, according to some of the people who had been involved in those projects.

a) Working Together to Empower Youth and Family in Mississauga

The pilot project *Working Together to Empower Youth and Family in Mississauga* began in 2018, and can be seen as resulting from the audits, reports and plans discussed above. This CBHSSJB project was intended to address the chronic issues in its youth protection services. The *Chaashtipishtihch* feel that this project is important to understand today as it seems to the *Chaashtipishtihch* to have effectively withered over time from a lack of dedicated participation from key CBHSSJB employees. It is possible COVID also played a role.

The *Chaashtipishtihch* note that the project was to bring a *Iiyiyiu iitaayihimuwin* into transforming how youth protection and first line services work with families in crisis and to provide security for children and youth needing care from their families. The goal of the project was to ensure the coordination and implementation of concrete actions by the CBHSSJB Public Health Department, first line services, youth protection services and Youth Healing Services to empower youth and families at risk of becoming, or already clients, of youth protection services. The *Chaashtipishtihch* were told that the objective of the project was a transformation of the norm so that youth protection would no longer be used as the entry door for access to first line social services. In fact, the *Chaashtipishtihch* think that the project proposed to put into practice the intent of many of the recommendations found in this report.

The *Chaashtipishtihch* learned that the project had identified the following factors for success: strong dedication from managers to support the project and involve interveners in changing their practices; commitment to provide necessary tools and resources, such as a social emergency line;

close monitoring of the project by the Board, the Executive Director and each Assistant Executive Director; collaboration and promotion of community-based intervention programs by respective managers and community leadership in Mistissini; a comprehensive information and communication program for the population and employees; and, integration of holistic care and cultural approaches and practices in service development and delivery.

Unfortunately, it seems to the *Chaashtipishtihch* based on the input of participants that after the project ended prematurely there was no evaluation or assessment of what went wrong and why. The *Chaashtipishtihch* question why such a seemingly important clinical pilot project would have effectively “died” without more extensive analysis?

However, on the other hand, the *Chaashtipishtihch* note that there were some improvements made during and after this pilot project which were also in line with recommendations from the previous audits and other reports. For instance, they note that the *Wiichihiwaauwin* (Mental Health) Help Line was made accessible to all Eeyouch and the hours of the social emergency services of the CMCs were extended. The *Chaashtipishtihch* understand that these measures reduced the number of non-pertinent calls to the RTS service and facilitated access to social services in the CMCs. Within the DYP, the *Chaashtipishtihch* were informed that internal verifications of YP caseloads were made in every community, aided by the integration of a more reliable client data system and monitoring tools.

The *Chaashtipishtihch* also learned that some YP teams were encouraged to try separating the YP functions of Evaluation-Orientation from those of Application of Measures in order to provide more comprehensive follow-up and support to families. They were told that roles and responsibilities were clarified at every level of the department and training was provided on various aspects of YP work. Participants mentioned that outreach was carried out with partners in order to develop and improve collaboration, and it seems that consultants and DYP management noted that there is progress, albeit slow and irregular.

However, during the consultations in 2023-24, the *Chaashtipishtihch* note that participants were still complaining that some of these improvements had not yet happened.

b) The Hub

The *Chaashtipishtihch* were informed that in 2017-18, the CBHSSJB, the Cree Nation Government Department of Justice and Correctional Services, the Cree School Board and the Cree Nation of Mistissini collaborated in a pilot project initiated by this Cree Nation Government Department and which was called the “Hub”.⁷⁷ The proposed mission statement sums up the project: “providing seamless services and support to Mistissini Eeyou youth and their family experiencing distress.” The Hub was a “multi-agency”, community-based structure to engage in the identification of high-risk situations of a multi-disciplinary nature, so that effective, timely and appropriate solutions could be implemented by Hub member entities and

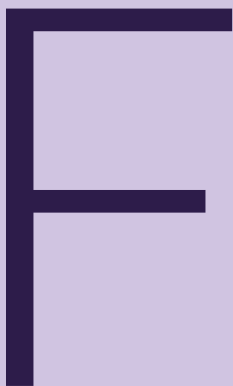
77. Cree Nation of Mistissini, 2017, Mistissini Hub: Terms of reference. Draft document.

personnel. The Cree School Board was a prominent partner, according to participants. The *Chaashtipishtihch* understand that the high turnover of relevant social services staff in the community who had been trained for this project among the different entities and the departure of the project leader led to the eventual end of the Hub.

As this section has documented, the CBHSSJB has always been working to improve the Youth Protection Department and although there have been many positive improvements and initiatives over the years, implementation remains a challenge. It will be important to continue to monitor and follow through on the recommendations from the *Chaashtipishtihch* so the work that went into these extensive consultations leads to meaningful change.



Cree Family Value:
Kindness



This section details the findings from the consultations the *Chaashtipishtihch* held across Eeyou Istchee, and their recommendations to the Task Force which come from the findings. The Recommendations are listed in full in Appendix A. For the purpose of this Chapter, they are elaborated in some cases and organized somewhat according to the entity or entities which the *Chaashtipishtihch* are targeting with the recommendation.

The first chapter on overarching findings is directed to the principal entities with responsibilities for children, youth and families in Eeyou Istchee. The focus then turns specifically to major organizational plans of the CBHSSJB. This is followed with a focus on service areas under the responsibility of the CBHSSJB, and the last section provides a specific focus on the CBHSSJB Department of Youth Protection.

Findings and Recommendations

F1. Overarching Findings for Action by Cree Entities

F2. CBHSSJB – Organizational Considerations

F3. CBHSSJB – Services

F4. Department of Youth Protection



F.1.

Overarching Findings for Action by Cree Entities

F.1.1. Emergency Responders

The Cree leadership of the Cree Nation Government, the Cree School Board and the CBHSSJB have each recognized the long-term effects of the history of residential schools on intergenerational trauma through public statements, activities, services and programs. What has not yet been linked is the impact of this intergenerational trauma on the mental health of our emergency responders who are dealing with the crises and situations of trauma in our communities. This is not specific to one *liiyiyu* entity but is occurring across our Nation. One example is the high YP caseloads, year after year. YP workers and other *kaaniishtimistihch* (1) must deal with difficult situations involving children who are at risk and in danger, and this can have a profound impact upon their mental health.

The *Chaashtipishtihch* call upon all relevant entities to provide dedicated mental health support for our emergency responders, and specifically that the CBHSSJB develop dedicated resources for this mental health support (59). Supporting these service providers is our collective responsibility because they expose themselves to harm in their work to protect us. The leadership across the Eeyou entities and communities need to come together to find common solutions which are evidence-based, come from *liiyiyu liyituuwin* and are adapted to the specific needs of each service. At the same time, this issue needs to be discussed in public meetings.

RECOMMENDATION #1

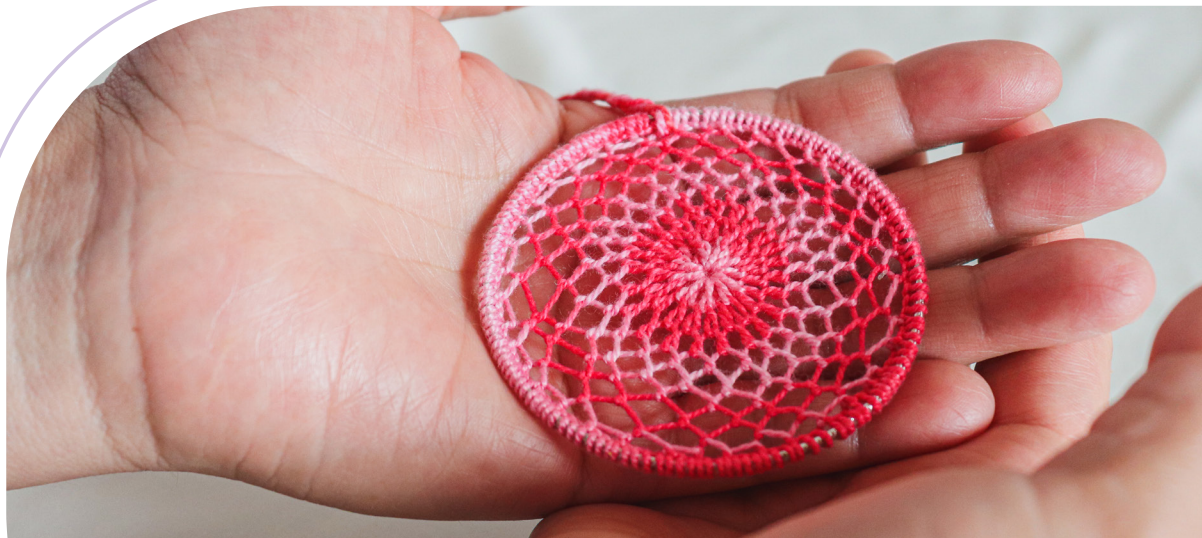
That all relevant entities prioritize dedicated resources for mental health support for emergency responders, including those of the DYP, EEPF, community first responders (ambulance), Public Safety, and Fire Departments.

F.1.2. Cree School Board

Of all groups and departments who spoke with the *Chaashtipishtihch*, the Cree School Board (CSB) had the greatest participation in the consultations. This was the case in all the communities, with the exception of Whapmagoostui where participation was impacted by a significant blizzard. As well, in the view of the *Chaashtipishtihch*, among the Eeyou entities that were invited to participate the CSB made the greatest effort to respond to the *Chaashtipishtihch* with their written brief which was a comprehensive, coordinated team response. The details of the concerns of personnel from the CSB are discussed throughout this report in comments which arose during the community consultations.

The CSB raised a number of issues which are the subject of principal recommendations in this report. The positions expressed by CSB participants emphasized that our approaches must be centred through *liiyiyu liyituuwinn*, and the current focus on intervention, especially with YP, needs to be shifted to prevention. In their view, this would help to focus on the strengths of the extended Eeyou family as the core organizational structure in the communities. In connection with this point, the CSB participants shared their views that parents dealing with complex situations need much more support than they have at present. They also expressed that some parents and youth need help with communicating and interacting with each other.

The CSB personnel who participated in the consultations would like to ensure that services and supports for students are delivered through a trauma-informed approach. They suggested that this would need to be supported by having the school leadership and staff become better informed about trauma and trauma-informed care.



In relation specifically to the CBHSSJB, the CSB participants would like to ensure that the “Joint protocol for the provisions of services to youth” between the CSB and the CBHSSJB is implemented properly. They mentioned that special attention should be paid to ensuring that representatives participate in quarterly meetings, along with ensuring that there are active local teams between the schools and the CMCs. This alone would improve communication between the two organizations which would, hopefully, lead to better collaboration, specifically on strategies for addressing chronic issues.

Two of these chronic issues concern absenteeism and special needs, according to these participants. To tackle the chronic problem of absenteeism, the CSB suggests that the two organizations develop a better understanding of the impact

this phenomenon creates on both entities and then set up specific strategies to address it. For special needs, the CSB realises the need for increased support for parents with children with special needs, and assert that this can happen through the organizations working together.

Specific to YP, the CSB would like to see strong teams develop between the DYP and the local schools. The CSB would like their personnel to be better informed about the YPA so that they can better understand the line between social service support and YP services. They would also like to have some way of understanding the outcomes of YP reports (*signalements*) made to RTS. And importantly, they would like to have the school administrator informed of any change in the guardianship status of a student.

RECOMMENDATION #30

That the Cree School Board develop and implement a variety of afterschool activities to encourage school attendance and positive involvement of youth in their community.

RECOMMENDATION #57

That the DYP/YHS-EEPF Steering Group actively pursue its mandate to develop or revise protocols of collaboration involving the EEPF, the CBHSSJB and other Cree entities.

RECOMMENDATION #64

That the Cree School Board develop a basic post-secondary Social Services program, in collaboration with the CBHSSJB.

F.1.3. Social Factors Determining the Health of a People

In *iiyiyuymuwun*, *miyupimaatisiwin* presumes living in *chiyaamaayih timuwun* in oneself, one's relationships with all others, including, in *liiyiyu iitaayih timuwun*, the animals, the trees, the rocks and the waters. This implies one has sufficient food and shelter, physical health, healthy relationships, social support, and a healthy environment. While these concepts in *liiyiyuymuwun* are from a holistic worldview, their counterpart in the English language can be understood in the multi-concept term, "social determinants of health" which are defined by the World Health Organization (WHO) as: "*broadly defined as the conditions in which people are born, grow, live, work and age, and people's access to power, money and resources – have a powerful influence on health inequities. These are the unfair and avoidable differences in health status seen within and between countries.*"⁷⁸

The WHO says these systematically address the social, environmental and economic foundations of health to identify the root causes determining "whether people and communities are healthy or not".

This report is dealing with the "or not" side where, in *iiyiyuymuwun*, families are not living in *chiyaameuihtamuwin* and with *pimaatisiwin*, and according to the WHO criteria, are not in a "healthy" state. The purpose of this report is to better understand why governmental authorities, in this case the CBHSSJB's DYP, has moved in to protect so many children and youth from their family situations over such a long period of time. Based on the review of the *Chaashtipishtihch* of internal DYP documents, the immediate problem

of YP in the region appears to be this unhealthy situation where official "strangers" have to protect children from their own families.

The *Chaashtipishtihch* ask who these many families are that are involved with the DYP and how are they different from other families in Eeyou Istchee who have never been involved with the DYP? Anecdotal evidence suggests to the *Chaashtipishtihch* that many of them are poor and living in substandard and crowded houses, often abusing alcohol and drugs.⁷⁹

The *Chaashtipishtihch* believe that a family living in poverty that is involved with DYP services, and with few resources to make changes, may have a very different perception of the DYP's role than the DYP managers and front-line workers. As an illustration of this point, a parent who had an active case-file with the DYP at the time she participated in a focus group,⁸⁰ said,

"Aren't they supposed to be helping us with our children? It's better to keep the kids at home while you get yourself together. I don't think it's good for the families to be apart, neither for the kids or the parents."

This quote shows that from this mother's perspective, it was entirely reasonable to use YP services for temporary care (sometimes referred to as "babysitting" by participants in the consultations) while she went to rehabilitation because they were a service caring for children and she was poor and did not have other resources. But she did not understand the "logic" of keeping the children away from the family once the rehabilitation treatment was over and the "babysitting" service was no longer needed.

78. World Health Organization. [Determinants of health](#). Accessed May 7, 2025. The CBHSSJB has many internal documents modeling a holistic approach to services.

79. See Torrie, J. March 24, 2021. Some data on poverty and inequality in Eeyou Istchee: prepared for Taria. CBHSSJB. Powerpoint presentation. 26 slides. The report used public data sources from the Institut de la statistique du Québec; Statistics Canada census data; data from Public Health food basket surveys in Eeyou Istchee. Also, see Commission spéciale sur les droits des enfants et la protection de la jeunesse (Laurent Commission). April 2021. *Instaurer une société bienveillante pour nos enfants et nos jeunes*. Gouvernement du Québec. P. 90-92 citing Tonino Esposito et collab. 2019. *Recurrent involvement with the Quebec child protection system for reasons of neglect: a longitudinal clinical population study*. P. 8. Google translation.

80. Cited in an internal CBHSSJB report to the Board of Directors from a 2008 focus group in Eeyou Istchee.

This type of predicament may be addressed more appropriately by virtue of new provisions of the Quebec YPA to the effect that in determining the interest of an Indigenous child, “the sociohistorical traumas of Indigenous people and their socioeconomic conditions” must be taken into consideration.⁸¹ The new federal law dealing with youth protection for Indigenous children (Bill C-92) provides even more explicitly that the child must not be apprehended solely on the basis of his or her socio-economic conditions, including poverty, lack of adequate housing or infrastructure or the state of health of his or her parent or the care provider.⁸²

The *Chaashtipishtihch* consider that these changes to the law may provide an additional impetus to the Cree Nation Government and other Iiyiyu entities to seek to address the issue of poverty and other issues among Iiyiyu families and children; and on the CBHSSJB to improve policy and services, including support services required by the state of health of a parent or caregiver or social services that may be beneficial to certain impoverished families when this poverty may result in a certain “danger” to the security or development, in order to take proper account of these factors set out in the law into account. For instance, even if these types of services do not fall squarely within the very specific mandate of the DYP, the DYP could promote these kinds of actions with other entities and CBHSSJB services, in the view of the *Chaashtipishtihch*.

The *Chaashtipishtihch* place tremendous importance on these considerations because, according to UNICEF, child poverty can impose “detrimental effects on children which are irreversible”⁸³ in view of permanent effects on their development. The *Chaashtipishtihch* also underline that researchers have documented how First Nations children in Canada are the most impoverished group in the country and how this has become structured from the “enduring legacies of historical impoverishment and the continuation of colonial policies and practices that impoverish First Nations peoples today.”⁸⁴ Previous Public Health Group data on poverty in Eeyou Istchee from publicly accessible sources⁸⁵ suggested that Eeyou Istchee had more families with low incomes than in the rest of the province of Quebec; and that low income was associated with being lone-parent families, living in overcrowded houses in need of major repair, having low educational levels and precarious unemployment or being unemployed.

Since the mid-1970s, Eeyou Istchee has had a specific type of basic income program to address certain forms of poverty in the territory:⁸⁶ the Cree Hunters Economic Security Program⁸⁷ which has its basis in the *James Bay and Northern Quebec Agreement*.⁸⁸ This is described as “a family program” for “Crees who choose hunting, trapping and fishing activities as a way of life” by providing “an income guarantee, benefits and other incentives.”⁸⁹ At the time it was set up, it allowed families to move back to the bush because it had been “the economic pressures which forced many from the bush.”⁹⁰

81. YPA, 131.4

82. Bill C-92, 15

83. Rohwerder, B. (2016). *Poverty and Inequality: Topic guide*. Birmingham, UK: GSDRC, University of Birmingham. Accessed 14/03/21

84. Brittain, M; Blackstock, C. 2015. First Nations Child Poverty: A Literature Review and Analysis. First Nations' Childrens Action Research and Education Service. 175 pages.

85. See footnote 79: Torrie.

86. La Rusic I. May, 1978. The Income Security Program for Cree hunters and trappers A study of the design, operation, and initial impacts of the Guaranteed Annual Income programme established under the James Bay and Northern Quebec Agreement. Research Division; Policy, Planning and Evaluation Branch, Department of Indian and Northern Affairs (Contract 770097). Publication RS=160-1978-eng.pdf.

87. Cree Hunters Security Board. 2023-24. Annual Report. 100 pages. ra_osecc_2023-2024_lowres.pdf Accessed May 14, 2025.

88. James Bay and Northern Quebec Agreement. *The James Bay and Northern Quebec Agreement and the Northeastern Quebec Agreement - Annual Reports 2008-2009 / 2009-2010*. Accessed June 3, 2025.

89. Please refer to *The Program of The Cree Hunters Economic Security Board – Chasseur cri*. Accessed May 14, 2025.

90. See footnote 86: La Rusic.

The *Chaashtipishtihch* considered the possible impact if part of the resources allocated currently to foster care were redirected to a type of income support program to address child and family poverty, along with another part being allocated to land-based healing programs. Many of the people consulted suggested that these kinds of interventions were needed to help families involved with the DYP.

These suggestions to address child and family poverty are also supported by research suggesting that a basic income program can inspire meaningful social integration — greater participation in social and civic activities in the community — while also providing individuals with stability, safety and security.⁹¹

It is beyond the scope of this consultation and report to do more than to raise this as a longer-term idea. If poverty is indeed a common factor describing families involved with the

DYP in Eeyou Istchee, and if we want to develop our social programs through *Iiyiyuu iitaayihimuwin*, then discussions among relevant Eeyou entities to find some common solutions will be needed for the future health of our Nation.⁹²

This is why the *Chaashtipishtihch* are asking for better reporting on the social circumstances of families involved with the CBHSSJB DYP (3), along with reporting on poverty and social inequities in general (2). The CBHSSJB and other relevant Cree entities can use this information to create programs and services that account for, or address, the social needs of families, to reduce the use of youth protection measures which are intended to be a recourse of last resort. And, armed with this information, the *Chaashtipishtihch* think that the Director of YP should become a more vocal advocate for children impacted by poverty and the youth protection system.

RECOMMENDATION #2

That the CBHSSJB Public Health Group carry out its mandate to periodically report on poverty and social inequities in Eeyou Istchee and to collaborate with the Cree Nation Government's Department of Social and Cultural Development whose mandate includes a focus on the needs and quality of life of certain vulnerable groups of the population, including youth.⁹³

RECOMMENDATION #3

That the CBHSSJB DYP inform the CBHSSJB Public Health Group on the social circumstances of families involved with its services.

91. Zhao J, Whitehead L. (2020). A guaranteed basic income could end poverty: so why isn't it happening? *The Conversation*, May 12. Hasdaell R, Bidadanure J, Gonzalez SB. (2021). Healthy communities and universal basic income: a conceptual framework and evidence review: A report from the Stanford Basic Income Lab. 25p. [Research Papers | The Stanford Basic Income Lab](#)

92. See overview of strategies to strengthen First Nations and reduce child poverty in Brittain, M; Blackstock, C. 2015. *First Nations Child Poverty: A Literature Review and Analysis*. First Nations' Children's Action Research and Education Service. 175 pages.

93. Cree Nation Government. Departments. Cultural and Social Development. Responsibilities: Social Sector. Social and Cultural Development | The Grand Council of the Crees (Eeyou Istchee). Accessed May 13, 2025.

F.1.4. Culture and values

Aatiyuuhkaanh is where we Eeyouch found our lessons. It is what we followed to ensure that life continues, with the notion that it is not only the life of Eeyouch that matters, but also the life of the animals and the land.

In the mid-90s, the Eeyou Chiefs were told by the late Elder David Neeposh of Waswanipi, '*aanischehtaakanuuhch pimaatisiwin*, which centred the teaching on the newborn child and the mother that brought this life into being. It includes a notion that the man is there to provide all that the mother and child need and to protect the child until they are able to provide and care for themselves, and that this responsibility also applied to the extended family, and to the whole village. This is an important foundation of Eeyou society as parenting comes from and is very connected to Eeyou values.

Isinihkaasunh - we did not use names but called people by how they were related to us. This is one way that we knew our relations amongst each other, with the result that there was no identity problem. It relates fundamentally to our needs as humans for identity and to belong and be connected to something. It also means to be acknowledged as people, as human beings, and also as spirit.

Relationships within Eeyou society are not only within our family, but also with our friends, as well as extended family. In our society, "immediate family"

includes grandparents, grandchildren, great grandchildren. There are many different Cree terms that relate to these concepts.

E waahkumitunaauch is not just the immediate family, it is anyone that you are related to. For example, when a sibling marries, the person becomes connected to all of their siblings' in-laws as part of their extended family. Many use the term "inheriting in-laws" for these situations. *Chiishtaanuuch* are extended family we inherit. *Niistamisinuuch* and their *waahkumaakunwaah* become our extended family. *E uhchipaapiiwiyich* are descendants. Further, sometimes a person does not have to be related to someone else to say that they are a *waahkumaakinich*.

These relationships extend beyond people and also embody a connection to the land and to the animals: physical, spiritual and social. This helps to explain how our communities approach well-being and healing more generally: spring goose hunt, fall moose hunt, summer gatherings, canoe brigades, winter walks, family bush camps, and the customary rites of passage, to name a few.⁹⁴ These relationships and connections are a foundational basis for our healthy communities. They are also closely tied to *liyimiichim*, the importance we place on food from the land. It is a given in Cree culture that going on the land for the right purpose and with the right people is how everyone can learn what they need to stay healthy and to heal, for instance when they have suffered some kind of loss, and their lives are out of balance.

94. Tanner has called this a "healing movement" across Eeyou Istchee but Eeyouch just see it as the right way to do things. Tanner Adrian. The origins of northern Aboriginal social pathologies and the Quebec Cree healing movement. 2008. In, Kirmayer L, Valaskakis G. editors. Healing Traditions: the mental health of Aboriginal peoples in Canada. Vancouver, B.C: UBC Press. Pp. 249-271.

Indeed, according to the *Chaashtipishtihch*, “out of balance” may be a useful way to describe the chronic issues with youth protection services. On the one hand, “protection” of children by removing them from the care of their family became the usual or standard response to family dysfunction over time in our territory. An example of this view can be found in the 1988-89 CBHSSJB Annual Report⁹⁵, which stated at the time: “we feel that Cree children benefited of better protection services through a more stringent application of the *Youth Protection Act*.”

However, the *Chaashtipishtihch* believe that on the other hand, this approach was far removed from the vision of the Eeyou signatories of the JBNQA, who felt that they were guaranteeing the continuity of *liiyiyu liyituuwinn* with the JBQNA Treaty. In 1988-89, the above-mentioned annual report said that the CBHSSJB was “still involved in trying to develop a theoretical model of Cree psycho-social intervention to further enhance our nativization objective.” Now thirty-six years later, many *Eeyouch* suggested to the *Chaashtipishtihch* that the right way of thinking about these matters is to find *liiyiyu iitaayih timuwinn* in how we understand our problem with protecting youth from harm and also how we create a better approach for our collective future.

Dr. Matthew Coon Come had some succinct reminders about what this involves:⁹⁶

“We can choose to continue to think of ourselves as victims and always look to justify our own fears and inadequacies and our own failing by blaming colonialism, or residential schools, or government paternalism or other realities of our past.

We can also decide, if we choose to do so, that this is a way of thinking that is no longer useful for us as we look to the future.

These factors were certainly part of our past, but it is a past which we have struggled to overcome, and the reality is that we have overcome them.

It is no longer useful for us as individuals, as communities, and ultimately as a Nation to remain stuck in a way of thinking which does not reflect the possibilities for the future.”

As he pointed out, we have come through past traumatic events together and our way forward needs to focus on *chaa chiihkaayaapihtikiniwich liiyiyiuch ukischihuniwaau miishkuch chaa chiih uhchi mishkiwikaapuwich*. This was a point strongly voiced by many *Eeyouch* in our meetings. The right way of thinking will lead us on a path that strengthens our identity as *Eeyouch*.

All *liiyiyu* children and youth need their sense of self to be grounded in *liiyiyu liyituuwinn* because that is who they are, where they come from and where they belong. *liiyiyiuch* celebrate importantly the rites of passage – birth, walking-out ceremony, first snowshoe walk, first hunt, first moon – and their other “special days” such as birthdays, baptisms, confirmations, dedications and graduations. This helps them to develop confidence and their core feeling about who they are in the world. We all need this secure grounding so that we can later flourish.

95. CBHSSJB Annual reports. [Annual Reports of the CBHSSJB | Cree Health](#) Accessed July 6, 2025.

96. Matthew Coon Come, presentation to *The People's Inquiry into our Suicide Pandemic*, Mushkegowuk Council, October 27, 2014.

Printed by the Mushkegowuk Council 2018. In, Tanya Talaga (2018), *All our relations: Finding the path forward*. Epigraph, p. 10. Anansi Press.

The consultation participants are aware of the impacts that creating insecurity in children can lead to: “How you care for your child gets transmitted to the next generation. A child, even a newborn knows when things happen, detects things that happened in the home. The child you are given is from the Creator. This is not your child. You must take care of this child. This is where your work lies.”

The consultations revealed to the *Chaashtipishtihch* that most children and youth followed under the DYP are not instructed through their rites of passage, may not get to celebrate their “special days”, and that most youth do not have access to land-based healing programs.

For example, the *Chaashtipishtihch* learned that the *Youth Protection Act* has some flexibility in how it is applied and whether and when to involve the courts. However, it seems that the application of the law in Eeyou Istchee does not reflect this approach, either in the past or currently. The CBHSSJB needs to significantly change how the YPA is applied in Eeyou Istchee and directly involve Elders, extended family members or

others (outside of the DYP and other CBHSSJB personnel) in accordance with Eeyou values.

The CBHSSJB already has an inhouse resource with the Nishiiyuu Miyupimaatisiun Group. The *Chaashtipishtihch* recommend that this Group inform the development of all areas where the CBHSSJB begins building *liiyiyu iitaayih timuwin* into its services. These include areas like cultural plans for children and youth in the care of the DYP; the formal development of land-based programming; the development of other preventive programming with families, such as an *liiyiyu liyituuwin* informed parenting program. For example, the Nishiiyuu Miyupimaatisiun Group can advise the DYP, which has responsibilities for the children and youth in care, how to ensure, in coordination with local community partners, that they celebrate their rites of passage, along with other special days such as birthdays and graduations (4). Along with the CSB, the *Chaashtipishtihch* believe that all children and youth need their sense of self to be grounded in *liiyiyu liyituuwin* because that is who they are, where they come from and where they belong.

RECOMMENDATION #4

That the DYP coordinate with caregivers of children in placement and with different local community partners to ensure that all children and youth under the care of YP celebrate their rites of passage and special days.

RECOMMENDATION #5

That the Cree First Nations and the Cree Nation Government facilitate discussions around a coherent and unified vision of Eeyou values and that local Miyupimaatisiun Committees develop value-based community action plans to promote the well-being of children and youth.

F.1.5. *Iiyiyuymuwin: An Intangible Cultural Heritage*⁹⁷

The participants during the consultations spoke of the decline and loss of *iyyiyuymuwin* as being a critical issue and how this affects “*pride in culture, pride in your life, all [of which] are instilled in your language.*” “*There is a need to return that pride that we once had. As the language is lost, we lose our identity, who we are as Eeyouch.*” “*When a child loses their language, they lose their identity.*”

Participants lamented that the Cree as a Language of Instruction Program, known as the CLIP, was no longer operating to teach *iyyiyuymuwin* to the youth in the primary grades so they could become excellent speakers. “*You need to hear iyyiyuymuwin to know iyyiyuymuwin. They say it starts at home and yet kids spend the whole day at school.*” “*When you master your language, you can never lose it. Today, we ask if the kids think in iyyiyuymuwin when they speak in English. This is what we need to consider because language equals identity, this loss of the language is creating an identity issue which leads to low self-esteem.*”

In a special consultation on language, an Elder asked, “*How do we ground our children in iyyiyuu ayimuwin?*” and then continued saying there are barriers and challenges because we are dealing with Western and *iyyiyuu* worldviews and knowledge systems. “*What is it that we want in the forefront? We have our language and culture but our practices are focused on Western approaches. And we need to deal with the intergenerational trauma.*”

Another Elder spoke about self-determination saying, “*We need to make it work for us. We still have our culture, our language, let us make sure that it is aligned with policy and practices in a holistic way.*”

The group then asked what protecting the child means? “*Protecting the children means working together towards removing and resolving the risks that put the children at risk.*”

“*We have the resources to transform our approaches and ways of delivering services in a Cree way rooted in our language, culture, traditions, beliefs and values. What will the approach look like – a new way of dealing with the situation; what road will we take; in service delivery; how will we bring the service to the people who need it; what will be our ways of communicating; how will we interact with them. Will we focus on family preservation? Work on preventing family separation.*”

The group then spoke of bringing back *Iiyiyuu* childrearing practices, values, approaches, knowledge around healthy and thriving children and youth: focusing on our strengths and the resilience of *Iiyiyu* families, communities and Nation.

One elder compared the Commission’s slogan *Maamiinupitihtaa* to a “*dog team pulling a sled and going down a hill. They steer the sled by moving quickly to keep it going in the right direction. That is the expectation of us now before we lose our track. We have not lost it: if we had lost it we would not be talking about it now. We would not be wanting to know more.*” Another elder said “*the more we talk about it, the more we understand; the more we dig in and the more we want to know. That is getting to the roots.*”

Our region has the highest retention of its Indigenous language in Canada.⁹⁸ Almost all people using CBHSSJB services and Cree CBHSSJB staff speak *iyiyuu ayimuwin*. Yet all the terms used in the DYP are from the Quebec law and there is no *iyiyuu ayimuwin* version. CBHSSJB services do not yet reflect the cultural and linguistic context in practice, despite these elements being supported by the vision statement of the organization: “Individuals, families and communities strive to achieve *Miyupimaatisiun* reflective of *Nishiiyuu*.”⁹⁹

The consultations showed that Eeyouch are anxious to have their services reflect their communities. Article 20 of the Cree Language Act¹⁰⁰ passed by the Cree Nation Government in 2019 states: “*Community Governments, Regional Entities, Businesses, and other institutions operating in Eeyou Istchee are requested to adopt a Cree Language Plan.*”

During the consultations, the staff working for the DYP were not hesitant to report that their Department, and by association, the staff, have a negative reputation within the communities. This view fits with the critiques from community members about the DYP being a “babysitting service” and/or a new form of residential schooling. Although it would be a small change, giving a Cree name to the CBHSSJB DYP would be more reflective of how it would like to be perceived.

RECOMMENDATION #6

That a Cree language plan be developed by the CBHSSJB in accordance with the Cree Nation Government law, An Act respecting the Cree Language of Eeyou Istchee, including adopting a Cree name for youth protection services and YP workers and continuing the development of the Cree YP glossary.

RECOMMENDATION #7

That CBHSSJB Human Resources provide training sessions for CBHSSJB staff to learn the Cree YP glossary so that the use of the Cree language can become commonplace in YP services.

98. Indigenous Services Canada. [Indigenous communities in Quebec](#); Statistics Canada. [Indigenous languages across Canada](#). Accessed May 26, 2025.

99. See CBHSSJB website. [Our Mission | Cree Health](#) Accessed May 2, 2025.

100. Cree Nation Government. [An Act Respecting the Cree Language of Eeyou Istchee](#). September 17, 2019. Accessed May 14, 2025.

F.1.6. Iiyiyiu Parenting

As one participant noted, parenting is at the heart of raising a child and “every child needs parents.” During the consultations, people explained that ideal “parenting” in the past consisted of a functional extended family providing support and guidance. As one person explained, “in the past, parents would tell their children what needed to be done, would guide them”. Another pointed out that in the extended family, the tasks of keeping the household and children were shared along with emotional and financial support. And this involved healthy interactions: “Our parents had conversations with us, would sit down and talk with us, teach us.” Someone pointed out that the Elders were there “to intervene”, rather like living with a full-time social worker. Importantly, when people were living in harmony and there is *chiyaamaayih timuwin* in the family, the boundaries and roles were understood and respected. This made it easy and pleasant to live together, even when the traditional bush camp or summer tent was relatively small in terms of space. Importantly, “children were brought up with love”, according to certain participants.

As one person explained, what hasn’t changed from the past to today is that feeling secure comes from “having a family and a roof over your head, hugs, affection, having food, living in a sober home” and parents being present for their child.

Today many participants pointed out that parents’ neglect of their responsibilities for their children are one immediate cause of an overreliance on YP services. People explained this by pointing out key symptoms. Overall “the family support is not there anymore, and especially when the grandparent is absent.” The “connection is gone. We don’t interact. The structure and bond of family time is no longer there.”

Many people mentioned that many children are left on their own to go out when they want, eat when they want. As one person said, this leads to relying “too much on our community to care for our children.” Many parents no longer know where their children are at all times, expecting community resources like school, recreation organizers and the police to look after them. According to some participants, parents often don’t even get involved with their children’s activities, whether at school or in sports.

Some people associated these issues with overcrowded houses. While overcrowded homes are known to create social stress,¹⁰¹ the *Chaashtipishtihch* noted with interest that comments in the consultations focus the issue more on the way people are interacting together rather than the space itself.

There was widespread discussion during the consultations of the role of grandparents in the family when roles are confused. One person pointed out that “It is the grandparents’ job to care for family through guidance.” However, others described the situation where “there are many young parents with no parenting skills; many are grandparents in their early 30s. They don’t know their roles and responsibilities, and this is pushed onto the grandparents assuming that it is the grandparents’ responsibility.” This places grandparents in a dilemma, as expressed by one participant: “Today we are in “catch 22” situation where if you take your grandchildren you are enabling your adult children, but if you don’t take them, you are not sure if your grandchildren are safe”. As another person said: “As a grandparent, where is balance between culturally caring for my grandchild and enabling them [*the parents*] with their addictions?”

There was the complaint that when children are removed from their parents by the DYP, the grandparents are not necessarily called, although in the view of that participant they should be the first recourse for taking in the children. On the other hand, there were discussions in the

consultations about how placing children who are removed from their parents with their grandparents does not “teach anything to parents since they know that their children are safe.” As someone pointed out, “the grandparents have a choice when they take the children. But the parents don’t change their behaviour”. For the *Chaashtipishtihch*, this is the conundrum for grandparents, and currently for the DYP.

Many participants suggested their views on what needs to happen. One wise person pointed out that parents don’t willingly neglect their kids, but end up doing so in ignorance, and asserting that “we can fix ignorance”. Another solution voiced by many in the consultations was to have programs “to teach parents to be parents”, because at present “all they do now is place children in crisis with no work on how to teach parents to be parents.” It was also mentioned that the resources exist and “the classroom is out there – it’s not a facility”, meaning essentially that there needs to be a return to the land for instruction in *liiyiyu* values.

Many participants in the consultations focussed attention on the need to base changes to the system through a return to Eeyou values and *liiyiyu iyihitiwin*.

RECOMMENDATION #8

That the CBHSSJB Public Health Group develop a general parenting program based on *liiyiyu iitaayihimuwin* and to be delivered in *liiyiyuyimuwin*; and that the Public Health Group in collaboration with other CBHSSJB departments develop a more specialized, trauma-informed parenting program for parents whose children are under the DYP.

F.1.7. Eeyou Charter For Children and Families

Children are not addressed specifically in the Eeyou Constitution.¹⁰² An Eeyou Charter for children and families would serve as a useful foundational document supporting the application and integration of *Iiyiyiu Iyihitiwin* into health and social services for children and their families, including for youth protection and early intervention and preventive services.

The development of such a Charter should involve all Eeyou organizations involved in providing services to Eeyou families in some capacity, including the CBHSSJB.

The *Chaashtipishtihch* recommend that the CBHSSJB promote and support the CNG to develop an Eeyou Charter for children and families based on *aatiyuuhkaanh* and in *iyyiyuyimuwin*, in collaboration with other Eeyou entities (9).



RECOMMENDATION #9

That the CBHSSJB promote and support the Cree Nation Government to develop an Eeyou Charter for children and families based on *aatiyuuhkaanh* and in *iyyiyuyimuwin*, in collaboration with other Eeyou entities and that the CBHSSJB strongly recommends that the Charter be fully developed solely in *iyyiyuyimuwin* in the first instance. Further, that this Charter in *iyyiyuyimuwin* be ratified by all of the relevant Cree partners prior to being translated into English. The Charter should be simple, easy to understand and based on Cree teachings.

102. Cree Nation Government. [Constitution of the Cree Nation of Eeyou Istchee](#).

F.2.

CBHSSJB – Organizational Considerations

F.2.1. *Youth Protection Act, Legislation*

During the consultations, some people blamed the *Youth Protection Act* (YPA) as a “colonial” type of legislation that is reinforcing a “residential school-type” of policing and approach on families. Some suggested that change should come through our own Cree YP law, such as a law recognized pursuant to the federal legislation of *An Act respecting First Nations, Inuit and Métis children, youth and families* (Bill C-92).¹⁰³

Additionally, Bill C-92 sets out minimum national standards and principles for the provision of youth protection services to Indigenous children, and that apply alongside the YPA.¹⁰⁴ These national standards and principles apply to the CBHSSJB DYP, just as they apply to other DYPs in the province of Quebec. Both the YPA and Bill C-92 set out principles relating to cultural continuity, particular factors relating to the best interests of an Indigenous child and a priority emphasis on preventive services, among other things.

The removal of children from their families is the extreme authority given under the YPA in order to protect children. However, the YPA assumes that this extreme measure will only be used when more community-based interventions are not possible. Without a comprehensive prevention program aimed at family wellbeing, and without being able to assume the presence of extended family and informal community supports, the extreme measures of the YPA have become more of the norm.

The YPA can be applied with some flexibility, particularly in light of its new provisions respecting Indigenous children and in view of the similar principles of Bill C-92 regarding youth protection for Indigenous children that apply across the country, including in Quebec.

However, even with these important changes, there are issues with how the Youth Protection Act is applied in Eeyou Istchee. While youth protection is intended to be a last-resort measure, certain *Iiyiyiuch* told the *Chaashtipishtihch* that they view the formal youth protection system as a “babysitting service”, meaning the system is used too frequently and not as a last resort and because they perceive the system used this way over a long period by certain people. Others said that the system is perpetuating the pattern of residential schooling because of the numbers of children removed from the care of their parents and the approach we have adopted. Overall, Eeyouch report that too many children are removed from their homes and families in situations that could have been prevented or addressed differently, that there are no specific services helping families involved with the DYP, and that the youth protection system is not adapted to *Iiyiyiu iitaayihimuwin*. Based on the consultations, the *Chaashtipishtihch* understand that this has not yet been systematically tried as a solution to reducing dependence on the DYP in our territory.

103. S.C. 2019, c. 24.

104. Bill C-92 refers to “child and family services” which is the equivalent of “youth protection services” in Quebec.

For almost forty years the YPA has been based on principles based on the child's interest and rights; parental responsibility; and keeping the child in their home environment if possible.¹⁰⁵ More recently, a new chapter was added to the YPA that applies specifically to Indigenous people, and that requires certain adaptations for youth protection services delivered to Indigenous children.¹⁰⁶

The CBHSSJB is currently in high-level discussions to revise its legislative framework, mainly the *Act respecting health services and social services for Cree Native persons* (Chapter S-5).¹⁰⁷ This is the main law which regulates how the CBHSSJB operates. The CBHSSJB has proposed a significant legislative review to:

- Update the outdated Québec law (Chapter S-5) which has applied to the CBHSSJB since the 70s;
- Recognize greater responsibility and flexibility for the CBHSSJB to achieve its vision and mission;
- Reflect Cree identity, treaty status and special circumstances, including Cree language, culture and values;
- Enable the CBHSSJB to adopt Eeyou Miyupimaatisiun and Nishiiyuu Healing Methods, an **adapted Cree Youth Protection regime to meet Cree needs**, and adapted working conditions and training, with Cree hiring priority, among other things.

RECOMMENDATION #10

At this time, the *Chaashtipishtihch* do not advise negotiating or proposing to develop a new youth protection law for Eeyou Istchee as a solution to the current situation.

Instead, for now, we suggest addressing the situation by acting on the recommendations of the AUS Task Force and continuing to pursue the adaptation of the application of the YPA in order to transform current practices to be more based on *liiyiyu liyituuwin*. This will require the CBHSSJB to significantly change how the YPA is applied in Eeyou Istchee and directly involve Elders, extended family members or others (outside of the DYP and other CBHSSJB personnel).

RECOMMENDATION #11

That the CBHSSJB and the Cree Nation Government continue discussions with Quebec to ensure that the YPA and the YCJA can be applied in a way that is based on *liiyiyu liyituuwin* in Eeyou Istchee, and to ensure that the CBHSSJB has the resources required to do so.

105 *Youth Protection Act*, CQLR c p-34.1.

106. Gouvernement du Québec. (2016). *Guidelines for establishing a special youth protection program for Native people*. Ministère de la santé et des services sociaux. 37 pages. Accessed April 28, 2025.

107. CBHSSJB. (August 1, 2024). *Historic Legislative Review for the Cree Board of Health and Social Services of James Bay | Cree Health*. Accessed April 28, 2025.

F.2.2. CBHSSJB By-law on Youth Protection

Among other provisions, the CBHSSJB By-law on youth protection and on the application of the *Youth Protection Act*,¹⁰⁸ requires that interventions:

- a) Must provide support to parents to competently exercise their parental authority;
- b) Must make every decision with the aim of keeping the child in the family environment, including the extended family. If this is not possible, the decision must aim at ensuring continuity of care and stable relationships and living conditions;
- c) Must use the appropriate and least intrusive approach with discernment, and have it limited in scope and duration to eliminate conditions which led to the intervention;
- d) Must rely on a network of support from other CBHSSJB Departments and other entities (Cree Nation Government Justice Department, Cree School Board, EEPF, etc.);
- e) Involve all CBHSSJB departments which contribute to the mission of youth protection by supporting the Director of YP in their application of the *Youth Protection Act*;
- f) Must be personalized with each child having a protection plan and an intervention plan.

Participants referred to these provisions many times during the consultations as principles that could improve the functioning of the DYP and this led to the reflection that, in most cases, the provisions of the By-law have not been implemented as planned.

Over the past ten years, the CBHSSJB has solicited audits, action plans, and assessments of action plans in an attempt to improve YP services and to reduce the pattern of dependence upon them by certain members of our Nation. Only some of the recommendations from these documents have been implemented to date.

The Commissioner's findings indicate that the barriers to change exist at several different levels of the CBHSSJB. Barriers exist at a structural level within the CBHSSJB, and also within the overall organization of youth and family supports and services within the region at large. They also exist at the operational level in the CBHSSJB, in terms of challenges with effective leadership by managers, with training issues and also with accountability.



108. By-law on youth protection and on the application of the Youth Protection Act CBHSSJB # 01/157/17 March 13, 2017. See Section F.2.2.

After consulting with managers and the population and reviewing annual statistics from the DYP and other documents, the *Chaashtipishtihch* do not believe that the individual terms of the By-law are being implemented as intended. At the time of the consultations, they were told that many children do not have protection and intervention plans, and it is not clear how plans that have been developed are being used to help guide children's care under YP. Importantly, the *Chaashtipishtihch* were not told of any transition program to help youth who are placed but will be leaving the care of the DYP as soon as they turn age 18. Quebec has a program "Programme qualification des jeunes" to prepare youth from age 16 and over who will be "aging-out" of the system at age 18 with support in building their lives as adults up until age 25.¹⁰⁹

The commitment in the By-law to providing support to parents implies some type of program delivered by the CBHSSJB, or an ongoing preventive program offered by a partner organization. A repeated complaint of many participants was the absence of any such programs to support vulnerable parents, especially those involved with YP or at risk of becoming involved. Without support, it is unrealistic to expect that parents will find the way to change the conditions which led or may lead to their involvement with YP and, if they are already involved with YP, ensure the safe return of their child to their care.

As statistics from the DYP show¹¹⁰, they are dealing with enormous caseloads relative to the size of the population and many participants told the *Chaashtipishtihch* that this results in a stressful workplace for employees, who described themselves and were described by others, as often operating in crisis mode, a point also made in some internal reports to the Board of Directors. During the consultations within the CBHSSJB, the *Chaashtipishtihch* were told that in this continuing unstable situation, the focus of YP tends to be on intervening and evaluating to legally justify the intervention, rather than on implementing measures to improve the situations which put children at risk.

At the time of the consultations, participants reported that although, according to the By-law, YP and CMC services should operate as a network of support, they were functioning more as separate silos, and without any guidelines for collaboration, such as a working protocol. They each work with urgent cases, such as suicide ideation among youth who are seen at the CMC and cases of severely neglected children and youth dealt with by YP. A YP-CMC Collaboration Protocol was created in the past, but the *Chaashtipishtihch* understand from the consultations that it is not being implemented.

109. Gouvernement du Québec. [Programme qualification des jeunes](#) | Gouvernement du Québec. Accessed May 3, 2025.

110. From internal documents of the DYP, the percentage of youth in Eeyou Istchee aged 0 to 17 and under the DYP through the YPA accounted for 20.8% of all youth in 2018-19; 25.8% of all youth in 2021-22; and 24.9% of all youth in 2023-24.

The *Chaashtipishtihch* heard many complaints from people working in both the CMCs and the DYP about the difficulties the lack of collaboration and communication creates for them in carrying out their work. From their comments, services to the clients seem to be defined by the boundaries of the various services rather than client needs. In one example, YP, and especially YHS, workers reported many difficulties in accessing specialized clinical resources in Mississauga, yet the children and youth in their care are the most vulnerable and needy in the region. In another example, some people working within the CMC had complaints about YP workers not attending case conferences to coordinate services between their Departments.

However, the new NISK model of services in Chisasibi is promising and it is built around primary care teams supported by an extended team for addressing specific needs. In the model, the extended team is responsible for ensuring there are individual and family intervention plans for complex high-risk vulnerable clients, which includes the clients of YP services.

Although the CBHSSJB By-law on YP states that relevant CBHSSJB departments are to directly support the Director of YP, the *Chaashtipishtihch* only heard from participants of this from some smaller communities where personal relationships between workers, rather than organizational guidelines, seem to be the basis for collaboration to provide comprehensive services.

One hope is that a new revised CMC-DYP protocol will be implemented in the near future, with a well-coordinated monitoring system, to provide a basis for local and regional tracking of cases to allow managers to understand the protocol's effectiveness.

Finally, the *Chaashtipishtihch* would like to point out that a By-law is only as effective as its monitoring and enforcement process and this is where the YP By-law seems to have fallen by the wayside.

RECOMMENDATION #12

That the CBHSSJB Pimuteheu, Miyupimaatisiun and Public Health Groups provide for a monitoring and follow up process for implementation of the CBHSSJB Youth Protection By-law, and also for any other CBHSSJB policy relating to any and all psychosocial services relating to families and children.

RECOMMENDATION #13

That the CBHSSJB adopt an implementation plan with respect to the recommendations of the AUS Task Force and a method for tracking their implementation and reporting on results to the CBHSSJB Board of Directors according to a schedule.

F.2.3. CBHSSJB Strategic Regional Plans

The Strategic Regional Plans (SRP) of the CBHSSJB are important public documents mapping out priorities and targets for the organization. The 2016-21 SRP identified youth protection and child development as a key area with the stated objectives of:

- Implementing a program for youth in difficulty measured by improved services offered for youth in difficulty;
- Implementing an action plan following DYP and YHS audits measured by having implemented 100% of the recommendations from the audit;
- Developing a child development support model with four objectives and one specific to the DYP: improving family support in neglected situations measured by a reduction of 10% of neglected youth.¹¹¹

Regarding the 2016-21 SRP objective to implement a program for youth in difficulty, significant effort was put into an excellent plan for a pilot project in Mistissini called “Working Together to Empower Youth and Families”.¹¹² Unfortunately, this initiative stopped after a couple of years, and the *Chaashtipishtihk* do not have further information about why it was cancelled. In their view, if this plan had been implemented, they question if it would have addressed the issues which led to the creation of this Commission, and the *Chaashtipishtihk* believe it might have made this work unnecessary.

The CBHSSJB has developed action plans following past DYP and YHS audits, to monitor implementation of the recommendations. However, while some recommendations were implemented, others were not, and these results are detailed in the reports on the action plans.¹¹³

On the last objective concerning youth protection mentioned above, the number of neglected youth was not reduced by 10%, according to statistics internally provided by the DYP.



111. CBHSSJB. [Strategic Regional Plan: 2016-21](#). Chisasibi, Quebec. Accessed July 6, 2025.

112. The project was to “Coordinate a community-based intervention program to ensure the coordination and implementation of concrete actions by Public Health, first line services, youth protection services and youth healing services with the goal to empower Youth and Families by reducing the use of Youth Protection services.” See Section E.2 for a discussion of the outcomes.

113. See Section E.3.

The current 2023-30 SRP¹¹⁴ lists a number of objectives which could improve YP services but only one is specific to DYP operations:

- To ensure access to care and services for children and youth measured by the number of youth on the evaluation/orientation waiting list and the number on the application of measures waiting list.

There are other objectives that are more general, but in the view of the *Chaashtipishtihch*, if they were implemented with a focus on YP services, they would address a number of problem areas identified in the consultations:

- To increase the number of land-based activities;
- To increase partnerships with Eeyou-Eenou entities;
- To increase access to psychosocial support and mental health services;
- To increase access to respite services;
- To increase employee retention in all categories.

The *Chaashtipishtihch* have been told that the DYP is actively working on the YP-specific objective cited above. However, they have not heard anything about how the other objectives can be specifically directed to improve YP services, which they feel is also important.

The *Chaashtipishtihch* can only comment on what they have heard in the consultations or otherwise in the public sphere about the implementation of the objectives from the SRPs. Although this may admittedly not be complete information, it may be assumed that it is similar to what is generally known by others working in these areas of service.

SRPs are important public documents. However, there does not seem to be a clear process in place to publicly report on implementation plans and results relating to specific objectives for specific service areas. Without this, the potential of the SRPs to improve services will not be realised from the perspective of the *Chaashtipishtihch*.

RECOMMENDATION #14

That the CBHSSJB designate senior managers to be responsible for tracking and following up on specific SRP objectives relating to their work and connected to broadly defined youth protection issues and child welfare issues.

RECOMMENDATION #15

That the CBHSSJB put in place mechanisms to report publicly on the status and results relating to these objectives on a regular basis.

114. CBHSSJB. [Strategic Regional Plan: 2024-2030](#). Chisasibi, Quebec. Accessed July 6, 2025.

F.3.

CBHSSJB – Services

F.3.1. Trauma

Across the region, people expressed a need to focus on the “roots of the issue” saying this requires understanding their collective historical experience that involved living through colonization and the *Indian Act*, residential schooling, the encouraged move into permanent communities, and ethnic discrimination to name the most obvious. They stressed the need to focus specifically on intergenerational trauma with its roots in the collective Eeyou residential school experience.

As one person told the *Chaashtipishtihch*, “Some people who went into residential schools never came out of it” because the physical, emotional and sexual abuse suffered by many people when they were children had long-term psychological effects.¹¹⁵

In a similar fashion, the Laurent Commission on Quebec’s youth protection system highlighted systemic issues affecting children’s well-being, especially among Indigenous communities.¹¹⁶ It argued that children involved with the DYP are at risk of being traumatized which, on many levels, can have a profound impact on child development. Separation from significant persons may disrupt the child’s ability to form secure attachments with others and in turn this

can cause them to have difficulties in regulating their emotions and in turn problems with forming secure relationships. Trauma also increases the risk of mental health disorders, including depression, anxiety and post-traumatic stress disorder.¹¹⁷ And, children who experience trauma often face challenges in educational attainment and social integration (i.e. feeling part of a group or community, and therefore a sense of belonging).¹¹⁸

Intergenerational trauma refers to the impact that one generation’s trauma can pass on to subsequent generations, because survivors of unresolved trauma may struggle with parenting, perpetuating cycles of abuse or neglect. A participant in one of the meetings said, “How do we talk about intergenerational trauma? How do you communicate with a kid? We don’t know how to communicate.” People living with unresolved trauma often have difficulties in their lives because of the toll that the trauma takes on their ability to form relationships. In some cases, this is associated with poverty and unemployment.¹¹⁹

115. National Centre for Truth and Reconciliation. [Truth and Reconciliation Commission of Canada - NCTR](#). Accessed July 2, 2025.

116. See footnote 48: Laurent Commission.

117. Herman, Judith. 1997. *Trauma and Recovery: the aftermath of violence – from domestic abuse to political terror*. Basic Books.

118. De Venter, M; Elzinga, B. et al. 2020. The associations between childhood trauma and work functioning in adult workers with and without depressive and anxiety disorders. *Eur Psychiatry*, Jul 16;63(1):e76.

119. For a brief overview of poverty and trauma, see [About poverty and trauma | The Robertson Trust](#). Accessed July 2, 2025.

A person who has suffered from chronic or systemic abuses will often internalize the trauma. This has been common with residential school survivors and identified with a cluster of behaviours which “can occur within oppressed societies and include bullying, gossiping, feuding, shaming and blaming other members of one’s own social group as well as having a lack of trust toward other group members.”^{120 121} This is known as “lateral violence”. Referring to gossip as an example of such lateral violence, a participant in the consultations claimed it is “the biggest and cruelest element in our communities”. The person then gave the example of private things shared in an Alcoholics Anonymous meeting being publicly revealed, resulting in the person’s comment: “We don’t trust each other.”

Underlying and unrecognized issues of trauma have also been linked to burnout in frontline workers. The *Chaashtipishtihch* heard repeatedly this is a major issue within the DYP and other services and one cause of the high rate of absenteeism in the DYP.

Children who have been in situations dangerous for their development where their natural sense of security has been breached and they have lost confidence in their sense of self, will need exceptional support to overcome the disadvantages they have suffered. Such exposure to trauma is a concern for each child and youth in care or for adults who, when they were young, were raised in residential schools or in the care of the DYP. In the context of Eeyou Istchee, given the numbers of adults who came out of residential schools as youth, and the numbers of children and youth who

are and have been cared for by the DYP since the mid-1980s, this cannot be overlooked as an issue for the healthy future of the Eeyou Nation.

The cruel fact of the youth protection system in Eeyou Istchee over the past forty years is that while it undoubtedly protected children and youth from harm, it may also have traumatized many of them. This is because it had not been based on an approach grounded on *Iiyiyiu iyihitiwin* but on one not connected to our values.

As a person in the consultations said, “If we tackled and focused on intergenerational trauma which is the roots of the problem, then there would be less need for services such as YP.” Trauma-informed care needs to be a priority with CBHSSJB management so that it informs not only the delivery of services but also the entire approach of management within the organization. If services provided by the CBHSSJB recognized and addressed the effects of trauma, this would ultimately improve the outcomes for children and families involved with YP services.

For this to happen, within the CBHSSJB and the region, public discussions around the impacts of trauma need to be expanded, possibly modeled

120. Bombay, Amy. 2014. *Origins of Lateral Violence in Aboriginal Communities - A preliminary study of student-to-student abuse in residential schools*. Aboriginal Healing Foundation. P.2

121. The *Chaashtipishtihch* considered this issue within youth care at the outset of the consultations, and presented preliminary recommendations to the CBHSSJB to address it.

on the existing work done through the Indian Residential School Program. It also implies that care received through the CBHSSJB in whatever department needs to be fully trauma-informed. Such a system builds knowledge of the widespread impact of trauma into care along with potential paths for recovery. This requires integrating knowledge about trauma into policies, procedures and practices to be able to identify the signs and symptoms of trauma in clients, families, staff and others. At the same time, comprehensive, evidence-based cultural competency training must be mandatory for all staff, with a priority on front-line, non-Eeyou staff of the CBHSSJB.



RECOMMENDATION #16

That the CBHSSJB integrate knowledge of trauma into its policies, procedures and practices.

RECOMMENDATION #17

That the CBHSSJB Public Health Group in collaboration with other departments develop trauma-informed preventive programs.

RECOMMENDATION #18

That the CBHSSJB Human Resources provide a trauma-informed training to all CBHSSJB employees, including Cultural Competency Training.

RECOMMENDATION #19

That the CBHSSJB Human Resources develop a trauma-informed Employee Assistance Program (see Recommendation #60).

RECOMMENDATION #20

That CBHSSJB managers and supervisors adopt trauma-informed supervisory practices.

F.3.2. Silos

Many consultation participants described the CBHSSJB as a complex, hierarchical organization which often operates in “silos”. The use of the word “silos” creates an image of separate structures not connected to each other. The diagram, or organizational chart of the CBHSSJB comes to mind showing the six major organizational groups: Governance, Administration, Nishiiyuu Miyupiimatisiun, Public Health, Pimuhtheu and Miyupimaatisiun.¹²² Each of these groups is in a separate box and only connected through the Governance Group.

When participants in the consultations, particularly those working for the CBHSSJB, described how the organization functions by using the metaphor of “silos”, the *Chaashtipishtihch* understand it as another way of saying that the communication, collaboration and information-sharing among the organizational groups is not effective when it comes to the DYP.

Admittedly, DYP services are supposed to be somewhat “siloed” in very specific ways. Unlike other services, the role of a Director of YP is to implement the provisions of two specific laws for which only the Director of YP has authority and responsibility: the *Youth Protection Act* and the *Youth Criminal Justice Act*.

However, the intent is that this separation and distinctness of the DYP only comes into play with the most serious cases of child protection. The YPA is built around the assumption that, in most cases, preventive and supportive services and programs will be working collaboratively in helping vulnerable families as much as possible, and that DYP services will only be used in exceptional cases.

The DYP has a legal obligation to refer clients to the pertinent services within the organization or the community, however information on existing support services within the CBHSSJB and the communities is often incomplete and mechanisms to access those services are not always clear. The *Chaashtipishtihch* were told that the number of referrals reported from the DYP remains low and waiting lists are high for many CBHSSJB services.

Many participants working in other CBHSSJB service areas described DYP services as operating quite separately from them. However, it also works the other way. Some DYP workers feel that they are siloed from the general CMC services, and also feel frustrated by what they experience as a lack of communication with the regional office, or even with their own managers.

122. At the time of the consultations, the Public Health Department was part of the Pimuhtheu Group.

The *Chaashtipishtihch* heard many examples of how CBHSSJB departments like the CMCs and the DYP do not have regular channels of interdepartmental communication which leads employees to feel frustrated. According to the participants, the YP-CMC protocol developed prior to COVID has not been implemented, and it is only now being discussed again by managers. Some reported that communication between the CMCs and the DYP has at times been blocked on the grounds of maintaining confidentiality obligations¹²³, especially on the part of YP workers. Other, long-time employees in certain CBHSSJB services said that communication and collaboration had been better in the distant past when the DYP was organizationally part of primary care services.

However, effective collaboration across CBHSSJB service areas is possible. The CBHSSJB has existing examples of cross-cutting, collaborative, client-centred approaches in the organization: *A Mashkupimatsit Awash Program*,¹²⁴ Midwifery Services, the Diabetes Program and the NISK model to name a few. In the view of the *Chaashtipishtihch*, DYP services designed and delivered with this kind of approach would help to address many of the issues raised during the consultations.

For instance, the NISK model, implementing the Miyupimaatisiun vision, has important elements that are relevant to YP matters. It is multi-disciplinary, based on collaboration, encourages open communication, is client-centred and most importantly it proposes defining shared goals for the clients and organizing services to work towards them.

RECOMMENDATION #21

That the CBHSSJB continue to invest in, nurture, support and evaluate approaches within the CBHSSJB (including tools, initiatives and programs) that are cross-cutting, collaborative, client-based and encourage open communications, such as including YP in the operations of the NISK model.

RECOMMENDATION #22

That CMCs and DYP fully and consistently implement the YP-CMC Collaboration Protocol of the CBHSSJB, including the monitoring mechanisms by management.

RECOMMENDATION #23

That all families with “suspected” issues, as observed from the initial reporting stage to the DYP (RTS), receive an offer of services from the CMC in order to connect them with relevant prevention or early intervention services.

123. See page 120.

124. The *A Mashkupimatsit Awash Program* was modeled on the Quebec SIPPE Program (*Services intégrés en périnatalité et pour la petite enfance: Integrated Perinatal and Early Childhood Services*) but specifically adapted for Eeyou Istchee by Public Health and services. The Laurent Commission highlighted the SIPPE Program as especially important for working with families who are or may become involved with the DYP.

F.3.3. Youth Healing Services

On June 20, 2023, the *Chaashtipishtihch* presented preliminary findings to the CBHSSJB Executive Director with a focus on their review and analysis of YHS services up to that point. From a review of previous audits and reports, the *Chaashtipishtihch* had identified five problem areas: skills, supervision, safety, follow-up and the application of policies and procedures. The *Chaashtipishtihch* identified specific shortcomings in each of these areas and assessed the Readaptation Program and human resources.

Notably, the problematic issues that the *Chaashtipishtihch* had identified in the five topical areas and in the two programs were all raised repeatedly during the consultations which took place following their initial review, thus reinforcing their preliminary findings and recommendations. Along with pointing out the areas which needed to be addressed, the *Chaashtipishtihch* made three specific recommendations which are repeated below.

RECOMMENDATION #24

That YHS and DYP fully and consistently implement the YP-YHS Joint Clinical Process, including the monitoring mechanisms by management.

RECOMMENDATION #25

That YHS provide intensive psychosocial intervention services to each of its clients, in collaboration with other CBHSSJB departments and services: nursing, addictions services, nutrition/dietician, social services, Crisis intervention mental health – Maanuuhiikuu.

RECOMMENDATION #26

That YHS integrate cultural healing in day-to-day interventions with youth and that the CBHSSJB develop and implement cultural healing programs; land-based programs; as well as the training of staff to implement these programs.

F.3.4. Public Health Group

Within the CBHSSJB, the Public Health Group has the mandate, the expertise, and the human and financial resources to develop a public policy approach and prevention programs addressing the issues underlying chronic, widespread neglect and abuse of children and youth in Eeyou Istchee.

As the Laurent Commission stated in its final report: *“Child abuse is not the result of an individual choice: it is a public health issue, that is, the result of the choices we make collectively and the action priorities we define.”* The report continued that the consequences of child abuse are well known, severe and long-lasting. *“Abuse has harmful consequences on several aspects of a child’s development, and these can last throughout their adult life.”* Furthermore, in some cases, *“the cycle of abuse is repeated from generation to generation.”*¹²⁵

In this regard, a child whose parent has been maltreated is at three times the risk of being exposed to a form of mistreatment.¹²⁶ As many grandparents in Eeyou Istchee are residential school survivors, this should raise a flag because the population of the region may carry risk factors not common to all regions of Quebec.

The Regional Public Health Directors of Quebec made a key submission to the Laurent Commission,^{127 128} about how to change the situation, saying that: *“reducing the difficulties experienced by parents and improving the living conditions of families are essential targets when it comes to preventing violence and abuse against children.”*¹²⁹



125. Laurent Commission, p. 89. Google translation.

126. Laurent Commission, p. 89. Citing Nicholas Berthelot, “Soutenir les parents ayant vécu de mauvais traitements ou des traumatismes développementaux afin d’interrompre les trajectoires de risque intergénérationnelles”, 12 décembre 2019, pièce P-207, CSDEPJ, p. 4. Google translation.

127. Laurent Commission, pp. 90-95. Citing Directeurs et directrices régionales de Santé publique du Québec. *Mémoire de directeurs et directrices régionales de Santé publique du Québec*. 2019, pièce P-086, CSDEPJ. Google translation.

128. Some directors also made individual submissions from their respective regions.

129. Laurent Commission, p. 91. Citing p. 12 in the report from the Directors.

Their recommendation was to: *“formally integrate a parental support program for all parents into the basic preventive services offered by CISSS-CIUSSS, based on evidence and adapted to their needs and local realities, in collaboration with local resources and ensuring the necessary resources for its implementation.”*¹³⁰

Basic preventive services could include seeking strategies to strengthen economic supports to families; changing social norms to support positive parenting; providing quality care and education early in life; enhancing parenting skills to promote healthy child development; and intervening to lessen harms and prevent future risk.¹³¹

RECOMMENDATION #2¹³²

That the CBHSSJB Public Health Group carry out its mandate to periodically report on poverty and social inequities in Eeyou Istchee and to collaborate with the Cree Nation Government's Department of Social and Cultural Development whose mandate includes a focus on the needs and quality of life of certain vulnerable groups of the population, including youth.¹³³

RECOMMENDATION #3

That the CBHSSJB DYP inform the CBHSSJB Public Health Group on the social circumstances of families involved with its services.

RECOMMENDATION #8

That the CBHSSJB Public Health Group develop a general parenting program based on *Iiyiy-iu iitaayihTimuwin* and to be delivered in *Iiyiyuyimuwin*; and that the Public Health Group in collaboration with other CBHSSJB departments develop a more specialized, trauma-informed parenting program for parents whose children are under the DYP.

RECOMMENDATION #12

That the CBHSSJB Pimuchtehu, Miyupimaatisiun and Public Health Groups provide for a monitoring and follow up process for implementation of the CBHSSJB Youth Protection By-law, and also for any other CBHSSJB policy relating to any and all psychosocial services relating to families and children.

RECOMMENDATION #17

That the CBHSSJB Public Health Group in collaboration with other departments develop trauma-informed preventive programs.

130. Laurent Commission, p. 91. Citing p. 24 in the report from the Directors.

131. CDC. May 16, 2024. [A Public Health Approach to Child Abuse and Neglect | Child Abuse and Neglect Prevention | CDC](#). Accessed May 16, 2025.

132. The recommendations concerning the Public Health Group are found under other topics and relisted here for convenience.

133. Cree Nation Government. Departments. Cultural and Social Development. Responsibilities: Social Sector. [Social and Cultural Development | The Grand Council of the Crees \(Eeyou Istchee\)](#). Accessed May 13, 2025.

F.3.5. Nishiiyuu Miyupimaatisiun Group

Ultimately the mission of the CBHSSJB is based on *liiyiyu liyituuwin*. The notion of creating the Nishiiyuu Miyupimaatisiun Group within the organization stems from the broad vision that this should inform all areas of the CBHSSJB, as an overarching principle for the organization. This is reflected in the official vision of the CBHSSJB: “Individuals, families and communities strive to achieve Miyupimaatisiun reflective of Nishiiyuu.”¹³⁴

With a focus on concrete and achievable actions in the coming years and decades, the CBHSSJB Nishiiyuu Miyupimaatisiun Group has an important role to play in the organization to help ensure that services for children and families are grounded in *liiyiyu liyituuwin*. Ideally, in the view of the *Chaashtipishtihch*, this would have the Nishiiyuu Miyupimaatisiun Group inform the development of all areas where the CBHSSJB begins building *liiyiyu iitaayih timuwin* into its services. These include areas like cultural plans for children and youth in the care of the DYP; the formal development of land-based therapeutic programming; the development of other preventive programming with families, such as a parenting program informed by *liiyiyu liyituuwin*.

For example, the Nishiiyuu Miyupimaatisiun Group can advise the DYP, which has responsibilities for the children and youth in care, how to ensure, in coordination with local community partners, the instruction of the children and youth through their rites of passage and the celebration of other “special days” such as birthdays and graduations.

Along with the CSB, the *Chaashtipishtihch* believe that all children and youth need their sense of self to be grounded in *liiyiyu liyituuwin* because that is who they are, where they come from and where they belong.

In the view of the *Chaashtipishtihch*, the reason that land-based programming was so frequently mentioned as a solution in each of the communities during the consultations, is because a connection to the land – whether physical, spiritual or social – is a value built into *liiyiyu liyituuwin*.

During the consultations, perhaps the most common suggestions from people in the communities to address the over-dependence upon the DYP was to use land-based programs for youth. It was also frequently brought up in the consultations as a way to intervene with families involved with YP, or with families having difficulties but before YP has become involved. This was brought up repeatedly in each of the communities. These suggestions are supported with a growing body of evidence from other areas.¹³⁵

The *Chaashtipishtihch* also heard from participants that the CBHSSJB had no land-based programs or services specifically for families. They were told that YHS had sometimes sent youth to a camp in the bush, but they were told it happened on an *ad hoc* basis. For instance, bush trips were not part of the annual budget; there was no specific program for this activity, and therefore no structured activities with specific objectives; and unfortunately, in the past it seems that in certain cases youth had been allowed to go as a reward for good behavior and not because it was built into the youth’s care plan.

134. Cree Health website. [Our Mission | Cree Health](#). Accessed May 2, 2025.

135. Milligan C. August 2019. [Indigenous Land-based healing programs in Canada: A scoping review](#). Technical Report. Hotiits’eeda and NWT Recreation and Parks Association. Accessed June 18, 2025.

The consultations with the population also made the *Chaashtipishtihch* aware of certain important gaps in the care of children and youth under YP in other areas that also related to *liiyiyu liyituuwin*. These concern our customary rites of passage, as well as major “special days” for each child.¹³⁶ The *Chaashtipishtihch* heard one foster mother speak of the difficulties she faced in trying to help her foster child obtain permission from the DYP to attend confirmation classes with friends. At the time the *Chaashtipishtihch* consulted with people, they did not hear of YP ensuring or indeed making it mandatory that children and youth under care were able to experience their rites of passage. In the view of the *Chaashtipishtihch*, these are important elements in an Eeyou child’s life and deserve to be prioritized. This view was reinforced by one person in the consultations who had grown up under YP and told the *Chaashtipishtihch* that they were fortunate to experience these traditions in a foster family, and this experience is important to them today as the parent of their own children.

Consultation participants from the day care centres and the CBHSSJB shared with the *Chaashtipishtihch* their concerns about parenting, whether the family was involved with YP services or not. This was often discussed as an issue related to addictions, but perhaps more importantly, a problem of many young mothers who they were

told that they did not know how to express love for their babies. For the *Chaashtipishtihch*, this highlights another area concerning a rupture with *liiyiyu liyituuwin* in families.

These issues showing a neglect of *liiyiyu liyituuwin* in the care of children and youth under the DYP that make it all the more important for the DYP to work in collaboration with community partners to ensure that these children have some normal grounding in their cultural identity. Within the CBHSSJB, the Nishiiyuu Miyupimaatisiun Group should advise and inform these important aspects of care with the DYP, because they have an expertise in this area and they also have the connections with community partners.

The *Chaashtipishtihch* also heard the idea for each child and youth in YP to have a cultural plan which would help to ensure that this aspect of care is consistently provided.

The recommendation to have a land-based program for youth and families involved with youth protection would require a commitment by the CBHSSJB to a structured program with set goals, a teaching component at different levels with an *liiyiyu liyituuwin* basis, and a comprehensive therapeutic program. The *Chaashtipishtihch* believe that a significant number of youth become involved

RECOMMENDATION #27

That the Nishiiyuu Group inform the development of all areas where the CBHSSJB begins building *liiyiyu iitaayihstimuwin* into its services. These include areas like cultural plans for children and youth in the care of the DYP; the formal development of land-based programming; and the development of other preventive programming with families, such as an *liiyiyu liyituuwin* informed parenting program.

136. See Section F.1.4: Culture and values.

with YP because of behavioural problems and assume that all children and youth in contact with YP have experienced some degree of trauma that could be addressed through a land-based programs based in *liiyiyu liyituuwin*.

The *Chaashtipishtihch* were told that some of our Cree First Nations, along with the Chisasibi day care centres, are organizing customary life-cycle ceremonies (rites of passage) for children, youth and their families to ensure that no family is left without the resources required to provide these important cultural experiences for their children. The *Chaashtipishtihch* see this as another example of the community-based healing movement that is taking shape in Eeyou Istchee. The CBHSSJB could ensure that the youth in care and their families, including foster families, become part of these local initiatives, to complement CBHSSJB services based in *liiyiyu liyituuwin*, in addition to other services offered by the CBHSSJB.

F.3.6. Local Control

The issue of the lack of local control of social programs repeatedly came up in different contexts. At the level of regional governance, this is documented in the CNG-café¹³⁷ report as a complaint from local Cree First Nations. During the consultations, some Cree First Nations reported their lack of information about, and control over, various types of promotion and prevention programming from regional entities delivered in their communities, which certain people expressed as sometimes overlapping with their own planned programming.

In relation to YP matters in the community consultations, several Cree First Nations local administrations and foster parents reported that they were not informed about children and youth from other communities being placed locally in their community for care, they lacked important information such as about the child's specific needs or how to contact the case worker, and there was inadequate follow up. Within youth protection itself, CBHSSJB workers at the local level reiterated feeling disconnected from managers working at the regional offices.

For the *Chaashtipishtihch*, an important goal of transforming YP services in Eeyou Istchee should be to build strong supports for families: those who are involved with YP, those who are fostering children, and for all extended families in every community. As the *Chaashtipishtihch* see it, building these supports for families does

not happen at a regional level, but rather at the local levels defined by the specific character and characteristics of each of our communities.

There are substantial resources available from a variety of sources which could be directed to developing prevention programming and early intervention services. The *Chaashtipishtihch* think that these need to be developed at a regional level by professional resources and set out with a vision, mission, goals, objectives, monitoring indicators and evaluation plan. However, there is one more essential step in this development process in their view: a second-level planning is needed to adapt it to the local context so it can be implemented considering the local situation and resources.

The *Chaashtipishtihch* also underline that planning of early intervention services and prevention activities and programs at the local level needs to reflect local goals and also what is happening in the community. However, in their view, the communities do not have the required expertise to plan this on their own, while some regional entities do, such as the CBHSSJB Public Health Group, the Cree Nation Government Department of Justice and Correctional Services and some other Cree Nation Government departments.

The *Chaashtipishtihch* also propose that the local Miyupimaatishiun Committees set up by the Cree First Nations could play an important role here in overseeing the activities planned by each Eeyou entity so they can be streamlined with local goals and targets.

RECOMMENDATION #28

That Cree First Nations develop and coordinate preventive activities/programs with the support of the regional Cree entities and departments that have the required expertise.

RECOMMENDATION #29

That the local Miyupimaatishiun Committees established by Cree First Nations be encouraged to set local targets for prevention activities and programs and to oversee, coordinate and implement them. Plans for each community need to reflect its specificities and differences.

RECOMMENDATION #30

That the Cree School Board develop and implement a variety of afterschool activities to encourage school attendance and positive involvement of youth in their community.

RECOMMENDATION #31

That the local Sports and Recreation Departments develop and implement a variety of activities to encourage positive involvement of youth in their community, with the support of the Eeyou Istchee Sports and Recreation Association.

F.4.

Youth Protection

F.4.1. Understanding Better to Truly Work Together

The *Chaashtipishtihch* heard many times how little is actually known about the DYP: its purpose, its process, its expectations of families and of partners and its rules and limitations. This creates confusion, as well as frustration for all involved, including the YP workers who feel alienated from their colleagues in the CBHSSJB and from fellow Eeyouch.

The *Chaashtipishtihch* understand that placements of children are traumatic and made worse when the parents or the extended family members do not collaborate because they do not understand the rationale.

The *Chaashtipishtihch* are under the impression that both families and collaborators do not know who to communicate with at the DYP; they do not know the sequence of stages of intervention which involve different YP workers and YP workers change very often. This makes working together quite challenging.

Professionals are frustrated when their YP report (*signalement*) is not retained because they do not have access to the full information or because they misunderstand the mandate of YP and do not see the gaps in their own services in relation to their legal obligations and to the CBHSSJB By-Law on Youth Protection.

When their report is retained, it seems to the *Chaashtipishtihch* that there is often confusion about the respective responsibilities of the YP worker and the professional who made the *signalement*.

RECOMMENDATION #32

That the DYP, in collaboration with the CBHSSJB Communications team, pursue the development of its communication plan to include continuous public education strategies to demystify the YP intervention and encourage community involvement in the well-being of children, with the tools being developed in Cree as well as English and French.

F.4.2. Eeyou Interventions With Vulnerable Families

Families involved with YP are often described as vulnerable which is usually associated with all, some or one of the following characteristics: young, uneducated, underemployed, financially insecure, with inadequate housing, with addictions issues,¹³⁸ with a special-needs child, with a child with behavioural issues.¹³⁹ The YPA is built around the assumption that, in most cases, preventive and supportive services and programs will be helping vulnerable families and diverting them from YP services which will be used only in exceptional cases.

Many participants in the consultations reported with frustration that these preventive and supportive services and programs for families experiencing difficulties do not exist within the communities. And, as the DYP statistics from the 1980s through to today show, the use of YP services continues to be an established norm within the CBHSSJB and the communities.¹⁴⁰ Along with the participants in the consultations, the *Chaashtipishtihch* believe that this pattern will continue in the absence of preventive and supportive services and programs for these clients.

Within the CBHSSJB, the Public Health Group has the mandate to document and report on social inequities and to develop preventive programs for at-risk groups, including vulnerable families. Programs are then delivered to the population through the CBHSSJB Miyupimaatisiun Group, along with other partners. As of yet there is no comprehensive preventive program for this vulnerable group of families, a point also noted in the Laurent Commission report for the rest of the province.¹⁴¹ On a related point, the CBHSSJB still does not have comprehensive addictions services in the region despite plans spanning decades for this purpose.

In the consultations, many participants shared their views that parents involved with YP are in serious need of support from services, but such support is not available. The CBHSSJB already has certain services and programs which are built upon principles of *liiyiyu liyituuwini*, and which can serve as models, according to the *Chaashtipishtihch*. For instance, Midwifery Services and the A Mashkupimatsit Awash Program (AMA)¹⁴² offer comprehensive, preventive approaches supporting families through the perinatal period and with children to age six. The *Chaashtipishtihch* think that these services and programs could serve as inspiration for similar approaches in relation to YP clients.

138. Public Safety Canada. Families, Youth and Delinquency: the State of Knowledge, and Family-based Juvenile Delinquency Prevention Programs Families, Youth and Delinquency: the State of Knowledge, and [Family-based Juvenile Delinquency Prevention Programs](#). Government of Canada. Accessed July 2, 2025.

139. The involvement with the DYP of families with special needs children and/or children with behavioural issues was discussed during the community consultations as well as during the consultations with staff of the DYP and YHS.

140. Internal DYP information provided to the *Chaashtipishtihch*.

141. Laurent Commission.

142. The Laurent Commission strongly recommended that services support the SIPPE program for perinatal family health which is the model from which the A Mashkupimatsit Awash Program within the CBHSSJB has been developed. The Laurent Commission noted the complexities of developing such a transversal program which puts the pregnant woman/new mother and her family at the centre of a coordinated approach.

There are also newer CBHSSJB initiatives based on cross-cutting, collaborative, client-centred approaches across different programming areas and departments to achieve common objectives: the NISK model in Chisasibi, and the new Family Group Conferencing Services (FGC) being developed and implemented by the Nishiiyu Miyupimaatisiun Group for families involved with the DYP. If specific services can be put in place to support the clients after they have gone through the FGC process, the *Chaashtipishtihch* see this as is an excellent initiative relating to YP based on principles underlying *liiyiyu liyituuwin*. And lastly, the new Cree customary adoption and guardianship certification process will provide a new way to help to reinforce our *liiyiyu liyituuwin* practices while ensuring children's security and well-being among extended family or other community members, according to our customs.



RECOMMENDATION #33

That the CBHSSJB draw upon its in-house professionals and, in collaboration with regional and community partners, develop a comprehensive plan for a range of preventive and therapeutic services and programs, with a special focus on implementing land-based programming which would focus initially on youth and families involved with the DYP.

F.4.3. Interventions

At the time of the consultations, the *Chaashtipishtihch* were told by certain participants that children's protection and intervention plans were often not the norm in practice and that many children did not appear to have them. In the experience of the *Chaashtipishtihch* during the consultations, they were not able to understand how relevant personnel were using these plans to help guide children's care under YP. The DYP has organized trainings for their personnel on these important plans, but from what the *Chaashtipishtihch* heard in the consultations, they still do not appear to be a regular feature of each child's involvement with YP services.

For the *Chaashtipishtihch*, one of the confounding factors with the DYP is that workers are operating in crisis mode most of the time. This has an impact on the timeliness of their interventions and referrals and their consistent use. It was reported that YP teams in some communities make referrals but few intervention plans, as these take a lot of time to do. Yet these plans are one of the tools for the DYP to engage parents with their roles and responsibilities.

The *Chaashtipishtihch* also heard the idea that each child and youth in YP should have a cultural plan which would fit in with helping to ensure this aspect of care.

The YPA is built around the assumption that, in most cases, preventive and supportive services and programs will be helping vulnerable families and YP services will only be used in exceptional cases. The lack of services intervening with vulnerable parents to teach them positive skills was brought up repeatedly during the consultations in each of the communities. "There is no help for the parents once the children are taken away." For the *Chaashtipishtihch*, the need for interventions to help people with parenting was linked with an over-reliance on youth protection in the region.

RECOMMENDATION #34

That every child and youth followed under the DYP have an intervention plan which integrates a cultural plan, and that a monitoring process be implemented and reported on quarterly to the CBHSSJB Board of Directors by the Director of YP. This would also be advisable for youth followed under the YCJA.

F.4.4.

Parental Involvement in Services

The *Chaashtipishtihch* believe that parents' involvement is vital in any activity or intervention concerning their children. Parental absence during key activities of their children was identified by participants in a number of ways during the consultations. People from the schools, the police, local recreation teams, the CMCs and YP all described the same pattern of behaviours where some parents do not become involved with the "public life" of their child. To the *Chaashtipishtihch*, this seems to be more of a problem in some communities and less in others, and this lack of involvement is particularly detrimental for youth in crisis or in need of support services.

The activities vary but the pattern is the same. Local recreation personnel say that some parents just drop off a child and never enter the complex to watch them play. The schools talk about parents who only speak with someone from the school if that person contacts them directly. The police and YP workers report cases of children wandering around very late at night and youth out at all hours, and of parents who refuse to come to the CMC after their child has attempted suicide and the police have intervened. The police also mentioned receiving calls from parents who ask them to go out to find their child in the community, rather than looking for the child themselves. In the CMC, when a child is not brought back to the clinic for a return visit, the clinician may have concerns about the health of the child. Without more information, this can lead the CMC workers to report the situation to the DYP.

The YPA sets out expectations for parents to actively participate in the measures identified to correct the situation that put their child at risk. Parental cooperation is a protective factor that makes it possible for a YP report (*signalement*) not to be retained or for the YP file to be closed. YP workers report that many parents do not understand the purpose of the YPA, nor their rights and obligations in connection with these issues. The lack of information and absence of support of the YP worker make it even more confusing for parents and may contribute to their lack of collaboration, from the perspective of the *Chaashtipishtihch*.

Participants told the *Chaashtipishtihch* that sometimes the parents will sign an intervention plan but not follow it; and that parents often do not understand the YPA and their rights and obligations when involved with it. Even after an intervention plan has been signed, participants reported that there was inadequate follow-up.

Some YP workers reported having to deal with conflictual relationships with parents, which at times even involved aggression and threats. The *Chaashtipishtihch* acknowledge that a YP intervention can be a daunting experience for everyone involved, and that this can be particularly pronounced given the intimate nature of the small communities. These situations include another layer of complexity for front-line workers who

may not have the training, background or experience to effectively manage complex interventions in highly emotionally charged circumstances, particularly in tightly-woven and small communities.

Some YHS workers discussed the lack of parental involvement with their youth clients. However, from the perspective of the *Chaashtipishtihch* resulting from the consultations it seemed to reflect more of a systemic issue with YHS services than any refusal on the part of the parents.

Intervening with non-voluntary clients in a context of authority will always be challenging, and as a result, the *Chaashtipishtihch* think that YP workers as well as YHS workers need to become more competent at engaging youth and families in the treatment process. This competency includes having a non-judgemental attitude, providing clear and transparent information, and demonstrating motivational skills. Even if the Motivational Interviewing model initially developed for addiction issues has limits because of the time constraints inherent to intervening in children's situations in YP, a modified Motivational approach has shown promise in other regions to engage youth and parents alike.

RECOMMENDATION #35

That the CBHSSJB Human Resources to provide training to DYP and YHS staff on the Motivational Approach model adapted upon principles of *liiyiyu liyituuwin* in order to engage families in the healing process.

F.4.5. Assessments

Four kinds of assessments for clients of Youth Protection were discussed during the consultations: psychological or psychiatric assessments by professionals; functional assessments by youth protection workers; suicide-risk assessments; and assessments of foster homes. The schools also carry out psycho-educational assessments. Assessments are the initial step prior to developing client plans and programs for delivering interventions, which are discussed further on in this report.

The need for professional psychological and psychiatric assessments of many clients was raised by both CMC and YP workers. To highlight the general need for this kind of service among the clients of Youth Protection, workers at YHS estimated that a significant majority of their clients have special needs or mental health issues, but they report that these clients are not receiving specific services in relation to these issues. Certain participants shared their impression with the *Chaashtipishtihch* that youth may end up staying in care longer as a result, and that they may not be receiving services that they need, including accessing more specialized resources. Participants also shared their views that this also contributes to staff burning out.

When talking about assessments during the consultations, the *Chaashtipishtihch* remarked that participants did not mention the YP-CMC Protocol but rather many expressed confusion about who was responsible for arranging assessments and follow-up.

However, in the early 2020s, it seems that there was at least one successful exception where comprehensive assessments were carried out in Eastmain. The Disability Programs Specialized Services of CBHSSJB Regional Special Needs had organized forty neuro-assessments. This was a collaboration of the regional services with the local CMC, daycare and school. This led to further client assessments. The *Chaashtipishtihch* were told that the project had an important educational component for caregivers and service providers about their roles to help youth diagnosed with specific disabilities. The community leadership lauded this initiative saying it was beneficial support for parents, foster parents and the collaborative community program for children and youth.

The *Chaashtipishtihch* heard that there was an attempt to carry out the same process in Waskaganish but, for some reason, it was not completed. For the *Chaashtipishtihch*, this raises the question of why comprehensive psychological assessments were only carried out for children and youth from Eastmain at one time in the past, and not as part of standard practice within the CBHSSJB.

In general, staff mentioned that psychological and psychiatric assessments were difficult to obtain and the process for arranging them was confusing for both CMC and YP workers. Although CMC and DYP workers receive training to carry out psychosocial or YP assessments, some felt that all YP clients should be assessed by professionals to orient and refer them to appropriate services.

Assessments are closely linked to having individualized plans for each child followed under YP so that the child can receive proper care and nurturing. An analogy: if a child was taken under medical care there would be a proper diagnosis, which is equivalent to the assessments, and a care plan proposing the appropriate professionals to cure or stabilize the condition. A participant suggested that assessments need to be more global and inclusive, involving not only the parents but also the child or youth and looking at issues of poverty, such as food insecurity and assessing the living situation of the child. The *Chaashtipishtihch* understand that this is what is required under the YPA, for all children but even more so for Indigenous children. Some expressed concern that without carrying out proper assessments, decisions may be not based on fact but on hearsay, especially in small communities where workers are juggling, on the one hand, between personal community relationships, and on the other hand, with being in positions of authority over their fellow community members.

Concerning suicide risk assessment, some workers suggested that the tools and criteria used by YP may be different from those used by the CMC. As well, the *Chaashtipishtihch* questioned if the new assessment tools for behavioural risk developed

for the new service model in Chisasibi were also being adopted by the YP. This was not clear to them from the consultations, and if it is not the case, they suggest that it should be considered specifically.

Foster homes are usually assessed by CBHSSJB Foster Home workers, but some foster parents (usually family members of the child) are also assessed by the YP worker in emergency situations. Some YP workers said that it can be difficult to connect with foster parents who are working given their work schedules, and that sometimes they do the assessments in an office instead of in the home setting. If the purpose of home visits is to establish a connection with the foster parent(s), assess the safety of the home for the child, and importantly to understand the appropriateness of others living in the home, then office-based assessments fall short of addressing these security-related questions about potential foster homes.

Some foster home parents complained that while they might have been assessed when they first offered to foster children, their home had never been reassessed although many years have passed. Yet, the *Chaashtipishtihch* understand that the Foster Home Department is supposed to reassess every foster home on a yearly basis.

RECOMMENDATION #36

That the CBHSSJB ensure adequate resources and active recruitment of professionals who can provide specialized assessments for DYP clients, in respect of the YP timelines, to establish appropriate protection plans.

RECOMMENDATION #37

That the Foster Care Department ensure that all of the foster families are assessed and re-assessed as per the foster care procedures.

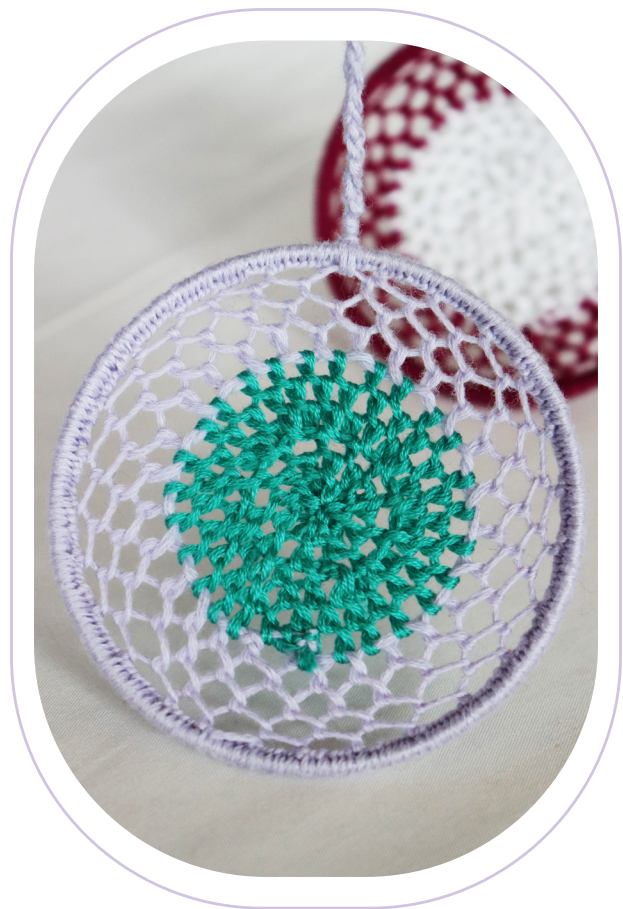
F.4.6. “Life Plans”

As well as the intervention plan and individualized service plan (when other services are involved), the “life plan” is the tool used in YP to ensure that every child or youth followed under YP will have a permanent living situation which will, on a permanent basis, ensure continuity of care and the stability of the child or youth’s relationships and of living conditions appropriate to their needs and age. These plans are essential tools for helping both children and youth involved with YP to transition from being wards of the bureaucratic system to being protected within some type of family situation, and to hopefully reach their potential growing up. Previous reports and the consultations both suggest to the *Chaashtipishtihch* that these plans are not systematically developed and used, with the result of certain children and youth may remain within the system longer as a consequence.

The *Chaashtipishtihch* were also told that court orders have been extended for some youth placed in the YHS who have ended up staying in care for several years because of a lack of available foster homes.

The *Chaashtipishtihch* were told by certain participants that permanency planning, or establishing a life plan, is not being applied by YP personnel. Without plans, re-integrating children with their parents becomes a challenge with no structure regarding home visits.

The *Chaashtipishtihch* heard from participants of other cases of youth remaining for years in YP and YHS, in some cases until age 18, and without official, formal plans. In the view of the *Chaashtipishtihch*, it would be essential for the CBHSSJB to assess how many children and youth



have the required plans, how these plans have been implemented or not, and also to understand the outcomes for the children and youth based on the plans, such as through an accountability framework for tracking how children and youth move within the system.

The *Chaashtipishtihch* learned from participants that many placements in foster care under the YPA become extended until the age of majority. However, a proper review of the child's situation would provide the opportunity to explore options, such as youth protection tutorship, a program whereby the youth remains in the care of her current foster parents, and the foster parent, now tutor, continues to receive the same financial support from the CBHSSJB, while assuming some parental responsibilities, but without the need for YP involvement.

As the new Cree Customary Adoptions and Guardianship certification process comes into operation in Eeyou Istchee, the *Chaashtipishtihch* think that it will open a potential alternative for some children and youth under long-term placements with YP. For some families who may become involved with the DYP, it may also become a better option. The DYP will need to continue to coordinate with the Cree Nation Government to work out a communication plan with those managing this Customary Adoption and Guardianship certification process and finalize the protocol for their interaction, including training of DYP staff.

F.4.7. Foster Homes

The lack of foster homes, especially for babies and children with behavioural issues, results in sending them to other communities for fostering. The *Chaashtipishtihch* were told that they often arrive without all their necessary legal and medical documentation and psychosocial and medical information. This makes it difficult for foster parents to adequately care for the child and to ensure that the appropriate measures are applied to help the child and the family.

At the same time, the CBHSSJB Foster Care Department does not provide training for foster parents about managing children with complex issues such as disabilities or mental health issues. The *Chaashtipishtihch* were told that some trainings about fostering in general were given during working hours and only in English, making it inaccessible to foster parents who work or who prefer *liiyiyuymuwin*.

Some foster parents reported feeling abandoned by the YP workers, who were said to not visit their clients often and to share little information about the orientation of the case. For older youth, it seems to the *Chaashtipishtihch* that inadequate planning for leaving care results in situations where certain youth may “age-out” of care with little preparation for adult life.

RECOMMENDATION #38

That the DYP Reviewers ensure that each child followed under the YPA has a “Life Plan” which includes consideration of all options available, including YP tutorship, and other long-term plans.

RECOMMENDATION #39

That the Cree Nation Government actively support the implementation of Customary Guardianship/Customary adoption in each community, and that the DYP train the YP staff on their responsibilities related to Customary Guardianship/Customary adoption.

Foster parents also said there is no respite care available, and uneven access to daycare, even for those caring for children with special needs. This lack of support services often leads to the foster parent “burning out” and the child experiencing yet another displacement. And the lack of respite care for birth parents is also mentioned as a reason that children with special needs may end up in the care of the DYP.

Some foster parents also reported having long-term foster children abruptly removed from their care without any normal process for saying goodbye. They experienced this as cruel and unusual behaviour because foster parents and their children in care develop bonds, which from an *liiyiu iitaayih timuwin* perspective, should be recognized and respected.

The *Chaashtipishtihch* understand that in the near future, the CBHSSJB Foster Home Department will come under administration by the DYP, and in their view, this should help to streamline the services of foster homes within the overall operations of the DYP.

The *Chaashtipishtihch* support this change, as they understand from the consultations that administering foster homes through a different department may have contributed to some of the issues brought out by consultation participants. This change should also help to clarify the role of foster parents within the DYP as they occupy a position somewhat similar to that of contract employees, based on what was shared with the *Chaashtipishtihch* through the consultations.

RECOMMENDATION #40

That the Foster Care Department ensure that each foster parent receive the appropriate training and support to adequately care for their foster child/children, for example, on issues to child development, special needs, and trauma.

RECOMMENDATION #41

That the Foster Care Department set up support strategies for foster parents, e.g. a mentoring program or support groups for foster parents.

RECOMMENDATION #42

That the YP workers monitor the situation of the youth in care, by having regular contact with the child, the parents and the foster parents.

RECOMMENDATION #43

That the YP worker keep the foster parent informed of all pertinent information related to the child such as medical and trauma history.

RECOMMENDATION #44

That the rules around parental authorizations (e.g. travelling) be clearly explained to foster parents, and official documents transmitted to the foster parents, according to each child's protection plan, with a view to support the child's participation in activities as much as possible.

F.4.8. Young Offender Services (YCJA)

As a federal law, the *Youth Criminal Justice Act* (YCJA) must be considered separately from the provincial *Youth Protection Act*. However, this consideration should account for the fact that in Quebec the Director of YP assumes the role of the “Provincial Director” as they are named in the YCJA. As a result, the Director of YP is therefore effectively responsible in this capacity as “Provincial Director” for psychosocial intervention in issues of youth criminal justice, among other responsibilities.

Overall, the *Chaashtipishtihch* received little feedback in the consultation process on the application of the Youth Criminal Justice Act in Eeyou Istchee. The feedback that they did receive revealed a certain confusion in people’s minds. Participants often believed that the two laws were a single combined law. Participants also seemed not to understand the distinct professionals and processes involved in the application of each law.

As a result of this confusion, many of the observations and comments received by the *Chaashtipishtihch* concerned the DYP and the Young Offenders teams without distinction, citing issues with the clarity of processes, the voices of youth and family “being heard” in these processes, the trauma of placement, and issues of coordination with other services.

Nevertheless, the *Chaashtipishtihch* understand overall on the basis of participants’ input that the relevant provisions of the YCJA were not fully implemented, and that if they were, this could increase the participation of all stakeholders in

addressing juvenile delinquency issues in Eeyou Istchee, in a culturally adapted manner. For example: extrajudicial measures which can be applied by the police for minor offences (e.g. issuing warnings or referrals) are not integrated into the practice of the EEPF; local Justice Committees that are well adapted to Cree culture are in operation for adult offenders, supported by the Cree Nation Government Department of Justice and Correctional Services, but seem to be rarely used for young offenders; and, Youth Justice conferences under the YCJA could be used much more.

It seems to the *Chaashtipishtihch* that the population and many stakeholders in Eeyou Istchee do not know the Youth Criminal Justice Act well. As a result, the legislation is not used to its fullest potential in our context. The *Chaashtipishtihch* believe that there is much room to do more prevention as well as more culturally adapted interventions to increase positive outcomes for young people who come into contact with the justice system.

The *Chaashtipishtihch* welcome the news that a steering group was reactivated in 2024 by the CBHSSJB Director of YP, in partnership with YHS and the EEPF. A number of items have already been identified as requiring coordinated action, such as the application of the “Multisectoral Agreement” for children who are victims of physical abuse, sexual abuse or serious neglect. It seems to the *Chaashtipishtihch* based on the information provided to them that the work of the group is progressing well, and that it would be beneficial to broaden the membership of this steering group, and to also include items to improve the application of the YCJA in Eeyou Istchee.

RECOMMENDATION #45

That the Young Offender Service implement all the recommendations made regarding youth protection clients with YCJA clients, such as those related to quality of services, communication and best practices.

RECOMMENDATION #46

That the DYP/YHS-EEPF Steering Group include representatives of the CBHSSJB Nishiiyuu Miyupimaatisiun Group and of the Cree Nation Government's Department of Justice and Correctional Services and expand its mandate to improve implementation of the YCJA, particularly in alignment with the cultural needs and realities of youth living in Eeyou Istchee.

RECOMMENDATION #47

That the EEPF support and encourage its officers to implement the extrajudicial measures in Eeyou Istchee, as per the YCJA.

RECOMMENDATION #48

That the Director of YP, in her role as Provincial Director under the YCJA, develop the practice of youth justice conferences under that Act, in collaboration with the Cree Nation Government's Department of Justice and Correctional Services.

F.4.9. Work Processes

a) RTS

RTS is the regional YP intake and triage system which operates by telephone. It is presumably familiar to professionals coming to work in Eeyou Istchee from other regions, but based on the consultations, it seems to be less understood by others in our region. The perception of RTS among participants seems to be mixed. Some find that it is helpful to have accountability for YP reports (*signalements*) made to YP services, while others expressed operational issues with the service. The consultations did not focus on RTS specifically, so the comments that were made expressed individual experiences with the system overall, and in certain cases touched less directly on RTS, and more on global YP services. However, some of the complaints were reported from most, but not all, of the communities so they may reflect systemic issues, according to the *Chaashtipishtihch*.

In recent years, the RTS process for Eeyou Istchee is as follows: a YP report call comes in and a check is made to see if there is an existing file in YP. If there is no file, RTS notifies the RTS supervisor of the nature of the alleged risk or danger to the child, in accordance with the definitions provided in the law. If the report is approved by the RTS supervisor at this stage (“retained”), the report is e-mailed to the local YP team leader for evaluation. If there is a YP file already open, the RTS worker may call on the local YP worker to get more information and, depending on the situation, this new report may be retained or treated as additional information for the existing file.

The issue which appears to be the most problematic according to the people consulted is the apparent absence of follow up by the RTS workers to those who made the YP report (*signalement*). Due to changes to the YPA, RTS workers now have to systematically inform everyone who has made a YP report to RTS about the decision on whether or not to retain the report. The *Chaashtipishtihch* have been informed that RTS workers are undergoing training on this point at the time of writing this report, and they believe that this should help to resolve this issue.

The *Chaashtipishtihch* heard participants complain about calls not being answered or not being answered in time, an issue certain participants from the police find particularly frustrating, while others reported calling multiple times before being answered. It seems that the telephone lines in place may not currently support the number of actual calls coming in at certain times, and it seems to them that a new system is needed.

Another issue identified by participants is that regional RTS staff working for the CBHSSJB do not have specific knowledge of local issues and workers, although they are effectively called upon to make a decision about a local situation. These RTS workers confirmed to the *Chaashtipishtihch* that they do not have access to all the up-to-date information on local resources; however, they do communicate with the local YP team to get additional information on the child’s situation. It seems to the *Chaashtipishtihch* that unfortunately, it is unlikely the person making the YP report (*signalement*) would hear about this step in the process, which may result in a perception that this local perspective is not taken into account when this may, in fact, be the case.

Overall, it seems to the *Chaashtipishtihch* that communication between RTS workers and professionals making a YP report (*signalement*) needs to be enhanced.

The *Chaashtipishtihch* also note that the fact that pertinent information may not be shared by relevant YP personnel with police and even with local YP workers was also raised as a potential security issue in some cases.

On a related point, the *Chaashtipishtihch* were told that one of the large schools stopped reporting to RTS because they felt that nothing was done when reports were made. They said that as soon as they had made a *signalement* to RTS, all communication was restricted, and they felt blocked from being further involved in the issue that they had reported.

In a general comment, a CMC professional said they did not report to RTS because of lack of time and “knowing that nothing will be done about it” by YP.

Despite these statements by certain participants, the *Chaashtipishtihch* understand that YP always has someone on call, as does the CMC, and that there is a psychosocial team in each community. As noted above, these complaints were voiced by individuals, and it is not obvious to the *Chaashtipishtihch* to what extent some of them may reflect systemic issues with the RTS service, or to what extent they may be more a reflection of personal stigma against YP workers (which these YP workers reported feeling from people from other CBHSSJB departments).

Another issue heard by the *Chaashtipishtihch* is that people from a small community reported not calling RTS for fear of hurting the family that they intended to help. This is due to the view of these participants that the system is not set up to allow them to help the family in a way reflective of *liiyiyu liyituuwin*. Similarly, Elders reported being hesitant to call even with recurrent issues with their children and grandchildren for fear of hurting the family members that they wished to help.

RECOMMENDATION #49

That the RTS improve the process of treating YP reports (*signalements*) to reduce the response time and ensure that the people making the report are duly informed of the decision to retain or not to retain a report, and the basis upon which the decision was made.

RECOMMENDATION #50

That the RTS inform the DYP collaborators such as police and medical staff of any security concerns or medical issues that they know of, in order to promote safe co-interventions, within the bounds of the YPA.

RECOMMENDATION #51

That the DYP actively inform its partners and the general population about the mandate of YP services and the limits of their interventions and actively promote the application of the DYP-CMC Collaboration Protocol.

b) Confidentiality

Among other things, confidentiality has to do with communication: specifically, what can be communicated, when, and to whom. For instance, anyone whose work involves providing a psychosocial service that involves personal information is most likely bound by professional rules of confidentiality. In most cases, it is also assumed the person providing the service and the person receiving it do not have any prior personal relationship.

The *Chaashtipishtihch* note that this is often not the case in Eeyou Istchee, which can make it difficult for the person providing the service to remain objective, and which may also lead clients in the community to fear that their sensitive personal information may be shared with others inappropriately. For example, the *Chaashtipishtihch* noticed that some people decided not to remain in a consultation meeting with them, seemingly for that reason. And they also noticed that it was the reason given for young parents not to attend workshops on parenting in one community. One professional in the consultations gave the example of children in an abusive family who would “want someone to talk to”, but when they were encouraged to go to the CMC to meet with a worker there, they tend to ask who will be working there at a given time. To the *Chaashtipishtihch*, this suggests that there are questions from clients around confidentiality and that certain clients may not show up to these kinds of appointments as a result.

In another community, people at the school said “youth don’t trust social workers in town. There are instances where Youth Protection has been contacted regarding a student and the worker who shows up is their cousin.”

Another factor for the *Chaashtipishtihch* is the lack of formal communication structures between the DYP and other CBHSSJB services. The protocol between the DYP and the CMCs lays out how information about YP clients could be shared so that the client is able to receive preventive and intervention services. Another way to do this is to have the clients agree to have specific information shared by DYP with the CMC. However, the *Chaashtipishtihch* assume that the YP worker would need to have a good relationship with the client family, which they understand is not always the case.

Similarly, participants from the schools had many complaints that the DYP does not share information about children in care which makes it difficult for them to help the children. Although there is a protocol between the CSB and the CBHSSJB, the *Chaashtipishtihch* were told that at a certain point in time, the CBHSSJB staff did not participate so the protocol was not functioning.

Another issue around confidentiality was explained to the *Chaashtipishtihch* in a consultation meeting: “There are a lot of boundaries that prevent people from collaborating and communicating. Confidentiality is a big issue because there’s a misunderstanding about what is confidential. The ultimate goal is to help the child, but we’re so institutionalized we don’t search for ways to share necessary information. Sometimes we need to first find ways to heal ourselves.”

In general, the *Chaashtipishtihch* have the impression that YP and YHS workers do not have the background or training to properly understand how to deal with confidential information in certain cases: for them, the bottom line is that workers must understand how to keep client information confidential or this puts the entire YP service at risk. With recent amendments to YPA, the rules on confidentiality have been made more flexible, but respecting the confidentiality of YP clients remains the right of the clients in most instances, if it is in the interest of the child.

Some YP workers also reported to the *Chaashtipishtihch* that they had been feeling disrespected and treated with condescension

by certain workers of other CBHSSJB services. However, they must also understand how to promote communication and collaboration with services outside of YP for the benefit of their clients. The *Chaashtipishtihch* think that confidentiality will continue to be an issue as long as the DYP does not have a comprehensive, on-going training program and is not working through simple protocols with other service providers.

In their view, everyone involved in ensuring the security of children also needs to know the limits of what the YPA allows, and the legal requirements of laws governing the provision of psychosocial services must also be understood and respected by all concerned.

RECOMMENDATION #52

That the YP workers share all pertinent information and facilitate the exchange of information between all pertinent stakeholders (professionals, foster parents, extended family) to better serve the interests of every child under the DYP, all within the boundaries of the *Youth Protection Act*.

RECOMMENDATION #53

That the DYP's communication plan include information tools for DYP collaborators, to enhance their own knowledge of the YP mandate and legal requirements.

c) Follow-Up

Follow-up is an essential aspect in the continuum of services for all children under the care of the DYP, and from a perspective of *liiyiu iitaayih timuwin*, also forms part of the continuum of services for the families of the children. Inadequate follow-up by YP workers was cited by participants throughout these consultations and in a variety of different contexts. The *Chaashtipishtihch* believe that issues relating to follow-up are closely linked to how the DYP is organized internally, how it communicates and collaborates with other services and the degree to which it is client centred. Among other things, it concerns how YP workers understand the responsibilities of their work, and how priorities are determined.

Certain YHS workers advised the *Chaashtipishtihch* that the coordinators may not follow up because there are too many things going on such as trying to organize work schedules. One YP worker complained to the *Chaashtipishtihch* about being unclear about how the RTS and the DYP communicate to determine follow-up on a YP report (*signalement*). To the *Chaashtipishtihch*, this implied a striking lack of understanding in basic processes of the DYP, at least by that one worker who needs to be very clear on them.

Active YP files are required to have specific, time-directed follow-up. However, in the consultations certain individuals mentioned hundreds of open files for which this had, presumably, not happened in a timely manner.

Another time-directed follow-up concerns youth in placement who are “aging-out” and being discharged from the legal responsibility of the DYP, in collaboration with YHS. The DYP services were criticized many times in the consultations

for not having adequate follow-up or proper file closures to help to prepare these youth for life on their own.

At the time of the consultations, some workers from one of the group homes complained about what they perceived as a serious lack of follow-up with their clients, poor communication with the group home staff, absence of plans for the youth, and lack of discharge planning with older youth. They also mentioned that after youth were dropped off at the home, the YP workers were often very slow to meet with the group home workers about the youth.

Another troubling issue raised with the *Chaashtipishtihch* was the perceived minimal follow-up from YP workers with youth who have attempted suicide and are under the care of the DYP.

There were many frustrations voiced by certain foster parents who reported to the *Chaashtipishtihch* that children were dropped off at their home and their experience that there was no subsequent follow-up from the YP worker. Several foster parents also spoke of the difficulties in contacting the child’s worker, which they mentioned is compounded for parents fostering a child from a different community, as in several cases they reported not knowing who within the DYP was responsible for the child’s file.

Parents involved with the DYP are typically understood to be having problems within their family. However, on the basis of the consultations, the *Chaashtipishtihch* are under the impression that in practice the onus of initiating follow-up seems to lie with the parents themselves, which should not be the case. For instance, they heard an example of a YP worker referring parents to resourc-

es at the CMC, and the parents' impression that anything more was considered by the YP workers to be "handholding" and taking away from the parents' independence. However, the *Chaashtipishtihch* were also told that often parents do not understand how the CMC works in order to help them. It also feels to the *Chaashtipishtihch* that another confounding issue is that CMC resources often have waiting lists, and as a result, people do "fall through the cracks."

From a different perspective, workers in one of the CMCs said that YP workers should not be doing more follow-up with the parents they are involved with because the parents "have to feel the consequences." This seems to imply that without follow-up, parents will have incentive to change.

Some participants working for the EEPF reported feeling that there should be more follow-up with parents and services to address their issues. They also felt that there was not sufficient communication from YP with the EEPF, and they expressed concerns about lack of follow-up from the DYP, for instance in a case when youth need a psychological assessment, and especially if the youth have the potential to possibly pose a threat to themselves or others.

Professionals and paraprofessionals working in various CMCs spoke of frustration because there was no follow-up from YP once a file was closed, although the underlying problems in the family remained. They also complained in many communities that once a child they are following is taken under the responsibility of the DYP, the

CMC does not know where the child is living and who is responsible for them. This was also a complaint from a number of schools.

CMC professionals also brought up the apparent lack of follow-up on YP reports (*signalements*). As this was also widely brought up by people from various schools, it may imply that the current structure is not addressing the need for psychosocial services and support for families, or it could instead be attributed to these individuals not being contacted following a report, as mentioned above. YP reports are made because someone is identifying a problem which seemingly needs to be addressed. In the view of the *Chaashtipishtihch*, if the problem is judged to not meet the reporting thresholds of the YPA, it may nonetheless be a concern which should be considered by a social worker and possibly prevented from escalating into a YPA problem.

Certain participants from the CMCs expressed concerns that they are not informed when a child is taken into care, so they do not know where the child is and who is responsible for them. For instance, this is a problem if the child is undergoing medical treatment, which the DYP may not necessarily know.

Certain consultation participants from the schools expressed frustration with the lack of contact and follow-up with the DYP concerning children absent from school. These people expressed their wish for better communication, complaining that YP workers "refuse to attend important meetings when it involves students that need help."

RECOMMENDATION #54

That the DYP and YHS develop and consistently apply a program based on *liiyiyu iitaayih timuwîn* to prepare youth who are aged 16 and over and in placement, including those who will be "aging-out", and that the CMC provide transition services until the youth reach age 25.

d) Administrative Tasks

Many workers complained about spending an inordinate amount of time doing reports instead of supporting and following up with families. Some of them said that more than half of their work can be administrative, depending upon the nature of the case, and this does not lead to client-centred services.

The *Chaashtipishtihch* see several issues here based on the consultations: every intervention must be recorded and there are many forms to fill out and documents to obtain and update on each case; English is generally the second language of most YP workers, and additionally, their Cree is primarily oral; many of the staff lack experience and skills with report writing, and particularly in English; many staff are only temporary and replacing others workers on leave so they may have little training about reporting requirements; and the caseloads are so large the YP workers were said to often operate in crisis mode.

Participants also suggested that reports need to be tailored to the Cree context.



RECOMMENDATION #55

That the DYP develop a plan of action to research and develop ways to reduce the administrative load of YP workers and/or to rebalance their work to favour clinical instead of administrative tasks.



e) Protocols

Protocols are the basis for collaboration between departments within the CBHSSJB and between YP and CBHSSJB services and other community services and programs. Protocols are an important tool in changing the old pattern of removing children from their home to a pattern of supporting families having difficulties. They are the basis for collaborative, client-centered work based on good communication.

A Collaboration Protocol between Youth Protection Services and Community Miyupimaatisiun Centers was adopted in 2017 by the CBHSSJB Board of Directors. Relevant managers were then trained to implement the protocol with the understanding that they would, in turn, train their staff. However, staff reported to the *Chaashtipishtihch* that the trainings did not happen. The plan to implement the protocol in each of the CMCs also did not appear to happen either, although there were a few initial activities in a couple of communities, all according to the information provided to the *Chaashtipishtihch*.

A Joint Clinical Process between the DYP, the YCJA Services and YHS was finalized in 2020. The *Chaashtipishtihch* were informed that structures were put in place to process admissions, facilitate clinical collaboration and monitor the application of the protocol; managers and professionals were trained, but they understand that the collaboration fell through after a few years after turnover among staff and managers.

A Protocol for the Joint Provision of Services to Youth between the Cree School Board and the YP-YHS was developed in 2016 and revised in 2020 to include all of the CBHSSJB services. Based on the information that they were able to gather, it appears to the *Chaashtipishtihch* that this protocol was also not implemented. Staff from the Cree School Board said that meetings had started but that the YP representatives had not attended. The joint monitoring committee at the senior managerial level was seemingly not implemented either.

Certain police participants said they had had an excellent working relationship in Mistissini which was managed by a dedicated staff person from the DYP. However, after that individual left the collaboration and communication stopped. To the *Chaashtipishtihch*, this highlights the need

to maintain stability in these relationships even with changes in staffing. Both the EEPF and the DYP identified a pressing need to the *Chaashtipishtihch* for a clarification of roles and better coordination involving cases of sexual and physical abuse or serious neglect, and to them, this points to the need to re-activate the Multi-sectoral Agreement between the EEPF, the CBHSSJB and other Cree entities.

Other areas of concern which require the joint collaboration of the police with various departments of the CBHSSJB also require protocols, in the view of the *Chaashtipishtihch*. These protocols would address complex issues including for example, situations relating to youth in distress in all communities and at all hours of the day or night, or youth placed at YHS who run away.

RECOMMENDATION #56

That the DYP and its partners fully and consistently implement the various protocols already developed and adopted, including management monitoring mechanisms: the DYP-CMC Protocol of Collaboration; the DYP-YHS Joint Clinical Process; the CBHSSJB-CSB Joint Protocol for the Provision of Services to Youth; the Multi-sectoral Agreement between the EEPF, the CBHSSJB and other Cree entities.

RECOMMENDATION #57

That the DYP/YHS-EEPF Steering Group actively pursue its mandate to develop or revise protocols of collaboration involving the EEPF, the CBHSSJB and other Cree entities.

F.4.10. Human Resources

a) Debriefing and Supervision

In YP and YHS, the high turnover at all levels of staffing, the extremely high proportion of staff on medical leave for stress, and the absence of regular team and individual debriefings and formal, mandatory individualised supervision are linked from the perspective of the *Chaashtipishtihch*.

The Employee Assistant Program (EAP) is said to be difficult to access because it is limited to English and French, felt by some as not user-friendly and lacking a Cree approach. Some workers who participated in the consultations also told the *Chaashtipishtihch* that they would not use EAP because it is not in-person. Wiichihiituwin is seen by some participants as a good model for a telephone support, but the *Chaashtipishtihch* note that it is not specific to YP. There was no information provided during the consultations about any dedicated resources for mental health support for these front-line workers.

The *Chaashtipishtihch* believe that debriefing provides a safe space for workers to reflect and discuss their emotional responses following

a traumatic incident. This is especially important with youth protection work and for staff working in small home communities. The *Chaashtipishtihch* also support the position that the ideal person for debriefing is the YP team leader but only after training, with initial guidance, and with back-up resources which can be accessed in a timely manner.

For the *Chaashtipishtihch*, structured, mandatory, ongoing supervision is especially important for the YP workers of the CBHSSJB in view of the general nature, background and experience of many members of those YP teams. At the same time, supervision sessions also provide a mechanism for continued support and training on issues within the work.

In YP front-line work, the *Chaashtipishtihch* highlight that clinical supervision needs to be constant and ongoing. However, in the CBHSSJB, some of the people supporting the front-line workers are not in a position to provide this clinical supervision, suggesting that they would need support from appropriate professionals in that regard.

Some YP workers suggested the service needs a dedicated YP support for YP workers at the community level.

RECOMMENDATION #58

That the DYP ensure that every team has structured, recurrent, mandatory team or group debriefings, as well as scheduled, individualized supervision sessions.

RECOMMENDATION #59

That the CBHSSJB develop dedicated and specific resources to support the mental health of frontline workers.

RECOMMENDATION #60

That the CBHSSJB tailor the Employee Assistance Program mentioned in Recommendation #19 to *liiyiu liyituwin*.

b) Staff Training

On the basis of the consultations, the *Chaashtipishtihch* understand that it has been difficult to find Cree workers to fill certain positions with the YP and YHS services. In view of the critical importance of linguistic and cultural competency for this sensitive work in Eeyou Istchee, the *Chaashtipishtihch* understand that the approach in certain cases has been to engage Cree personnel that may not have the background and profile typically associated with these services. Some workers also mentioned that this was the case for certain managers, promoted on the basis of seniority.

The *Chaashtipishtihch* feel that the educational profile of certain of these YP workers has an important impact on the quality of services that they are able to offer, including in view of the complexity and inter-personal skills required to carry out life-changing interventions in a context of authority. The *Chaashtipishtihch* feel that this complexity is particularly compounded since the YP workers are often expected to intervene with family and friends, and friends of friends, particularly in the small communities.

The educational profiles of these workers also oblige the CBHSSJB to develop a comprehensive program to provide these staff with the training and tools they need to carry out their functions. Some standardized trainings have been given to some staff such as “Charlie” and “Psychosocial Child and Family Intervention”. However, it seems that these trainings only happen periodically and are often not in synch with the staff turnover, which results in a situation where some staff have been trained and others not.

It was also reported to the *Chaashtipishtihch* that there is no consistent clinical mentoring, and the trainings have not been tailored to the specific characteristics of the YP workforce of the CBHSSJB, such as differences in language skills. This seems to lead to disparities in levels of understanding among staff which inhibits those who have been trained from being able to apply what they have learned on the job. The resulting disparities in knowledge across teams means that concepts learned in training cannot be applied with any consistency, in the view of the *Chaashtipishtihch*. Further, they believe that this is not helped by the absence of support from managers and specialists in guiding work based on the concepts from the training.

The *Chaashtipishtihch* assert that there is a need for a comprehensive, continuous training program, with some parts in *Iiyiyiuyimuwin*, followed by subsequent clinical coaching, all of which addresses the specific context of the YP and YHS workforce in the CBHSSJB. Along with this, the orientation of workers in this type of situation also needs to be comprehensive and continuous.

RECOMMENDATION #61

That the CBHSSJB Human Resources provide, in collaboration with the DYP and YHS, a comprehensive, continuous training program built upon *liiyiu liyituuwin* and including all aspects of YP work, such as intervention, confidentiality and ethics, including coaching and supervision, based on *liiyiu iitaayih timuwin* and with some parts in *iyyiyuyimuwin*.

RECOMMENDATION #62

That the DYP research and implement training models adapted to the educational levels of the relevant CBHSSJB personnel, and considering that for many of them *iyyiyuyimuwin* is their first language.

RECOMMENDATION #63

That the DYP, with Human Resource Development team of the CBHSSJB Human Resources, develop and implement an evaluation and revision framework for all relevant YP trainings.

RECOMMENDATION #64

That the Cree School Board develop a basic post-secondary Social Services program, in collaboration with the CBHSSJB.

c) Staffing

In a context of high absenteeism and turn-over, recruitment and filling regular and replacement positions is difficult. One issue with recruitment identified by the *Chaashtipishtihch* is an absence of housing in many communities, so that the pool of potential staff is more or less limited to the people who are already in the community.

The hiring policies promote hiring Eeyouch, but the educational profiles of available candidates in the region results in the challenges mentioned above in the “Staff Training” section, and in certain cases new Cree YP employees may be almost as young as the clients as the minimum age for hiring for many YP positions is 18 years old.

The *Chaashtipishtihch* understand that many YHS and YP clients have experienced trauma, and it is not known how many of the YHS and YP workers also have unresolved traumas themselves, which may affect their work.

The *Chaashtipishtihch* also note that some people apply directly to YHS and YP rather than going through CBHSSJB Human Resources, and that YP and YHS may hire even when there is no specific position, and try to match the recruits’ skills and experience to a job title that fits. It was also reported to them that it in certain cases it may take as little as two weeks to process an application including receiving it, carrying out the interview, doing the background and reference checks, and opening the file.

It seems to the *Chaashtipishtihch* that the current on-boarding process is not set up for success. At the time of the consultations, workers at YHS were often put on the floor directly with little or no orientation. In this context, the *Chaashtipishtihch* believe that there is great need for a thorough orientation, ongoing and tailored training and work on retaining staff, which implies a need for intensive support for employees with ongoing training on the job, as staff reported to them that this was not happening.

As *Iiyiyuymuwini* is the common language in the region and in view of the educational profile of certain workers, language is an issue and writing detailed reports in English poses a difficulty for many. In turn, this impacts the quality of care because the young clients may not have plans developed for their stay with YP or YHS (as mentioned elsewhere in this report). The *Chaashtipishtihch* heard that many workers were said to become overwhelmed which then leads them to quit.

With absenteeism and sick leaves so common, the *Chaashtipishtihch* note that it seemed to them that many employees at YHS during the consultations were temporary replacements without benefits and a pattern of coming and going on the job. At the same time, the instability and lack of benefits of replacement work also prevents potential workers from applying for these temporary replacement positions, in their view. The high turnover at YHS forces schedules and tasks to be constantly shuffled and this adds to the stress in the workplace.

In this situation, the *Chaashtipishtihch* were told that staff evaluations were largely not being done.

Another issue concerns the job descriptions on the postings. These are the same for YP and CMC community workers, but the work is not the same and some said this creates confusion about roles, responsibilities and expectations.

It was reported to the *Chaashtipishtihch* that within YP, Social Aids were said to end up doing the work of a YP community worker at times, but without having the background and training required.

And finally, there were complaints about the lack of clearly defined roles within YHS at the time of the consultations.

RECOMMENDATION #65

That Human Resources, in collaboration with the DYP and YHS, actively recruit and hire workers with the necessary qualifications, both on a permanent basis and on a recall list.

RECOMMENDATION #66

That the DYP and YHS actively implement the existing orientation program for all their new staff, including mentoring by more senior staff.

d) Staff Retention

Staff in both YHS and DYP mentioned to the *Chaashtipishtihch* the inconsistent presence at work of their managers. As a result, staff said they felt left on their own to deal with complex and difficult situations. Monitoring of attendance was said to be inconsistent. Along with this, there were no regular evaluations of staff in YHS at the time of the consultations and staff claimed that that managers were not following the procedures in terms of setting up a career path for them.

As mentioned earlier, there was a large turnover amongst employees in YP and YHS before and at the time of the consultations. There appears to be a lack of an overall plan for training, and there was no information available about the effectiveness

of the trainings that had been delivered. Absenteeism was also reported as a problem during training sessions.

Overall, it seems to the *Chaashtipishtihch* that the DYP and YHS have high levels of absenteeism and sick leave and a high turnover among employees, which in turn leads to great instability in the work teams. It also means that many staff are hired as temporary replacements, without any commitment to their positions by both the employer and them.

The *Chaashtipishtihch* believe that taken together, the above all contributes to high rates of staff turnover for these services.

RECOMMENDATION #67

That the working conditions allow the Director of YP to assign YP workers from one community to assist with issues in some other communities, such as the frequent staffing shortages.

RECOMMENDATION #68

That the CBHSSJB review its housing policy in order to make recommendation # 67 possible.

e) Management

At the time of the consultations in 2023-24, it seems to the *Chaashtipishtihch* there are many challenges hindering the effective delivery of services in YHS and YP.

Overall, coordinators and managers were described as lacking management skills. This is coupled with work at YHS which is said to be 80% managing absences and only 20% delivering services. In this context, workers reported a lack of support from managers, inconsistent supervision and a lack of accountability at every level.

The work culture in YP and YHS was described to the *Chaashtipishtihch* as being “chaotic”, with the perception being that some of this culture being effectively being “inherited” from previous managers. YP and YHS workers said that communication was not well organized in their services, and they had difficulty giving feedback to managers.

In this context where managers were described as not very supportive of workers, they were also not delivering ongoing training to the workers, although this was said to be expected of them.

In YHS, management training in supervision, work organization, and dealing with disciplinary measures, absences and replacements was specifically mentioned as being problematic.

The internal consultations within the DYP revealed a serious and region-wide gap between the frontline YP workers and YP management. Although efforts are being made by the YP management team to bridge this gap, at the time of the consultations, the teams reported feeling quite uninformed and isolated.

Overall, it seems to the *Chaashtipishtihch* that the DYP and YHS have high levels of absenteeism and sick leave and a high turnover among employees, which in turn leads to great instability in the work teams. It also means that many staff are hired as temporary replacements, without any commitment to their positions by both the employer and them.

The *Chaashtipishtihch* believe that taken together, the above all contributes to high rates of staff turnover for these services.

RECOMMENDATION #69

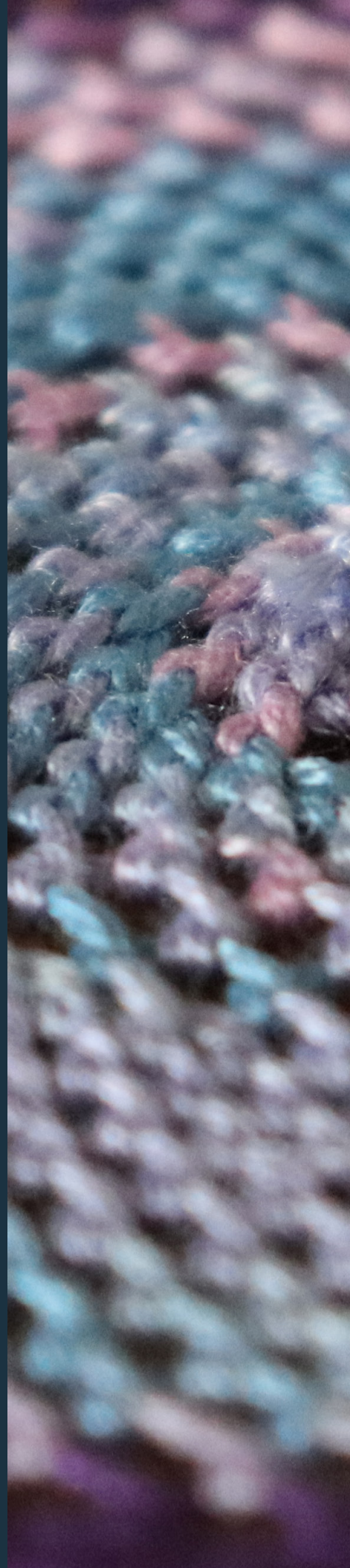
That Human Resources collaborate with the DYP and YHS to develop a comprehensive, continuous training program for managers about being effective in the workplace and with a specific focus on supervision, work organization and dealing with disciplinary measures.

RECOMMENDATION #70

That the Director of Youth Protection develop concrete strategies and mechanisms to ensure productive communication patterns within all services for which the Director has responsibility.

Appendix A

List of Recommendations



Emergency Responders

RECOMMENDATION #1

That all relevant entities prioritize dedicated resources for mental health support for emergency responders, including those of the DYP, EEPF, community first responders (ambulance), Public Safety, and Fire Departments.

Social Factors Determining the Health of a People

RECOMMENDATION #2

That the CBHSSJB Public Health Group carry out its mandate to periodically report on poverty and social inequities in Eeyou Istchee and to collaborate with the Cree Nation Government's Department of Social and Cultural Development whose mandate includes a focus on the needs and quality of life of certain vulnerable groups of the population, including youth.

RECOMMENDATION #3

That the CBHSSJB DYP inform the CBHSSJB Public Health Group on the social circumstances of families involved with its services.

Culture and Values

RECOMMENDATION #4

That the DYP coordinate with caregivers of children in placement and with different local community partners to ensure that all children and youth under the care of YP celebrate their rites of passage and special days.

RECOMMENDATION #5

That the Cree First Nations and the Cree Nation Government facilitate discussions around a coherent and unified vision of Eeyou values and that local Miyupimaatisiun Committees develop value-based community action plans to promote the well-being of children and youth.

Cree Language: An Intangible Cultural Heritage

RECOMMENDATION #6

That a Cree language plan be developed by the CBHSSJB in accordance with the Cree Nation Government law, An Act respecting the Cree Language of Eeyou Istchee, including adopting a Cree name for youth protection services and YP workers and continuing the development of the Cree YP glossary.

RECOMMENDATION #7

That CBHSSJB Human Resources provide training sessions for CBHSSJB staff to learn the Cree YP glossary so that the use of the Cree language can become commonplace in YP services.

Eeyou Parenting

RECOMMENDATION #8

That the CBHSSJB Public Health Group develop a general parenting program based on *liiyiu iitaayihimuwin* and to be delivered in *iiyiyuymuwin*; and that the Public Health Group in collaboration with other CBHSSJB departments develop a more specialized, trauma-informed parenting program for parents whose children are under the DYP.

Eeyou Charter For Children And Families

RECOMMENDATION #9

That the CBHSSJB promote and support the Cree Nation Government to develop an Eeyou Charter for children and families based on *aatiyuuhkaanh* and in *iiyiyuymuwin*, in collaboration with other Eeyou entities and that the CBHSSJB strongly recommends that the Charter be fully developed solely in *iiyiyuymuwin* in the first instance. Further, that this Charter in *liiyiyuymuwin* be ratified by all of the relevant Cree partners prior to being translated into English. The Charter should be simple, easy to understand and based on Cree teachings.

Youth Protection Act, Legislation

RECOMMENDATION #10

At this time, the *Chaashtipishtihch* do not advise negotiating or proposing to develop a new youth protection law for Eeyou Istchee as a solution to the current situation.

Instead, for now, we suggest addressing the situation by acting on the recommendations of the AUS Task Force and continuing to pursue the adaptation of the application of the YPA in order to transform current practices to be more based on *liiyiyu liyituuwin*. This will require the CBHSSJB to significantly change how the YPA is applied in Eeyou Istchee and directly involve Elders, extended family members or others (outside of the DYP and other CBHSSJB personnel).

RECOMMENDATION #11

That the CBHSSJB and the Cree Nation Government continue discussions with Quebec to ensure that the YPA and the YCJA can be applied in a way that is based on *liiyiyu liyituuwin* in Eeyou Istchee, and to ensure that the CBHSSJB has the resources required to do so.

CBHSSJB By-Law on Youth Protection

RECOMMENDATION #12

That the CBHSSJB Pimuchteheu, Miyupimaatisiun and Public Health Groups provide for a monitoring and follow up process for implementation of the CBHSSJB Youth Protection By-law, and also for any other CBHSSJB policy relating to any and all psychosocial services relating to families and children.

RECOMMENDATION #13

That the CBHSSJB adopt an implementation plan with respect to the recommendations of the AUS Task Force and a method for tracking their implementation and reporting on results to the CBHSSJB Board of Directors according to a schedule.

CBHSSJB Strategic Regional Plans

RECOMMENDATION #14

That the CBHSSJB designate senior managers to be responsible for tracking and following up on specific SRP objectives relating to their work and connected to broadly defined youth protection issues and child welfare issues.

RECOMMENDATION #15

That the CBHSSJB put in place mechanisms to report publicly on the status and results relating to these objectives on a regular basis.

Trauma

RECOMMENDATION #16

That the CBHSSJB integrate knowledge of trauma into its policies, procedures and practices.

RECOMMENDATION #17

That the CBHSSJB Public Health Group in collaboration with other departments develop trauma-informed preventive programs.

RECOMMENDATION #18

That the CBHSSJB Human Resources provide a trauma-informed training to all CBHSSJB employees, including Cultural Competency Training.

RECOMMENDATION #19

That the CBHSSJB Human Resources develop a trauma-informed Employee Assistance Program (see Recommendation #60).

RECOMMENDATION #20

That CBHSSJB managers and supervisors adopt trauma-informed supervisory practices.

RECOMMENDATION #21

That the CBHSSJB continue to invest in, nurture, support and evaluate approaches within the CBHSSJB (including tools, initiatives and programs) that are cross-cutting, collaborative, client-based and encourage open communications, such as including YP in the operations of the NISK model.

RECOMMENDATION #22

That CMCs and DYP fully and consistently implement the YP-CMC Collaboration Protocol of the CBHSSJB, including the monitoring mechanisms by management.

RECOMMENDATION #23

That all families with “suspected” issues, as observed from the initial reporting stage to the DYP (RTS), receive an offer of services from the CMC in order to connect them with relevant prevention or early intervention services.

Youth and Healing Services

RECOMMENDATION #24

That YHS and DYP fully and consistently implement the YP-YHS Joint Clinical Process, including the monitoring mechanisms by management.

RECOMMENDATION #25

That YHS provide intensive psychosocial intervention services to each of its clients, in collaboration with other CBHSSJB departments and services: nursing, addictions services, nutrition/dietician, social services, Crisis intervention mental health – Maanuuhiikuu.

RECOMMENDATION #26

That YHS integrate cultural healing in day-to-day interventions with youth and that the CBHSSJB develop and implement cultural healing programs; land-based programs; as well as the training of staff to implement these programs.

Nishiiyuu

RECOMMENDATION #27

That the Nishiiyuu Group inform the development of all areas where the CBHSSJB begins building *liiyiu iitaayihimuwin* into its services. These include areas like cultural plans for children and youth in the care of the DYP; the formal development of land-based programming; and the development of other preventive programming with families, such as an *liiyiu liyituuwin* informed parenting program.

Local Control

RECOMMENDATION #28

That Cree First Nations develop and coordinate preventive activities/programs with the support of the regional Cree entities and departments that have the required expertise.

RECOMMENDATION #29

That the local Miyupimaatisiun Committees established by Cree First Nations be encouraged to set local targets for prevention activities and programs and to oversee, coordinate and implement them. Plans for each community need to reflect its specificities and differences.

RECOMMENDATION #30

That the Cree School Board develop and implement a variety of afterschool activities to encourage school attendance and positive involvement of youth in their community.

RECOMMENDATION #31

That the local Sports and Recreation Departments develop and implement a variety of activities to encourage positive involvement of youth in their community, with the support of the Eeyou Istchee Sports and Recreation Association.

Understanding Better To Truly Work Together

RECOMMENDATION #32

That the DYP, in collaboration with the CBHSSJB Communications team, pursue the development of its communication plan to include continuous public education strategies to demystify the YP intervention and encourage community involvement in the well-being of children, with the tools being developed in Cree as well as English and French.

Eeyou Interventions With Vulnerable Families

RECOMMENDATION #33

That the CBHSSJB draw upon its in-house professionals and, in collaboration with regional and community partners, develop a comprehensive plan for a range of preventive and therapeutic services and programs, with a special focus on implementing land-based programming which would focus initially on youth and families involved with the DYP.

Interventions

RECOMMENDATION #34

That every child and youth followed under the DYP have an intervention plan which integrates a cultural plan, and that a monitoring process be implemented and reported on quarterly to the CBHSSJB Board of Directors by the Director of YP. This would also be advisable for youth followed under the YCJA.

Parental Involvement In Services

RECOMMENDATION #35

That the CBHSSJB Human Resources to provide training to DYP and YHS staff on the Motivational Approach model adapted upon principles of *liiyiu liyituuwin* in order to engage families in the healing process.

Assessments

RECOMMENDATION #36

That the CBHSSJB ensure adequate resources and active recruitment of professionals who can provide specialized assessments for DYP clients, in respect of the YP timelines, to establish appropriate protection plans.

RECOMMENDATION #37

That the Foster Care Department ensure that all of the foster families are assessed and re-assessed as per the foster care procedures.

Life Plans

RECOMMENDATION #38

That the DYP Reviewers ensure that each child followed under the YPA has a “Life Plan” which includes consideration of all options available, including YP tutorship, and other long-term plans.

RECOMMENDATION #39

That the Cree Nation Government actively support the implementation of Customary Guardianship/Customary adoption in each community, and that the DYP train the YP staff on their responsibilities related to Customary Guardianship/Customary adoption.

Foster Homes

RECOMMENDATION #40

That the Foster Care Department ensure that each foster parent receive the appropriate training and support to adequately care for their foster child/children, for example, on issues to child development, special needs, and trauma.

RECOMMENDATION #41

That the Foster Care Department set up support strategies for foster parents, e.g. a mentoring program or support groups for foster parents.

RECOMMENDATION #42

That the YP workers monitor the situation of the youth in care, by having regular contact with the child, the parents and the foster parents.

RECOMMENDATION #43

That the YP worker keep the foster parent informed of all pertinent information related to the child such as medical and trauma history.

RECOMMENDATION #44

That the rules around parental authorizations (e.g. travelling) be clearly explained to foster parents, and official documents transmitted to the foster parents, according to each child's protection plan, with a view to support the child's participation in activities as much as possible.

Young Offender Services (YCJA)

RECOMMENDATION #45

That the Young Offender Service implement all the recommendations made regarding youth protection clients with YCJA clients, such as those related to quality of services, communication and best practices.

RECOMMENDATION #46

That the DYP/YHS-EEPF Steering Group include representatives of the CBHSSJB Nishiiyuu Miyupimaatisiun Group and of the Cree Nation Government's Department of Justice and Correctional Services and expand its mandate to improve implementation of the YCJA, particularly in alignment with the cultural needs and realities of youth living in Eeyou Istchee.

RECOMMENDATION #47

That the EEPF support and encourage its officers to implement the extrajudicial measures in Eeyou Istchee, as per the YCJA.

RECOMMENDATION #48

That the Director of YP, in her role as Provincial Director under the YCJA, develop the practice of youth justice conferences under that Act, in collaboration with the Cree Nation Government's Department of Justice and Correctional Services.

Work Processes

a) RTS

RECOMMENDATION #49

That the RTS improve the process of treating YP reports (*signalements*) to reduce the response time and ensure that the people making the report are duly informed of the decision to retain or not to retain a report, and the basis upon which the decision was made.

RECOMMENDATION #50

That the RTS inform the DYP collaborators such as police and medical staff of any security concerns or medical issues that they know of, in order to promote safe co-interventions, within the bounds of the YPA.

RECOMMENDATION #51

That the DYP actively inform its partners and the general population about the mandate of YP services and the limits of their interventions and actively promote the application of the DYP-CMC Collaboration Protocol.

b) Confidentiality

RECOMMENDATION #52

That the YP workers share all pertinent information and facilitate the exchange of information between all pertinent stakeholders (professionals, foster parents, extended family) to better serve the interests of every child under the DYP, all within the boundaries of the *Youth Protection Act*.

RECOMMENDATION #53

That the DYP's communication plan include information tools for DYP collaborators, to enhance their own knowledge of the YP mandate and legal requirements.

c) Follow-Up

RECOMMENDATION #54

That the DYP and YHS develop and consistently apply a program based on *liiyiyu iitaayih timuwin* to prepare youth who are aged 16 and over and in placement, including those who will be "aging-out", and that the CMC provide transition services until the youth reach age 25.

d) Administrative Tasks

RECOMMENDATION #55

That the DYP develop a plan of action to research and develop ways to reduce the administrative load of YP workers and/or to rebalance their work to favour clinical instead of administrative tasks.

e) Protocols

RECOMMENDATION #56

That the DYP and its partners fully and consistently implement the various protocols already developed and adopted, including management monitoring mechanisms: the DYP-CMC Protocol of Collaboration; the DYP-YHS Joint Clinical Process; the CBHSSJB-CSB Joint Protocol for the Provision of Services to Youth; the Multi-sectoral Agreement between the EEPF, the CBHSSJB and other Cree entities.

RECOMMENDATION #57

That the DYP/YHS-EEPF Steering Group actively pursue its mandate to develop or revise protocols of collaboration involving the EEPF, the CBHSSJB and other Cree entities.

Human Resources

a) Debriefing and Supervision

RECOMMENDATION #58

That the DYP ensure that every team has structured, recurrent, mandatory team or group debriefings, as well as scheduled, individualized supervision sessions.

RECOMMENDATION #59

That the CBHSSJB develop dedicated and specific resources to support the mental health of frontline workers.

RECOMMENDATION #60

That the CBHSSJB tailor the Employee Assistance Program mentioned in Recommendation #19 to *liiyiu liyituwin*.

b) Staff Training

RECOMMENDATION #61

That the CBHSSJB Human Resources provide, in collaboration with the DYP and YHS, a comprehensive, continuous training program built upon *liiyiu liyituuwin* and including all aspects of YP work, such as intervention, confidentiality and ethics, including coaching and supervision, based on *liiyiu iitaayihimuwin* and with some parts in *iiyiyuyimuwin*.

RECOMMENDATION #62

That the DYP research and implement training models adapted to the educational levels of the relevant CBHSSJB personnel, and considering that for many of them *iiyiyuyimuwin* is their first language.

RECOMMENDATION #63

That the DYP, with Human Resource Development team of the CBHSSJB Human Resources, develop and implement an evaluation and revision framework for all relevant YP trainings.

RECOMMENDATION #64

That the Cree School Board develop a basic post-secondary Social Services program, in collaboration with the CBHSSJB.

c) Staffing

RECOMMENDATION #65

That Human Resources, in collaboration with the DYP and YHS, actively recruit and hire workers with the necessary qualifications, both on a permanent basis and on a recall list.

RECOMMENDATION #66

That the DYP and YHS actively implement the existing orientation program for all their new staff, including mentoring by more senior staff.

d) Staff Retention

RECOMMENDATION #67

That the working conditions allow the Director of YP to assign YP workers from one community to assist with issues in some other communities, such as the frequent staffing shortages.

RECOMMENDATION #68

That the CBHSSJB review its housing policy in order to make recommendation # 67 possible.

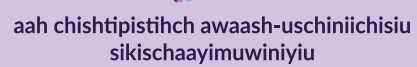
e) Management

RECOMMENDATION #69

That Human Resources collaborate with the DYP and YHS to develop a comprehensive, continuous training program for managers about being effective in the workplace and with a specific focus on supervision, work organization and dealing with disciplinary measures.

RECOMMENDATION #70

That the Director of Youth Protection develop concrete strategies and mechanisms to ensure productive communication patterns within all services for which the Director has responsibility.



Cree Youth Protection Commission