Well-Being and Resiliency

A Framework for Supporting Safe And Healthy Children And Families
Well-Being and Resiliency: A Framework for Supporting Safe And Healthy Children And Families

https://open.alberta.ca/publications/9781460141939

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Every child deserves the opportunity to thrive in a nurturing, supportive environment.

As Minister of Children’s Services, I am committed to ensuring that infants, children and youth in Alberta have the supports they need to reach their fullest potential and families have access to programs and services that help them become more resilient.

Well-Being and Resiliency: A Framework for Supporting Safe and Healthy Children and Families will guide the Ministry in enhancing and increasing prevention and early intervention services and supports for infants, children, youth and families. It builds on the Prevention and Early Intervention Framework for Children, Youth and Families and reflects the most current research, leading practices, cultural diversity and an Indigenous worldview.

In my experience as a public health nurse, I have seen first-hand how early experiences in a child’s life impact the nature and quality of their development and affect lifelong learning and long-term health outcomes. Leading research in brain science points more and more to the importance of ensuring children grow up in nurturing, responsive and stable environments, have the opportunity to develop healthy relationships and are protected from toxic stress or adverse experiences.

This framework provides the Ministry with a road-map to a consistent, province-wide approach to strengthening prevention and early intervention services that are designed to meet the individual needs of the family in a respectful, supportive way.

Making sure families are able to access programs and services that promote healthy environments and positive experiences at critical stages in a child’s development helps build protective factors in children, youth and families and creates stronger, healthier communities.

I am proud to have been a part of this work and look forward to seeing families in Alberta benefit – now and in years to come.

Danielle Larivee
Minister of Children’s Services
Acknowledgements

With gratitude, we would like to acknowledge and thank all of the individuals and organizations who have shared their knowledge, experience and feedback in the development of this resource.

We thank the Elders’ Wisdom Circle whose guidance helped us to better understand how to honour and respect an Indigenous worldview going forward. We also acknowledge the work of Dr. Ralph Bodor and Elder Dr. Leona Makokis, principle authors of the kâ-nâkatohkêhk miyo-ohpikinawâwasowin (miyo) Resource. Thank you also to Elder Leona Makokis for leading us in ceremony and sharing your wisdom; kinanaskomitin.

Thank you as well to PolicyWise for Children & Families (Naomi Parker, Kendra Leavitt and Dr. Cathi Scott) for leading the development of the companion Evaluation Framework.

And to the committed professionals who served on the content development committee – thank you for your knowledge and leadership.

An additional thank you to everyone who is committed to promoting well-being and resiliency for infants, children, youth and families across Alberta.
Vision

An Alberta where individual, family and community strengths are recognized and where all infants, children and youth are respected, valued and supported in their home communities.

Mission

Ensure that infants, children and youth are safe and resilient by working together with caregivers, families and communities to develop nurturing and supportive environments.

The Well-Being and Resiliency Framework supports Government of Alberta staff, Indigenous communities including Delegated First Nation Agency staff as well as contracted service providers who provide prevention and early intervention programming by:

• articulating the Government of Alberta’s approach to prevention and early intervention (the means to achieving well-being and resiliency for infants, children, youth and families);
• defining the well-being and resiliency model and the key elements of the prevention and early intervention continuum of services;
• identifying the desired outcomes for prevention and early intervention activities;
• supporting decision-making on funding and service delivery; and
• promoting an understanding of how trauma impacts development.
Background

The Well-Being and Resiliency Framework

The Government of Alberta oversees activities related to the promotion of healthy families and the prevention and early intervention of child maltreatment by decreasing risk factors while enhancing protective factors and building resiliency. The Well-Being and Resiliency Framework builds upon the former Prevention and Early Intervention Framework for Children, Youth and Families (2012) by capturing emerging research and leading practices and reflecting the cultural diversity of our province. The Framework also incorporates Indigenous perspectives on well-being and resiliency and offers an interconnected perspective by sharing insights about how well-being and resiliency are promoted from both western and Indigenous world-views.

Alberta’s approach to well-being and resiliency has been formed by three complementary documents: the Well-Being and Resiliency Framework, the kâ-nâkatohkêhk miyo-ohpikinawâwasowin (miyo) Resource and the Evaluation Framework. Common elements across all three documents form the foundation and direction of Alberta’s approach, including:

- Infants, children and youth are a collectively held responsibility.
- Evaluating activities requires a diverse set of tools, to be implemented in contextually appropriate ways. The goal is to assess meaning and measurement.
- Service delivery is appropriate and contextualized to the local community; uses leading practices, practice-based evidence and promising healing practices; and is informed by Indigenous ways of knowing.

These documents work together and build on one another to define and implement Alberta’s approach for service delivery staff and agency partners.

The overarching Well-Being and Resiliency Framework provides rationale for and describes the ways of working to promote well-being and resiliency in the Government of Alberta. It defines the key elements of the prevention continuum of services, identifies desired outcomes, supports decision-making regarding funding and service delivery and promotes an understanding of how trauma impacts development. The framework captures emerging research and leading practices and reflects the cultural diversity of our province. It also incorporates Indigenous perspectives on well-being and resiliency, based on the understanding that western-held prevention strategies are not an appropriate or effective approach when working with Indigenous communities.
The miyo Resource discusses foundational beliefs and approaches of Indigenous peoples to promote well-being and resiliency and outlines an evaluative process that honours an Indigenous worldview. This resource supports provincial implementation of the Well-Being and Resiliency Framework by outlining an evaluative framework that recognizes culturally-based practice and assesses program effectiveness and the achievement of outcomes in a meaningful way. The miyo Resource was developed recognizing that western-based evaluation practices are generally not effective when working with Indigenous communities. It includes a model for service delivery and outcome and performance measurement that accurately and culturally assesses the impact and value of culturally designed services provided by and for Indigenous client populations.

The Evaluation Framework describes the desired results of the Well-Being and Resiliency Framework and outlines ways to monitor progress towards and understand meaning of outcomes. It supports provincial implementation of the Well-Being and Resiliency Framework by serving as a platform for ongoing monitoring, adaptation and continuous improvement. The evaluation framework will ensure the desired outcomes identified in the Well-Being and Resiliency Framework are clearly articulated to be specific, measureable, reasonably achievable, relevant and timely. The Evaluation Framework includes indicators and measures for the defined continuum of services; processes to measure and report on outcomes and effectiveness of well-being and resilience programs provincially; and supports regular reporting on the achievement of the overarching outcome of helping children and youth be safe and reach their full potential.

Within these three resources, the term Indigenous refers to First Nations, Métis and Inuit peoples in Alberta. We recognize and honour that the Indigenous population in Alberta is distinct and diverse. These resources honour and encompass all First Nations, Inuit and Métis individuals, communities, bands, nations organizations and urban populations in Alberta.

Child Intervention in Alberta: Opportunities to Prevent and Intervene Earlier

The Government of Alberta’s Prevention and Early Intervention (PEI) programs range from child care services and early learning supports through to programs that prevent the need for child intervention services and promote healthy transitions to adulthood. Access to services that focus on child, youth and family mental well-being and programs that strengthen parenting capacity, youth skills and social connections help to prevent families from requiring more intrusive interventions later. While only a small percentage of families in the province may require intervention services, many benefit from a variety of prevention and early intervention services. This provides the opportunity to promote the well-being of infants, children, youth and families and in turn, build individual and familial resilience.

Prevention programs provide services that build protective factors to prevent difficulties.

Early Intervention programs provide supports when difficulties are first identified, to strengthen protective factors and reduce the impact of risk factors.
Many of the infants, children and youth who come to the attention of child intervention have experienced adversity, resulting in compromised development. Abuse and neglect are distressing and harmful to all children and youth, in both short and long-term. The Government of Alberta enables partnerships with families, communities and service delivery partners to support families as the primary means of protecting children. Whenever possible and as long as the child’s safety is not at risk, intervention services are provided while the child remains in the family home. When this is not possible, the child or youth may need to be removed from the home and placed in care while the parents work to improve their ability to provide care.

To provide context regarding the delivery of child intervention services in Alberta, in 2017-18, child intervention staff responded to approximately 55,000 reports of child maltreatment, neglect and/or abuse (approximately 4,600 reports each month). Of these reports, 88 per cent did not require an open child intervention file. Intervention Services found that the majority of these children did not need protection, but were in need of some preventative supports. As such, families were provided with brief services or were referred or connected to community resources including prevention and early intervention programs funded by the Government of Alberta. The remaining 12 per cent led to an open child intervention file—eight per cent were not in care (the child remained in the family home) and four per cent were in care (the child was removed from the family home).

According to data from the Alberta Incidence Study of Reported Child Abuse and Neglect 2008, the primary concerns leading to child intervention investigations include neglect (37 per cent), exposure to intimate partner violence (34 per cent), emotional maltreatment (14 per cent), physical abuse (13 per cent) and sexual abuse (2 per cent). See Appendix A for more information.

Infants under 12 months of age are especially vulnerable, primarily because of their physical fragility, dependence on others for survival, undeveloped verbal communication and social invisibility. Compared to older children and adolescents, the vulnerability of infants and young children places them at a disproportionate risk of developmental delay, serious injury or death resulting from abuse or neglect.

These statistics demonstrate that the majority of infants, children and youth who come to the attention of the child intervention system do not require intrusive intervention supports. However, their experiences may place them at risk and prevention and early intervention supports may mitigate that risk and build protective factors, resulting in improved safety, well-being and resiliency.
Well-being and resiliency: The foundation for Alberta

Alberta’s future rests with the infants, children and youth of today. Policies and programs that promote resiliency and well-being are key to ensuring the province flourishes—now and in future generations.

What is child well-being?

Well-being and resiliency are inextricably linked. Well-being is achieved when infants, children and youth are physically and emotionally safe, have secure, healthy relationships, have connection to culture and community and have opportunities to grow and develop to their full potential. Well-being encompasses physical, cognitive, social, emotional and spiritual health, as well as factors like safety and security, supportive and nurturing relationships, a sense of purpose and belonging within a family and a community.

**Figure 1: The Seven Domains of Well-Being**

<table>
<thead>
<tr>
<th>Domain</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>Safety</td>
<td>Infants, children and youth have access to necessities of life, are physically and psychologically safe from abuse and neglect, and have adults to rely on for a lifetime.</td>
</tr>
<tr>
<td>Lifelong Connections</td>
<td>Infants, children and youth have connections and relationships within a family and community. Lifelong connections include all areas of permanence; relational, physical and cultural as well as legal.</td>
</tr>
<tr>
<td>Relationships</td>
<td>Infants, children and youth have supportive, sustained interpersonal connections and relationships with caring adults, family, culture, community and peers.</td>
</tr>
<tr>
<td>Physical Well-being</td>
<td>Infants, children and youth have access to adequate nutrition, activities that reflect their interests, needs and abilities and help them meet their developmental potential.</td>
</tr>
<tr>
<td>Sense of Belonging and Purpose</td>
<td>Infants, children and youth have a sense of belonging to family, culture and community that makes them feel connected to something larger than themselves.</td>
</tr>
<tr>
<td>Cognitive Well-being</td>
<td>Infants, children and youth have access to activities that support intellectual growth, curiosity, critical thinking skills and the development of identity.</td>
</tr>
<tr>
<td>Social and Emotional Well-being</td>
<td>Infants, children and youth have supportive and nurturing relationships and opportunities to develop self-confidence, self-awareness and self-esteem.</td>
</tr>
</tbody>
</table>
What is resiliency?

Resiliency is the ability to maintain or quickly return to a state of well-being, even in the face of significant hardship, adversity or stress. Developing resiliency starts at infancy and continues through young adulthood.

Imagine a scale where a child’s good and bad experiences are stacked on either end over the course of their life. The positive experiences stacked on one side are protective factors, which include attentive caregivers, strong and supportive communities and access to good nutrition. The other side of the scale gets loaded up with negative experiences, called risk factors. These experiences can cause toxic stress and tip the scale in a negative direction. Toxic stress occurs when caring adults are not able to buffer the effects of experiences like abuse, neglect or parental substance use. For the infants, children, youth and families served by the Government of Alberta, particularly those receiving intervention services, promoting protective factors to tip the resiliency scale toward the positive is crucial.

Brain architecture

Brains are built over time and the foundations of brain architecture are built early in life. Early experiences affect the nature and quality of the brain’s developing architecture and positively or negatively affect lifelong learning, behaviour and health outcomes. Brain research shows that nurturing, responsive and stable relationships are essential for healthy brain development. These healthy interactions and experiences shape the developing brain in positive ways, while negative experiences interrupt brain development and negatively impact learning, behaviour and well-being.

Although the brain retains the capacity to adapt and change throughout life, this capacity decreases with age. Building more advanced cognitive, social and emotional skills on a weak foundation is far more difficult and less effective than getting things right from the beginning. Once established, a weak foundation can have detrimental effects on further brain development, even if a healthy environment is in place at a later age.

The effects of adverse experiences on a child’s developing brain increases the risk of long-term mental and physical health problems. To minimize these long-term health issues and protect infants, children and youth from the effects of toxic stress, we must increase the number of protective factors in their lives while decreasing risk factors. See Appendix B for more information.

For further information on how the architecture of the brain is foundational for healthy child development and success in life, please see the video How Brains Are Built (Appendix C).
Understanding the fulcrum

Most of us know of people who seem to thrive in spite of difficult childhoods or those who struggle in life even though good caregivers and strong communities loaded their scales with predominantly positive experiences.

Experiences are only part of the story; genes also play a role. A person’s genetic inheritance can be thought of like a fulcrum or the balance point, of a scale. Some people are born highly sensitive to the effects of toxic stress, while others can withstand significant amounts of stress without experiencing lasting harm to brain architecture. On the scale, the fulcrum’s position affects how much leverage positive or negative experiences have in shaping life outcomes. Research shows that people who experience adversity early in life are more likely to experience poor outcomes in learning, relationships and physical and mental health—but this isn’t true for everyone who experiences early adversity. These individuals are said to be resilient, since they have a positive outcome in the face of negative circumstances. See Appendix D for more information.

Lifelong effects of early childhood experiences

Research in neurobiology has revealed how the interaction between genetics and early experiences shape brain architecture and the critical importance of the nature of a child’s engagement with responsive caregivers, to healthy brain development.

Investing in programs and services that promote healthy environments and positive experiences at critical stages in development (infancy, the early years of childhood and adolescence) offers the greatest benefit to individuals, families and communities.

Factors that increase the risk of child maltreatment may operate at the individual, caregiver, community or societal levels. From the Alberta Incidence Study, primary caregiver and household risk factors that were most frequently observed in cases of maltreatment include family violence, few social supports, mental health issues, substance use, cognitive impairment, physical health issues, history of foster care/group care and poverty.

Trauma, including adverse childhood experiences or the experience of historic or intergenerational trauma, can result in lifelong negative impacts. Negative, stressful and traumatizing events that occur before 18 years of age are referred to as adverse

Stress in a child’s environment

has an effect on development. Positive stress (like writing an exam in school) and tolerable stress (like the loss of a pet, made more tolerable through supportive relationships) are regular and healthy parts of a child’s growth. However, toxic stress (such as extreme poverty, severe maternal depression, parental substance use) damages the developing brain. Sustained exposure to toxic stress can lead to lifelong learning, physical health and/or mental health challenges.

– Frameworks Institute, 2009
childhood experiences (ACEs). ACEs are divided into ten categories that fall under the umbrellas of abuse, neglect and household dysfunction. These experiences create toxic stress. Infants, children and youth that have a higher level of exposure to ACEs are at increased risk as an adult. They are more likely to develop physical, behavioral and social problems. We also know that great variation exists between individuals and their experiences and that not all experiences influence outcomes in the same way.

Culture and well-being

An Indigenous worldview

Despite their distinct cultures, Indigenous populations in Canada share similarities in their experiences of colonialism. For example, residential schools and the Sixties Scoop have contributed to the higher percentages of Indigenous families struggling with issues that require healing from the history of forced separation and mistreatment. Some families struggle with inter-generational harm, as evidenced by high incidences of substance use, poor health, abuse and concerns with child intervention. Further harm is caused when subsequent generations are removed from their families and placed in temporary or permanent care, perpetuating the cycle.

Many Indigenous populations have related worldviews, distinct from the western worldview that government and child intervention systems are based on. In Indigenous worldviews, the collective perspective is highly valued and a holistic view acknowledges the balance between physical, mental, emotional and spiritual elements of life. Indigenous communities have laws and values to promote respectful relationships and mechanisms to ensure healthy child development, caregiving and conflict resolution. The application of western worldviews in the lives of Indigenous families and communities over time have often resulted in dramatic negative consequences.

The Government of Alberta has committed to honour the recommendations of the Truth and Reconciliation Commission’s Calls to Action (Appendix E), as well as the United Nations Declaration on the Rights of Indigenous Peoples. That means the differences between the dominant western cultures that currently permeate Alberta’s child intervention system and Indigenous Albertans need to be both acknowledged and addressed. Traditional Indigenous approaches are often ignored or misrepresented in mainstream Canadian society. The long lasting impacts of residential schools and western child intervention policies have undervalued and disrupted the transmission of Indigenous parenting knowledge. Of the children who received intervention services in Alberta in 2017-2018, 61 per cent identified as Indigenous and 70 per cent of children in care identified as Indigenous. In comparison, approximately ten percent of the child population in Alberta identified as Indigenous in the 2011 National Household Survey.
Prevention and early intervention supports must be responsive to healing the entire family. These supports must also begin from an understanding of cultural differences including Indigenous parenting norms. Individuals must be considered within the context of their families, communities and cultures. Supportive approaches should build on strengths and address the needs of the entire family unit, rather than just focusing on the needs of the individual who is presenting with challenges.

To improve outcomes for Indigenous children and prevent interactions with the child intervention system, families must have access to culturally rooted promotion, prevention and early intervention programs and services. Such programs and services recognize and build on strengths in Indigenous families and communities, while acknowledging and addressing how historical and colonial impacts continue to have an effect on present-day family life.

The Well-Being and Resiliency Framework recognizes Indigenous worldviews, values and beliefs and the services and programs provided under this Framework need to reflect the unique experiences of Indigenous people within the context of their families and communities. Prevention and early intervention services and programs must be informed by evidence and the holistic nature of Indigenous worldviews, which consider the context of child and family well-being. This approach requires meaningful collaboration with Indigenous people, Elders and knowledge keepers throughout the entire process, using the principles of Circle Process, Relational Accountability and Ceremony.

**Figure 2:** Interconnected Domains for Developing the Child (xiii)
New Canadian perspectives

A growing number of new Canadians are settling in Alberta through immigration and refugee programs. The Government of Alberta’s support to individuals, families and communities needs to reflect the unique experiences of new Canadians, the perspectives of diverse cultural, linguistic and religious groups and be responsive to trauma that refugee families, in particular, may have experienced in or after fleeing their countries of origin.

Infants, children and youth who are immersed in their culture, language and community internalize a healthy self-concept and positive cultural identity. Those who grow up with supportive role models, mentors, teachers, natural supports and ceremonies are more likely to develop positive self-esteem and feel a connection to their community, leading to increased well-being and resiliency.

New Canadians may feel removed from their culture, language and social connections. Culturally rooted supports from programs and services, as well as connections within families and communities, can result in deep, long-term positive outcomes.

Focus on child development and well-being

Over the last decade, the Government of Alberta has become increasingly aware of the need to improve developmental outcomes for infants, children and youth who face adversity. This includes those directly involved with child intervention (e.g., in-care placements), as well as those accessing prevention and early intervention services within the community.

Prevention and early intervention is a central focus for improving infant, child and youth well-being. Several factors have informed this direction, including:

1. An elevated understanding of infant mental health, the importance of developmental screening beginning in infancy and the need to intervene early when a developmental risk is identified;
2. The science of brain development, which has illuminated the critical role of responsive, nurturing caregivers, the interplay of biology and the environment in shaping brain architecture and the windows of opportunity that exist in early childhood and again in adolescence;
3. A deeper understanding of how adverse childhood experiences can impact development and affect health and overall functioning into adulthood;
4. A growing appreciation among service providers who work with infants, children and youth who have experienced abuse and/or neglect that safety, permanence (belonging) and well-being are inextricably linked and require a shared focus;

5. The recognition that every responsive and supportive interaction between a caregiver and an infant, child or youth has the potential to positively alter their developmental trajectory and improve their health and well-being; and

6. A deeper appreciation of the impact of historical trauma on Indigenous families and communities and a renewed emphasis on integrating an Indigenous lens throughout the entirety of our work.

The well-being and resiliency model


The following well-being and resiliency model was developed to demonstrate:

1. An umbrella of support – offered through prevention and early intervention programs funded by the government that contribute to strengthening protective factors.

2. A continuum of programming – that promotes equity for Albertans.

3. A strong foundation of services – critical to supporting effective program delivery.

Figure 3: The Well-Being & Resiliency Model
An umbrella of support

This model identifies a three-layered umbrella of support that promotes well-being and resiliency and integrates the Factors Framework that was developed by the Center for the Study of Social Policy (CSSP)xv. Protective factors are conditions that increase the health and well-being of infants, children, youth and families and protect against or mitigate the impacts of abuse and neglect. They help parents and caregivers find resources and supports to develop strategies to address their own traumas or early childhood maltreatment, which allow them to parent effectively, even under stress. When protective factors are well established in a family, the likelihood of child maltreatment and neglect diminishes.

Child development and well-being support

Child development and well-being support promotes a child’s social, physical, emotional, cognitive and spiritual well-being in order to assist the child to reach their developmental potential.

Child development services are provided to actively engage infants, children and youth through a broad range of activities that strengthen, build or support the mastery of skills in all developmental domains.

Child development services focus on increasing the social and emotional development of children, which is one of the protective factors described by the CSSP. Interventions that focus on the social-emotional development of children help to mitigate the effects of negative experiences in ways that lead to improved cognitive and social-emotional outcomes. Children who present with challenging behaviours are at greater risk for maltreatment. When children have the ability to interact positively with others and communicate their emotions effectively, this has a positive impact on the interaction between a child and their caregiver.

Caregiver capacity building support

Caregiver capacity building support promotes the development and strengthening of caregivers’ parenting skills and knowledge. This enables caregivers to create safe, responsive and nurturing environments and supports healthy child development.

Caregiver education services are intended to provide caregivers with knowledge about parenting and child development. Services provide accurate information about raising infants, children and youth. Caregiver education services focus on building parents’ and caregivers’ knowledge to enhance their understanding related to:
• parent/child attachment and the importance of responsive caregiving;
• child development and developmental milestones, including age-appropriate expectations;
• how adversity and toxic stress impact children’s development; and
• how caregiving behaviours may be impacted by ACEs.

**Family support services** are intended to build parental/caregiver resiliency. They focus on the family unit and are intended to promote familial wellness. Services include various programs and activities that are designed to build on strengths and address the needs of the family. Family support services enhance the family’s capacity to support the growth and development of all members of the family.

Family support services focus on:

• supporting families to meet their basic needs;
• supporting the development of healthy relationships by increasing communication within the caregiving/parenting relationships;
• increasing caregiver health and well-being by supporting caregivers to manage stressors, cope with challenges and adversity and develop planning, decision-making and problem-solving skills.

**Caregiver education and family support services** are intended to increase both *knowledge of parenting and child development and parental resilience*. When parents and caregivers are emotionally resilient, they are able to maintain a positive attitude, creatively solve problems and successfully overcome challenges in their lives. Caregivers who understand child development and positively guide their children’s behaviour are more likely to nurture their children’s healthy development. Accurate information about raising children supports caregivers to have developmentally appropriate expectations and knowledge of positive guidance techniques. Home visitation is an example of caregiver education and family support programming. Home visitation programs provide in-home parenting education and family support services to expectant parents and those with children newborn to six years of age. Home visitation programs often serve families who face challenges that may place their children at risk and keep them from developing their full potential.

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**Home Visitation Program**

Home Visitation is an early intervention strategy designed to foster healthy child development based on the goals and needs of the family and within the context of the family home.
Social connections and supports

Social connections and supports promote positive connections between infants, children, youth, parents, families, caregivers and communities. Programs develop natural supports that create responsive and nurturing environments.

Information, referral and coordination services are provided to assist individuals and families to build connections and relationships that contribute to the well-being of infants, children, youth and families. When individuals and families require additional services or supports, referrals facilitate these connections to programs. Programs provided by the Government of Alberta are one piece of the larger network of services available for infants, children, youth and families.

Coordination of these services is critical in order to strengthen and widen the network of supports that are available. Individuals and families are supported to connect with religious or faith-based communities, culture, Elders, family, friends and neighbours.

Social connections and supports are strengthened when individuals and families have access to support in times of need and in times of celebration. Friends, family members, neighbours and others who offer and provide emotional support and assistance to parents help build social connections that can reduce isolation (a consistent risk factor in child abuse and neglect). When caregivers are able to identify and access resources in the community during times of need, this may help prevent the stress that sometimes precipitates child maltreatment. This may also help to prevent the unintended neglect that may occur when families lack necessary resources such as food, clothing and housing or essential services such as health care, substance use support services and mental health services.

Parent Link Centres

are a provincial network of community-based family resource centres. Programs are available to all parents/caregivers and their children up to six years of age and include:

- Triple P Positive Parenting Program
- family support services
- developmental screening
- information and referral to other resources and services
The figure below demonstrates how each of the protective factors are connected to prevention and early intervention services and the umbrella of support:

Figure 4: Umbrella of Support, Protective Factors & Services

<table>
<thead>
<tr>
<th>Umbrella of Support</th>
<th>Social Connections and Support</th>
<th>Healthy Social and Emotional Development of Children</th>
<th>Caregiver Capacity Building</th>
</tr>
</thead>
<tbody>
<tr>
<td>Protective Factor</td>
<td>Ability to Access Support in Times of Need</td>
<td>Child Development and Well-Being</td>
<td>Parental Resilience</td>
</tr>
<tr>
<td></td>
<td>Social and Cultural Connections</td>
<td></td>
<td>Knowledge of Parenting and Child Development</td>
</tr>
<tr>
<td>Service</td>
<td>Information, Referral and Coordination Services</td>
<td>Child Development Services</td>
<td>Family Support Services</td>
</tr>
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<td></td>
<td></td>
<td></td>
<td>Caregiver Education Services</td>
</tr>
</tbody>
</table>

A continuum of programming

The prevention and early intervention continuum is intended to support stronger outcomes by providing Albertans with equitable access to universal, targeted and intensive programs. Using the concept of proportionate universality, the Government of Alberta is able to develop programming that is responsive to the needs of all Albertans. It is recognized that universal programs are designed to reach large portions of the population. Universal programs provide most Albertans with the support needed for infants, children and youth to achieve well-being and resiliency. Universal programs are developed to be inclusive; however, they are inaccessible or not able to meet the needs of some individuals and families who may be experiencing obstacles, challenges or increased risk factors. Universal programs are intended to build protective factors and prevent the development of risk factors and vulnerabilities.

Some Albertans benefit from programs that are targeted to address barriers or the diversity of needs related to risk factors. Targeted programs are provided at a higher intensity compared to universal programs. Targeted programs strengthen protective factors, reduce the impact of risk factors and the need for more intrusive and intensive interventions later on.

An even smaller percentage of Albertans are not able to access targeted programs as they experience significant obstacles or challenges that are unique to them as an individual or as a family. All individuals and families have strengths; however, risk for child maltreatment increases...
as the well-being and resiliency of individuals and families are negatively impacted. At times, these individuals or families may require more intensive supports.

Risk factors are any attribute, characteristic or exposure that increases an individual's likelihood of developing disease or injury—including emotional harm. Risk factors for child maltreatment include:

- Toxic Stress or ACEs
- Trauma (Historical, Intergenerational and Complex)
- Mental Illness and Substance Use
- Disability
- Poverty
- Family Violence
- Social Isolation

Resilience is defined as the process of managing stress and functioning well in a particular context when faced with adversity. The outcome of resilience is positive change and growth.

Programs for this population of Albertans need to focus on the individual, the family and their support network. Significant time is needed to engage and develop relationships, including collaborating with natural supports and service providers. Due to the need for increased contact frequency, universal and targeted programs are not always flexible enough to provide appropriate support. Intensive programs are specific to the needs of infants, children, youth and families who are experiencing significant adversity. Programs are intended to address the complexity that results from being impacted by multiple risk factors. The intent is to reduce long-term consequences of adversity and to prevent recurrence. Intensive programs, delivered by qualified staff that have the education, skills and competencies required to work with individuals and families experiencing complex circumstances, are better options for this population.

The Government of Alberta supports a continuum of programs that recognizes each family and community as unique and the delivery of programs needs to be responsive to each situation. For Indigenous families and communities, ceremonies, protocol, language, Elder teachings and Circle Processes are embedded throughout this continuum below:

**Figure 5: Prevention and Early Intervention Continuum**

Universal programs are available to all infants, children, youth and families. Programs are intended to build protective factors and prevent the development of risk factors and vulnerabilities.
Targeted programs are designed to meet the needs of vulnerable infants, children, youth and families who have risk factors associated with increased risk of child maltreatment. Programs strengthen protective factors and reduce the impact of risk factors and the need for more intrusive and intensive interventions later on.

Intensive programs are specific to the needs of infants, children, youth and families who are experiencing significant adversity. Programs are intended to address the complexity that results from being impacted by multiple risk factors. The intent is to reduce long-term consequences of adversity and to prevent recurrence.

A strong foundation

The foundational elements illustrated at the bottom of the Well-Being and Resiliency Model (page 17) describe how services are provided to Albertans.

Principle-based practice

Principle-based practice is an approach to practice that aligns an organization’s attitudes, behaviours, beliefs and activities to a set of principles defined by a group of people or a guiding document. Principle-based practice informs how we engage with infants, children, youth and families by enhancing consistency across policy organizations, programs and practitioners.

Effective prevention and early intervention programs will embed the Child Intervention Practice Framework principles. Agencies providing prevention and early intervention services will be guided by the following principles:

Indigenous experience

Indigenous peoples have always had their own ways of ensuring that vulnerable members, including children, are safe, protected and nurtured. We honour this by recognizing their expertise in matters concerning their children, youth and families.

Preserve family

We believe children and youth should be safe, healthy and live with their families; therefore, we focus on preserving and reuniting families and building on the capacity of extended family and communities to support children, youth and families.
Strength-based
Our approach is reflective, culturally responsive and strength-based. Because all families have strengths and resources, we recognize and support the right and responsibility of parents to share in the decision-making process for them and their children.

Connection
Children and youth are supported to maintain relationships that are important to them, to be connected to their own culture, to practice their religious or spiritual beliefs and, for those with involvement, to have a plan for their care where they are included in the decision making process.

Collaboration
We are child-focused and family-centred. We collaborate with families, community agencies and other stakeholders in building positive, respectful partnerships across integrated multidisciplinary teams and provide individualized, flexible and timely services to support these efforts.

Continuous improvement
Our casework is transparent and we share information appropriately. Our approach is outcome-oriented and evidence-based; therefore, we support innovative practice, evaluate our performance and strive for continuous improvement.

Organizational capacity
Organizational capacity is multi-faceted, continually evolving and encompasses the wide range of capabilities, knowledge, support and resources needed for an organization to be effective. The Government of Alberta works collaboratively with the agencies it funds to support the capacity of our continuum of services.

Knowledgeable and effective workforce
The strength and efficacy of any service lies in the capacity of its people to provide effective supports to families. The basis of the service delivery model is the knowledge and skills that exist within the service delivery network to ensure that services incorporate the required knowledge, skills, abilities and resources. These include the concepts identified in the Foundations for Caregiver Support as well as other fundamental skills to support positive outcomes for families.
Promising practices

Evaluating the evidence base

To date, much of the research around the prevention of maltreatment is strongly grounded in western science. Using western science to inform practice is referred to as evidence-based practice, which is defined as “a structured and systematic approach to using research-based knowledge of effectiveness to inform practice.” Evidence-based practice research, by itself, often excludes vital contextual factors such as language, ceremony and Indigenous teachings.

To complement evidence-based practice, Naquin (as cited in Bodor et al, 2018) suggests a model of practice-based evidence that includes three levels based on Indigenous methods and practices of wisdom-seeking:

- Level I focuses on client-based evidence (e.g., satisfaction surveys, comment cards, interviews).
- Level II relies on practice-based evidence (e.g., Indigenous expert opinion, articles, awards, Elder interviews, ceremonies).
- Level III includes research-driven evidence (e.g., journal articles, review panels, participatory research).

Theory of change

Harvard University’s Center on the Developing Child has developed a Frontiers of Innovation (FOI) network, where researchers, practitioners and community members co-create and evaluate new ideas in a diversity of project settings.

This Framework is guided by the theory that we must build the capabilities of adults in order to achieve significant outcomes for the children in their care. These same capabilities also enhance adults’ employability and increase the economic and social stability of the family, further reducing sources of family stress. Expanding adult capabilities also improves their capacities as caregivers, enabling them to help young children build effective coping skills to overcome adversity and strengthen the foundations of lifelong resilience. Building on this evolving theory of change, we view the communities in which families raise children as important contexts for designing and testing new strategies for enhancing protective factors and reducing identified sources of toxic stress that impose enormous burdens on parents of young children.
A way forward

By working with prevention and early intervention programs at regional and community levels, government is focusing on continuous improvement and building the capacity of community resources to support families.

This approach is essential to ensure coordinated services that respond to the needs of Albertans, today and into the future. Flexibility in developing programs that meet the changing needs of families—while maintaining within the context of the communities in which they live, work and play—is essential to success.

The Government’s action plan calls for immediate action to support the health and well-being of children, youth and families, as well as support for prevention and early intervention services through the joint development of parenting, social connectedness and culturally based programs and services and self-determined, Indigenous-led programs and services. The action plan set a clear roadmap for preventing child maltreatment and contributing to the health and well-being of infants, children, youth, families and communities in Alberta.

Community capacity

The Government of Alberta recognizes and values the important work and expertise of community partners and contracted agencies. We look forward to our continued work towards the collective goal of a reduction in child maltreatment and a renewed focus on well-being and resiliency.

To this end, it is important to consider the following principles of community engagement:

- Value local knowledge, culture, resources, skills, processes and people.
- Assist communities with coordinated, collaborative responses to reduce child maltreatment and increase child well-being.
The Government of Alberta will work collaboratively with a network of contracted service providers and other stakeholders to continuously improve the capacity of services related to:

**Trauma:** occurs as the result of an intense event or series of events that threatens the safety and security of an infant, child or youth. Trauma may also result from pre-natal stress, for example, prenatal exposure to alcohol or a brain injury or can be passed down through generations (historical and intergenerational trauma). Service providers who are informed about the effects of trauma on children’s development are better equipped to meet their needs and support them to address the root causes of behavioural issues and child maltreatment. Additionally, service providers must recognize that the parents or caregivers of children may have been impacted by trauma as well and need to be supported with trauma informed practice.

**Loss and Grief:** refers to the processing of an event that is perceived to be negative and the response to that event. Service providers’ ability to support infants, children, youth, caregivers, families and other natural supports who have experienced loss is an essential component of a knowledgeable and effective workforce.

**Knowledge of Child Development:** refers to the need to respond to children in a developmentally appropriate manner and is critical to well-being. It is important to consider that norms for child development may vary across cultures and generations. Child development refers to an understanding of the processes through which children typically grow and mature from infancy through to adulthood. The different aspects of growth and development that are measured include physical, cognitive, social-emotional and spiritual growth.

**Family Violence:** child abuse and neglect, child sexual abuse, intimate partner abuse, sexual assault and witnessing the abuse of others in the family are all forms of family violence. Exposure to intimate partner violence is the most prevalent form of child maltreatment in Canada\(^{xxi}\) and is the most common cause of children needing protection. All service providers require an understanding of the dynamics of family violence and how to support families to address issues of violence that are affecting them.

**Inclusive Practice:** refers to the principle that a service must be responsive to the needs of all users and that diversity will be acknowledged and respected. Inclusive practice means the service will not discriminate against people or treat them unfairly on the basis of these differences and that negative stereotypes will be challenged. The term *diversity*, when used to describe people or communities, indicates that a group of people is made up of individuals who are different from each other in some way.

Diversity may relate to differences in culture and/or language, gender, sexual orientation, abilities, appearance, social and economic circumstances or values and beliefs\(^{xxi}\).

**Cultural Competence:**

Knowledge, skills, behaviours and attitudes that enable service providers to work effectively in cross-cultural situations and meet the needs of culturally diverse clients.
Service providers must respect and have the knowledge to respond appropriately to a diverse population.

**Indigenous Healing Practices:** First Nations, Métis and Inuit people value the health, happiness and well-being of children, families and communities, believe in preserving cultural identity and have aspirations for opportunities of success. Historical and colonial impacts on Indigenous peoples are felt strongly today as exemplified in the over representation in many systems, including Child Intervention. Service providers need to ensure awareness of the impacts of this history on individuals and families to support access by Indigenous families.

**Continuous improvement**

The Government of Alberta is committed to assuring and improving the quality of services provided to infants, children, youth and families.

Developing a common understanding and commitment to the desired outcomes for infants, children, youth and families under the umbrella of the Well-Being and Resiliency Framework is the first step towards a consistent provincial approach to the delivery of prevention and early intervention supports.

**Program Outcomes at the Individual and Family Level**

1. Infants, children, youth and families are more socially connected and linked to culturally relevant supports.
2. Parents and caregivers have knowledge about parenting and child development.
3. Parents and caregivers are resilient.
4. Infants, children and youth experience healthy social and emotional development.

**System Outcomes at the Process and Governance Level**

1. Services are consistently available, effective, aligned and accountable.
2. Programs are delivered by competent and knowledgeable staff.
3. Programs are culturally safe and offer inclusive programming.

Procurement activities for funded prevention and early intervention programs and services will demonstrate alignment to the broad outcomes identified in the Well-Being and Resiliency Framework and will be required to report on the achievement of outcomes. Specific indicators for each of the core services will be linked to protective factors and will be developed with the service delivery agencies.

Please search the Well-Being and Resiliency Evaluation Framework at [alberta.ca](http://alberta.ca) for more information.
Learning our way forward

In order to achieve increased well-being and resiliency for those most vulnerable, prevention and early intervention work will need to:

- Be aligned with current and future ministry policies and practices;
- Apply an Indigenous and newcomer lens;
- Reference the Well-Being and Resiliency Framework within contracts and grants;
- Utilize the Evaluation Framework and/or the miyo Resource for the evaluation of ministry and/or contracted prevention and early intervention (PEI) programs;
- Monitor progress, discuss promising practices and identify gaps via a provincial committee with representation from all service delivery regions to ensure equity in implementation.

Recent initiatives and developments in Child Intervention practice have led to an increased understanding of effective practice in prevention and early intervention. Of these, the Child Intervention Practice Framework, the Foundations of Caregiver Support initiative and recent research on brain development in early childhood are foundational to the Well-Being and Resiliency Framework. This Framework aligns with other guiding and promising practice initiatives within government, such as the Indigenous Cultural Understanding Framework. (See Appendix I for more information.)

The Framework is a living document and will evolve over time. It will incorporate leading practices, ongoing trends and drivers of change within the government, stakeholders and agency partners. Readers are encouraged to visit alberta.ca (Search Well-Being and Resiliency Framework) for the most up to date copy.
Glossary

**Caregiver**: Individuals/service providers, including but not limited to parents, grandparents, aunts and uncles, foster and kinship caregivers and child care workers who help an infant, child or youth achieve safety and permanency and who support healthy development and well-being.

**Ceremony**: Ceremony refers to a diverse array of spiritual practices in Indigenous cultures. These practices can be used for healing, empowerment as well as bringing people and communities together. Ceremony may involve a specific set of rules or protocols that must be adhered to. Ceremony can include daily practices such as smudging or prayer, as well as community events such as sun dances or feasts. Indigenous communities throughout Alberta have their own distinct ceremonies and cultural practices and each one may define or practice ceremony differently.

**Child Care**: This refers to temporary care and supervision of a child by an individual other than the child's parent or guardian, but does not include residential care. Quality child care promotes the healthy social and emotional development of infants and children and also supports their parents and caregivers. Quality child care supports protective factors for vulnerable children and families.

**Child Intervention**: Child Intervention services are provided under the *Child, Youth and Family Enhancement Act* when there are concerns about the safety or well-being of an infant, child or youth. Child Intervention is also commonly referred to as ‘child welfare’ or ‘child protective services’.

**Circle Process**: Participants are invited to a Circle to share their stories around a guided topic after an opening prayer by an Elder or an oskapewis (Elder’s helper). The Circle is based in the teachings and laws that guide the process and ceremony of the Circle. The Circle Process will continue until it is felt that all have had their chance to share and when a common understanding and awareness is felt.

**Community Resources**: Organizations that serve a particular geographical area or group of people by providing tools and services to help that community grow in positive ways and improve the quality of life for the people of that community.

**Complex Trauma**: Complex trauma is often interpersonal in nature (relationship based), severe and pervasive and has a long-term effect. Since the events often occur within the caregiving relationship, it interferes with the child’s ability to form secure attachments as children rely on their caregiver relationship as a primary source of safety and stability.

**Home Visitation Program**: Home Visitation programs provide in-home parenting education and family support services to expectant parents and those with children newborn to age six. Home Visitation is an early intervention strategy designed to foster healthy child development based on the goals and needs of the family and within the context of the family home. Home visitors provide families with information on child development, child care and other aspects of
positive family functioning and provide support to help improve and enhance parenting skills and provide a safe, nurturing environment for children. Home visitors also link families to a network of community services and resources they can use to provide their children with a good start in life. Home visitation programs often serve families who face challenges that may place their children at risk and keep them from developing to their full potential.

**Historic Trauma:** A collective phenomena in which trauma is shared by members of an identifiable group who have experienced cumulative trauma over generations. This incorporates psychological and social aspects of historical oppression.

**In Care:** When children can no longer remain safely in their home they are brought into the care and custody of the statutory director under the *Child, Youth And Family Enhancement Act*, temporarily or permanently. Whenever possible, children are placed in family-based care settings, kinship care or foster care. Kinship care is a placement with extended family or community members. Foster caregivers are trained, licensed caregivers. Other in-care placement options include group care, residential treatment facilities (therapeutic campus-based care), supported independent living and individualized service placements (personalized community care). The goal for all children in care is to be reunited with their family of origin. When this is not possible, permanency options such as private guardianship or adoption are considered.

**Intergenerational Trauma:** A collective complex trauma inflicted on a group of people who share a specific group identity or affiliation – ethnicity, nationality and religious affiliation. It is the legacy of numerous traumatic events a community experiences over generations and encompasses the psychological and social responses to such events.

**Parent Link Centre:** A network of community-based family resource centres that provide comprehensive services and supports offering early childhood development programs, developmental screening, parent education including the Triple P Positive Parenting Program, family support services and information and referral services.

**Protective Factors:** Factors that prevent or mitigate the effects of exposure to risk factors and stressful life events.

**Relational Accountability:** When we create, form and commit to relationships, these relationships define who we are. In our work, we must be accountable to all of our relationships including our relationship to the Creator, the land and all living things. Relational accountability also speaks to the relationship of our ancestors and to the ones that come after us. Finally, it also pertains to the relationship between our friends, families and communities and to the relationship we have with ourselves.

**Risk Factor:** Any attribute, characteristic or exposure of an individual that increases the likelihood of developing a disease or injury – including emotional harm.

**Sixties Scoop:** The Sixties Scoop refers to a period of time in Canada when an unknown number of Indigenous children were taken from their parents, families and communities by
child intervention services and placed with mostly non-Indigenous families, sometimes as far away as overseas. As a result, many lost touch with their families, communities, culture and traditional language, which caused lasting and negative issues with mental, spiritual, emotional and physical health and well-being. Survivors, their families and communities are still feeling the effects of the Sixties Scoop today.

**Toxic Stress:** Occurs when a child experiences strong, frequent and/or prolonged adversity – such as physical or emotional abuse, chronic neglect, caregiver substance abuse or mental illness, exposure to violence and/or the accumulated burdens of family economic hardship, separation and divorce – without adequate adult support.

**Triple P Positive Parenting:** A program that assists parents and caregivers with parenting strategies and tools to encourage positive behaviors. [www.triplep-parenting.ca/alb-en/about-triple-p/positive-parenting-program](http://www.triplep-parenting.ca/alb-en/about-triple-p/positive-parenting-program)

**Trauma:** A deeply distressing or disturbing experience.
Appendices

Appendix A

Alberta Incidence Study of Reported Child Abuse and Neglect (AIS-2008)

The primary objective of the AIS-2008 is to provide reliable estimates of the scope and characteristics of child abuse and neglect investigated by Child Intervention services in Alberta in 2008. Specifically, the AIS-2008 is designed to: 1. determine rates of investigated and substantiated physical abuse, sexual abuse, neglect, emotional maltreatment and exposure to intimate partner violence as well as multiple forms of maltreatment; 2. investigate the severity of maltreatment as measured by forms of maltreatment, duration and physical and emotional harm; 3. examine selected determinants of health that may be associated with maltreatment; 4. monitor short-term investigation outcomes, including substantiation rates, out-of-home placement, use of child intervention court; and 5. compare selected rates and characteristics of investigations across the 2003 and 2008 cycles of the AIS. http://cwrp.ca/sites/default/files/publications/en/AB_AIS-2008_MacLaurin_etal_2013.pdf

Appendix B

Adverse Childhood Experiences

Childhood experiences, both positive and negative, have a tremendous impact on lifelong health and opportunity. The Centre for Disease Control and Prevention describes how ACEs have been linked to a wide range of health and social consequences including the development of high risk health behaviors, chronic health conditions and early death. This trajectory is often referred to as the ACE Pyramid. https://www.cdc.gov/violenceprevention/acestudy/index.html
Appendix C

Alberta Wellness Family Initiative, AWFI

The Alberta Family Wellness Initiative (AFWI) officially began in 2007. The initiative’s goal is to improve outcomes in health and wellbeing for children and families across Alberta.

The mandate and agenda is to bridge the considerable gap between the latest scientific knowledge about brain development, mental health and substance use and what is done in policy and practice. http://www.albertafamilywellness.org


Appendix D

Fulcrum

The point against which a lever is placed/a thing that plays a central or essential role in an activity, event or situation. Experiences alone are only half of the story; genes also play a role. A person’s genetic inheritance is like the starting position of the fulcrum or the balance point, of the scale: some of us are born highly sensitive to the effects of toxic stress, while others can withstand significant amounts of stress without experiencing lasting harm to brain architecture. On the scale, we see that the position of the fulcrum affects how much leverage positive or negative experiences have in shaping our life outcomes. http://www.albertafamilywellness.org/what-we-know/resilience-scale

Appendix E

Truth and Reconciliation Commission of Canada; Calls to Action

The TRC is a component of the Indian Residential Schools Settlement Agreement. Its mandate is to inform all Canadians about what happened in Indian Residential Schools (IRS). The Commission documented the truth of survivors, families, communities and anyone personally affected by the IRS experience. This includes First Nations, Inuit and Métis former Indian Residential School students, their families, communities, the Churches, former school employees, Government and other Canadians. http://www.trc.ca/websites/trcinstitution/File/2015/Findings/Calls_to_Action_English2.pdf

Appendix F

Child Intervention Practice Framework

A practice framework is a set of agreed upon principles and core elements of leading practice that are intended to be infused throughout the child intervention system – including hiring, training and supporting Child Intervention workers. Regardless of which tools or approaches
are used in working with children and families, the basic principles that guide good work should be the same for all Child Intervention workers. A practice framework has been developed that will guide and help staff connect philosophy, legislation and best practice with their day-to-day interactions and support of children, youth and families. For more information, please see childrensservices.alberta.ca (and search for Child Intervention Practice Framework).

Appendix G

Foundations of Caregiver Support
The purpose of caregiver supports is to provide a base from which to develop caregiver’s capacity to improve positive outcomes for infants, children and youth. It also recognizes and builds on the abilities and strengths, including cultural and family strengths of infants, children and youth. The Foundations of Caregiver Support provides the principles, guidelines and practices to enable caregivers support the safety and well-being of infants, children and youth served by the Government of Alberta.

For more information, please see childrensservices.alberta.ca (and search for Foundations of Caregiver Support).

Appendix H

A Stronger, Safer Tomorrow
The all-party Ministerial Panel on Child Intervention was established to explore ways to improve Alberta’s child death review system and strengthen the intervention system. A Stronger, Safer Tomorrow Action Plan was released in 2018 in response to the report of final recommendations from the panel to the Minister of Children’s Services. The actions are in response to 26 recommendations grouped around the following eight principles: co-creating a positive future; reconciliation; supporting families and communities; sustaining cultural connections; utilizing the strengths of family systems and kinship care; supporting a strong, stable workforce; combating discriminatory mindsets and enabling change. https://www.alberta.ca/child-intervention-panel.aspx & https://open.alberta.ca/publications/ministerial-panel-on-child-intervention-final-recommendations & https://open.alberta.ca/publications/9781460140635

Appendix I

Indigenous Cultural Understanding Framework
The intent of the Indigenous Cultural Understanding Framework is to establish a vision and a plan that will set the future direction for a coordinated and consistent application of a Learning and Development Pathway that will lead to Indigenous cultural awareness, sensitivity and understanding for all employees of the Ministry of Children’s Services. https://open.alberta.ca/publications/9781460140598
References


