



## **Briefing Paper: Learning from Current Federal, Provincial and Territorial Research-Informed Initiatives**

Child welfare policy, practice, and research in higher education must be in constant collaboration to ensure that the services and supports people receive are effective; provided by well-supported and well-trained professionals who feel competent in their role; and, in constant evolution in response to the continuous development of the global knowledge-base. While human service delivery in Canada must be responsive to changes in governments that reflect the will of the people, our priority must always remain sustaining the most effective services possible.

New and innovative initiatives in child welfare should also be anchored in trauma-informed approaches to reduce the risk of harm to families. This means shifting from punitive and paternalistic “the system knows best” approaches to focusing on understanding the complex potential impacts of adverse experiences; and, addressing child, youth and family difficulties from a strengths-based and resilience-building approach. Reforms are needed in child protection removal and placement processes, which often involve the police and cause further trauma for young people who come into care. Research also needs to be conducted through a trauma-informed lens, as paternalistic and exploitive research approaches can cause and perpetuate harm among participants. Participatory approaches that value and empower children, youth and their families, and provide opportunities for them to speak about and heal from the often-traumatic experiences inherent in child welfare involvement must be prioritized in

"Trauma in a person, decontextualized over time, looks like personality.

Trauma in a family, decontextualized over time, looks like family traits.

Trauma in a people, decontextualized over time, looks like culture."

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research settings. In academic settings, research ethics review processes must continue to ensure the protection of marginalized populations, especially when they are at risk of traumatization. Without a firm grounding in the complex and enduring potential impacts people involved in child welfare face, policy, practice, and research efforts risk contributing to their re-traumatization.

The three initiatives featured in this paper are also featured in the webinar panel on this topic as part of the *Beyond Neglect* series. They are highly committed to this evidence-based and trauma-informed approach: that is, ensuring child welfare supports and services are provided in the most effective and holistic way.

### **The Attachment, Regulation, Competency (ARC) program**

The Attachment, Regulation, Competency (ARC) program, initially developed in the US as a system-based intervention<sup>i</sup>, was tailored to Quebec child protection social work realities by Delphine Collin-Vézina, a McGill University-based child welfare trauma and resilience expert, the Social Responses to Complex Trauma Research Group, and Boscoville. ARC teaches front line workers to use a strengths-based approach in their interventions with young people placed in child protection and recognizes trauma as often being the root cause of behavioural and emotional issues of youth in care<sup>ii</sup>. The program encourages traumatic healing and growth by addressing key underlying issues all while fostering attachment, emotional regulation skills and building on a young person's competencies. An ARC-informed program is currently being delivered and evaluated in 16 CISSS and CIUSSS in Quebec and, in collaboration with the founders of the approach, in New Brunswick health and social services.

### **Until The Last Child (UTLC)**

The mainstream child protection system is underpinned by the idea that separation of families through the removal of children equals safety. Today it has become clear that the system has not and does not well serve our collective goals for the well-being of children and their families.

Until The Last Child (UTLC) believes that the safety of children will be found in inclusion rather than separation. A shift to this new way of understanding will create an opening for fundamental change in the way we protect children and support families. "Belonging" - rather than apprehension - becomes a term used to keep children safe, surrounded by love, care and support. *Belonging* becomes the foundation of all our efforts for and with children - belonging to a "family" however constituted, belonging to a community, and understanding one's story, culture, language and history. Belonging becomes the lead-in to practical resources and it becomes the foundation for giving children, youth and their families a voice and human agency.

UTLC believes we can only achieve this fundamental change through an interdisciplinary approach. This approach includes of course the rich knowledge of the current child welfare system but also employs the knowledge and skills of other

unexpected allies in this work – such as the business and technology sectors, and those carrying the wisdom of lived experience.

### **Integrated Service Delivery (ISD): Integrated Interprofessional Child and Youth Mental Health Teams**

As part of an Integrated Service Delivery (ISD) framework, Integrated Interprofessional Child and Youth Mental Health Teams seek to develop collaborative working relationships, integrated practices and service linkages with specialized government and community agencies that provide essential supports to meet the needs of children, youth and their families. Team intervention services include short-term and time-limited responses (e.g., supportive counselling, treatment, crisis response and clinical follow-up), as well as service responses that are longer in duration and more intensive (e.g., targeted treatment and multi-disciplinary approaches) to address more complex needs. These Teams have the capacity to increase and decrease service intensity and to access resources as required, ensuring greater flexibility in supporting the continued and successful functioning of children and youth in the school, home and community contexts. Evidence-informed practices and concepts from Assertive Community Treatment (ACT), Intensive Case Management (ICM) and Flexible Assertive Community Treatment (FACT) frameworks are used to guide and structure inter-professional intervention, assessment and case management practices. The ISD framework is an evidence-based approach that is currently implemented province-wide in New Brunswick and is in planning stages in British Columbia.

### **Additional resources:**

Brend, D., & Sprang, G. (2020). Trauma-informed care in child welfare: An imperative for residential childcare workers. *The International Journal of Child and Adolescent Resilience (IJCAR)* 7(1), 154-165.

Brend, D., Fréchette, N., Milord-Nadon, A., Harbinson, T., & Collin-Vezina, D. (2020). Implementing trauma-informed care through social innovation in child welfare residential treatment centres serving elementary school children. *International Journal of Child and Adolescent Resilience*, 7(1), 222-232. <https://doi.org/10.7202/1072600ar>

Canadian Consortium on Child and Youth Trauma website:  
<https://www.traumaconsortium.com/en/>

Collin-Vézina, D., Coleman, K., Milne, L., Sell, J., & Daigneault, I. (2011). Trauma experiences, maltreatment-related impairments, and resilience among child welfare youth in residential care. *International Journal of Mental Health and Addiction*, 9(5), 577-589.

Government of New Brunswick, Integrated Service Delivery (ISD) video:  
[https://www.youtube.com/watch?v=QUgNXgmK\\_II](https://www.youtube.com/watch?v=QUgNXgmK_II)

Government of New Brunswick, Integrated Service Delivery (ISD) website:  
<https://www2.gnb.ca/content/gnb/en/corporate/promo/isd.html>

Government of New Brunswick and W. Morrison and Associates, Integrated Service Delivery (ISD) training Module 1: <https://wmaproducts.com/ISDModule1/>

On Being with Krista Tippett Podcast: Resmaa Menakem — 'Notice the Rage; Notice the Silence': <https://podcasts.apple.com/ca/podcast/on-being-with-krista-tippett/id150892556?i=1000476829447>

Until The Last Child (UTLC) website: <https://untilthelastchild.com/>

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<sup>i</sup> Kinniburgh, M.E., & Blaustein, K.M. (2018). *Treating Traumatic Stress in Children and Adolescents: How to Foster Resilience through Attachment, Self-Regulation and Competency* (2<sup>nd</sup> edition). New York: Guilford Press.

<sup>ii</sup> Collin-Vézina, D., Coleman, K., & Milne, L. (2010). Attachment, self-regulation, competency (ARC) trauma study. IN-the-KNOW, 2, 1-3: [https://www.mcgill.ca/crcf/files/crcf/ITK\\_2\\_ISS\\_2.pdf](https://www.mcgill.ca/crcf/files/crcf/ITK_2_ISS_2.pdf)