Recommendations by Dr. Cindy Blackstock

Please note that these accompany Dr. Blackstock’s testimony on June 13, 2018. This document simply is created to provide written points to accompany her evidence and her recommendations are not limited to those enumerated below. Recommendations include but are not limited to:

1) Focus on improving healthy families and communities instead of reducing children in care. There are lots of ways to reduce the number of children in care that do little to improve the safety and wellbeing of the child or their families. By focusing on ensuring healthy families we ensure authentic reductions in children in care that are sustainable long run. A couple of key things in this regard:

2) Community based plans are essential to addressing the structural inequalities and multi-generational impacts of colonization. An essential step is developing holistic visions of what healthy children and families look like in that distinct culture and working towards it using things like the "Touchstones of Hope" model.

3) inequities in services must end

4) a substantive equity lens must be applied to all services to Indigenous children

5) Culturally based interventions should target the leading reasons why First Nations kids come into care (poverty, poor housing, parental addictions/mental health and domestic violence).

6) There needs to be coordination between the prevention services and the actual needs of families who are at greatest risk.

7) Services for children in care to promote their success and wellbeing need to be augmented. This means enhanced cultural supports, opportunities to meet with extended family and family members, language preservation and basics like post-majority care and long term services for children with special needs who often fall into a chasm when supports are cut when they are no longer children).

8) Research Goals: I recommend two major research goals:

1) a baseline study to determine the ACE (adverse childhood experience) scores of First Nations, Metis and Inuit children and then measure these scores on a longitudinal basis as equity is achieved and

2) a longitudinal study on children in care versus children who remain in their homes.