

# WELCOME

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## Agenda

- ☐ Introduction
- ☐ Opening-Reepa
- ☐ Icebreaker (Pun intended)
- ☐ Background Information
  - Inuit
  - OICC, CAS
- ☐ Why Partner?
- ☐ How do you Partner?
- ☐ Lessons Learned
- ☐ Moving Forward

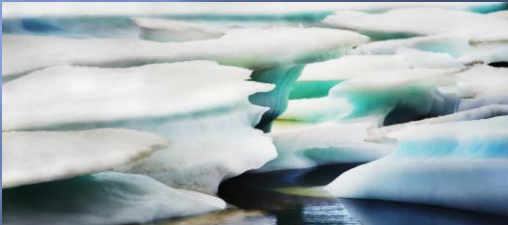
## Purpose

- ☐ We hope that today that in us sharing with you the journey that we have taken together that our story will have some impact and that as a result that you make one change in your thinking and or how you do your work.
- ☐ We hope that change will result in a positive outcome for a child, youth and or family that you work with.

## Introductions

- ☐ Reepa Evic-Carleton – Mamisarvik; Tungasuvvingat Inuit, Program Coordinator
- ☐ Andrée Guillemette- Children’s Aid Society of Ottawa; Supervisor, Child Protection
- ☐ Karen Baker-Anderson- The Ottawa Inuit Children’s Centre, Executive Director

## Ice Breaker!!!



## Ice Breaker

- ☐ Get into groups of 5.
- ☐ Introduce yourselves to group members.
- ☐ Pick a recorder.
- ☐ Answer these questions as a group.
- ☐ There will be a prize for the group who has the most correct answers.

### Questions about Inuit

1. It is possible to drive to all Inuit communities from Ottawa.
2. There are over 50,000 Inuit in the north.
3. The average income for Inuit is 30% lower than the rest of the country.
4. Only one quarter of Inuit finish high school.
5. Inuit still hunt to provide food and clothing.
6. All Inuit communities have a doctor .
7. Inuksuit are used to mark the location of pretty gardens in Ontario.
8. Life expectancy for Inuit is 15 years younger than the rest of Canada .

1. A kunik is the Inuktitut word for being affection.
2. An amouti is sled pulled by our dogs.
3. Tuberculosis is 90 times more common in Inuit.
4. The Inuit language is the strongest aboriginal language spoken in Canada .
5. The cost of living for the Inuit is 50% higher
6. The Inuit live primarily on reserve.
7. The Inuit have to pay all taxes.
8. Throat singing is a way for Inuit to clear their throats after hunting. The first one who coughs gets to eat first.

## The Community

### Inuit in Canada

- Inuit live in Nunavut, NWT, Northern Quebec and Northern Labrador (53 communities)
- 17% of Inuit currently reside in urban settings
- Language spoken is Inuktitut but there many different dialects.
- It is an extremely young population. (Average age of Inuit is 25)

## A Place and a Community



## The Ottawa Inuit Community

- ☐ Ottawa has the largest urban Inuit population across Canada.
- ☐ An estimated 1800 Inuit live in Ottawa.
- ☐ People move to Ottawa for employment, education, medical services, healing and to be near family.

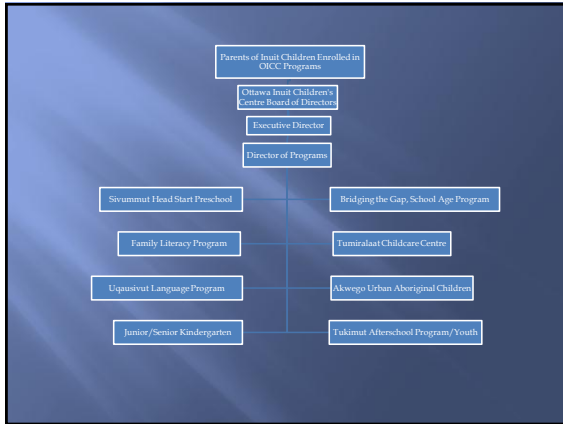
## The Ottawa Inuit Children's Centre

### THE OTTAWA INUIT CHILDREN'S CENTRE

**Vision**  
Strong culture, strong families, strong community

**Mission**  
In partnership with parents and the community the Ottawa Inuit Children's Centre fosters strong and proud Inuit children, youth and families

**Mandate**  
The OICC serves Inuit children and youth from birth to 13 years of age and their families. The objects of our organization are: to provide Inuit children and youth with a learning environment that will enhance their overall development; to foster positive parenting through support and education; and to promote the retention of the Inuit culture and language.



## The Children's Aid Society of Ottawa

- ❑ Reconciliation process in Child Welfare.
- ❑ Consultation sessions - winter 2007 - over 150 participants from community.
- ❑ Collaborative process of community engagement - establish Liaison Group.
- ❑ We share with our partners as equal, respected planners and participants.

## The Inuit Pod

- ❑ Team of 7 front line workers and 1 supervisor
- ❑ 3 main community partners including OICC, T.I. (Mamisarvik Healing Centre)
- ❑ Commitment to increased participation in Inuit community activities:
  - AGM - O.I.C.C., T.I.
  - Attendance at celebrations (Inuit Day, Christmas party, official celebrations)
  - Planned joint opportunities for learning with staff
  - Inclusion of alternate care providers within the community

## Con't

- ❑ Workers meet jointly with clientele at various community agencies.
- ❑ Children continue attending all programming even if removal from primary caregiver occurs.
- ❑ Intervention plans are developed jointly with all community partners involved.
- ❑ Alternate Dispute Resolution methods are adopted - Circle of Care.

## Why Partner ?

- ❑ Historically adversaries
- ❑ At any given time - 35 families or more
- ❑ Heavy workloads for both teams
- ❑ No dedicated funding despite the high numbers and growing population.
- ❑ Resources in terms of staff are limited
- ❑ Limited cultural capacity
- ❑ Fear of backlash from the community

## Con't

- ❑ Lack of cultural awareness/sensitivity and knowledge.
- ❑ Feelings of re-victimization, interventions experienced as punitive/authoritative and disrespectful.
- ❑ Dealing with urban culture shock

## Why?

- ❑ Because we have a common desire.

## What Does the Partnership Look Like?

- ❑ Joint case management sessions with focus on meeting needs of children within the community .
- ❑ Access Visits within Community supervised by CAS
- ❑ Parental Support from OICC (apprehension, visits, court dates)
- ❑ Circle of Support
- ❑ Community events and referrals to cultural program
- ❑ OICC assists in the recruitment of kin for fostering
- ❑ Supports for adoptive/foster parents
- ❑ Moving towards openness in adoption

## Lessons Learned(OICC) What Worked....

- ❑ Language used is so important as well as the tone.
- ❑ Having a team of professionals to work with who are dedicated to working with us.
- ❑ Us being asked to do cultural teachings
- ❑ Offering a support group for foster families.
- ❑ That you need to work with a partner environment in a way that celebrates the strengths of a culture and a community.

## Lessons Learned

- ❑ That you need to meet with the desire to learn about each other and to build your relationship
- ❑ You need to take the time to truly listen to each other and to ask questions.
- ❑ Attend events that highlight the strengths of the community – AGM, Christmas Party, Graduation.
- ❑ That there needs to be the ability to hear and then take action that benefits the community.

## Continued

- ❑ That the change starts with a partner who has leadership who feels that this is important and makes that evident
- ❑ That systems also need to change and that front-line staff must have the support and resources for the change to be made
- ❑ That real change can only happen when you start by listening to our community
- ❑ Change comes in different ways with varying results

## Lessons Learned - CASO

- ❑ Sharing concerns with our partners leads to greater safety for the children
- ❑ Sharing the limits and expectations of the work we do leads to better understanding of the 'why'
- ❑ Having partners as team players leads to success
- ❑ Change comes in different ways with varying results
- ❑ Celebrating gains made leads to better decisions for families and children

## Commonalities

- ❑ How we do the journey- stops along the way to reflect and re-frame.
- ❑ It is about trust and relationships.
- ❑ It is about acknowledging the work is not easy but is so important.
- ❑ It is about listening with the intent of understanding.
- ❑ Acknowledging may never understand but can respect.
- ❑ It is about open honest dialogue with common goals.

## Commonalities

- ❑ Both parties have to have a shared vision
- ❑ Both parties need to have clear defined roles and boundaries
- ❑ Community needs to be informed
- ❑ Need to be able to look back before you move forward.
- ❑ Need to have the right people at the table – it is about relationships.
- ❑ Need to look at all situations through a cultural lens.

## Commonalities

- ❑ That understand children belong to not just a family but a community
- ❑ That culture identity is fundamental to a child's well being
- ❑ That mainstream agencies need to work with Aboriginal, community based partners
- ❑ That you need to find a common goal and keep that as your focus
- ❑ The journey is full of lessons – stop, reflect, change and celebrate
- ❑ Don't get stuck on blame and know what you do and do not own.

## Overall

- ❑ Combined Responsibility:

That how we act separately and combined will have an impact on a child and families mental wellness

## This is What it Looks Like

## In Conclusion.....

- ❑ We have started the journey however we still have much to learn.
- ❑ Policies do not change organizational culture, *People* change organizational culture.
- ❑ We are learning to share the same goals for better outcomes for children, youth and families.