

**Third Session – Forty-Second Legislature**  
**of the**  
**Legislative Assembly of Manitoba**  
**Standing Committee**  
**on**  
**Legislative Affairs**

*Chairperson*  
*Mr. Andrew Smith*  
*Constituency of Lagimodière*

**Vol. LXXV No. 2 - 1 p.m., Monday, January 11, 2021**

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**MANITOBA LEGISLATIVE ASSEMBLY**  
**Forty-Second Legislature**

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**LEGISLATIVE ASSEMBLY OF MANITOBA**  
**THE STANDING COMMITTEE ON LEGISLATIVE AFFAIRS**

**Monday, January 11, 2021**

**TIME – 1 p.m.**

**LOCATION – Winnipeg, Manitoba**

**CHAIRPERSON – Mr. Andrew Smith (Lagimodière)**

**VICE-CHAIRPERSON – Mr. Scott Johnston (Assiniboia)**

**ATTENDANCE – 6 QUORUM – 4**

*Members of the Committee present:*

*Hon. Ms. Squires*

*Messrs. Johnston, Lagassé, Ms. Lathlin,  
Mr. Smith (Lagimodière),  
Mrs. Smith (Point Douglas)*

**APPEARING:**

*Hon. Jon Gerrard, MLA for River Heights*

*Ms. Ainsley Krone, Deputy Manitoba Advocate  
for Children and Youth*

**MATTERS UNDER CONSIDERATION:**

*Annual Report of the Manitoba Advocate for  
Children and Youth for the fiscal year ending  
March 31, 2020*

\* \* \*

**Clerk Assistant (Ms. Katerina Tefft):** Good afternoon. Will the Standing Committee on Legislative Affairs please come to order.

Before the committee can proceed with the business before it, it must elect a new Chairperson. Are there any nominations for this position?

**Mr. Bob Lagassé (Dawson Trail):** I nominate the member for Lagimodière (Mr. Smith).

**Clerk Assistant:** Mr. Smith has been nominated. Are there any other nominations?

Seeing no further nominations, Mr. Smith, will you please take the Chair.

**Mr. Chairperson:** Our next item of business is the election of a Vice-Chairperson. Are there any—try that again. Our next item of business is the election of a new Vice-Chairperson. Are there any nominations?

**Mr. Lagassé:** I nominate the member for Assiniboia (Mr. Johnston).

**Mr. Chairperson:** Hearing no other nominations, Mr. Johnston is elected Vice-Chairperson. *[interjection]* Mr. Johnston has been nominated. Are there any other nominations?

Having no other nominations, Mr. Johnston is elected Vice-Chairperson.

This meeting has been called to consider the Annual Report of the Manitoba Advocate for Children and Youth for the fiscal year ending March 31st, 2020.

Before we get started, are there any suggestions from the committee as to how long we should sit this afternoon?

**Mr. Lagassé:** I would say we should go for approximately two hours and then revisit it from there.

**Mr. Chairperson:** Is everybody fine with two hours and then revisiting at that point? *[Agreed]*

It has been agreed that we will sit for two hours and then revisit.

Does the honourable minister wish to make an opening statement?

**Hon. Rochelle Squires (Minister of Families):** I do. Thank you very much, Mr. Chair.

And on behalf of our government, I would like to thank Ms. Daphne Penrose for joining the Standing Committee on Legislative Affairs to discuss the highlights of the 2019-2020 Annual Report of the Manitoba Advocate for Children and Youth.

It is very significant for me that one of my first official duties in my new responsibility as Minister of Families is the opportunity to be part of this committee to discuss the important work of the Office of the Advocate for Children and Youth in Manitoba.

I know that everyone in this room will agree that we must work together, sparing no effort, to make sure we hold up all of the children and youth in Manitoba. Each one of us has a responsibility in the work we undertake to keep this at the centre of our decisions and all of our efforts. Our roles in this work are all different because of the different positions that we

hold. The work of the Office of the Advocate for Children and Youth is unique in their legislated sole purpose to amplify the voices of our children and youth and to advocate for their rights.

In 2018, the Province enhanced the scope and oversight of the Office of the Advocate for Children and Youth, bringing in new legislation that expanded the mandate of that office. This change was in response to the recommendations made by Commissioner Hughes following the inquiry into the death of Phoenix Sinclair. The tragedy of Phoenix's life and death are well known to Manitobans and helped galvanize people across the province to work together to help our young people.

The annual report reflects the work of the Office of the Advocate for Children and Youth under the new legislation to expand the ability of the office to advocate for children around services provided across government. Under the expanded powers to publish special reports, the Manitoba advocate has released seven public reports which make 50 recommendations. These recommendations are complex, multi-system and directed to multiple levels and departments of government, and the responses cannot be simplistic.

A multi-department deputy minister's committee was created to work across government in reviewing all the report findings and recommendations and to ensure that actions in response to the recommendations take a whole-of-government approach. This approach ensures that complex and multi-faceted recommendations receive the attention and the action they require. The responses to the recommendations are made public through proactive disclosure as part of our commitment to transparency and openness in this process.

An example of our commitment to working across all government to provide supports for children and youth can be seen in the announcements that we've made over the past 15 months for new mental health and addictions initiatives.

Since October of 2019, 31 new initiatives have been announced by the Manitoba government to support stronger mental health and addictions services in our province. The programs provide services across the spectrum from the universal prevention supports to programming providing direct services targeted for those with specific mental health and addictions needs.

I want to thank the Office of the Advocate for Children and Youth for their work to create the Thrival Kits, which is one of the programs we are proud to have supported. Thrival Kits are a tool to support mental wellness and resiliency for children and was developed through a partnership between the advocate's office and the Canadian Mental Health Association.

Through our investment, Thrival Kits have now been distributed to all students in grades 4 to 6 across our province, and all teachers have been able to receive training to implement this important, positive program. We are grateful to the advocate and her staff and to the Canadian Mental Health Association for their work in developing this amazing program.

Other initiatives that are increasing supports in this area include enhancements to supports for sexually exploited youths, which I know is a strong priority for the office of the children's advocate. StreetReach Winnipeg now is able to provide mental health and addictions clinician support as well as spiritual adviser support to the high-risk youth connected to this program. Clan Mothers has developed cultural teaching and ceremonies to support the healing journeys of these youth, and Neecheewam has developed the first Indigenous-led program for sexually exploited youths struggling with addictions and mental health challenges.

The success of StreetReach Thompson, which began providing services less than one year ago following community consultation, has been nothing but inspirational. Strong relationships are being created with vulnerable youth; young people who are missing are being located and returned to safety; and other community services, including RCMP, report significant improvements in their work in these areas.

I know the office of the children's advocate shares our interest in expanding youth hubs across our province. The expansion of services supported by the NorWest hub has resulted in helping many additional young people in need, and we are—we're excited to post the request for proposals to develop three more youth hubs in our province.

This is a time of transformation in child welfare in Manitoba. We have taken strong steps in moving toward single-envelope funding for CFS agencies to allow greater flexibility for the services they provide.

We have ended the long-standing practice of birth alerts, replacing it with practice of voluntarily—voluntary work with families to plan before a baby is

born. And we are seeing exciting developments from new programs, such as Granny's House and the Indigenous doula social impact bond.

The number of children in care has been declining as more children remain or return to the care of their families. We must continue to work together across government and community to support families so that children and youth can remain safe and at home.

Implementation of all sections of The Advocate for Children and Youth Act have been affected by the new federal Indigenous child-welfare legislation. We continue to work to get better information about the implications for provincial systems and the work of the Indigenous governing bodies and how we can all work together to ensure safe and seamless service delivery transitions for Manitoba children, youth and families.

I want to thank everyone who works with the Office of the Advocate for Children and Youth for their hard work to ensure that the voices of our children and youth are heard. I look forward to working with them to keep improving services and supports for our children and youth in the province of Manitoba.

Thank you.

\* (13:10)

**Mr. Chairperson:** We thank the honourable minister.

Does the critic for the official opposition have an opening statement?

**Ms. Amanda Lathlin (The Pas-Kameesak):** I'd like to say, welcome, everybody. Bring greetings from Treaty 5 territory and from Opaskwayak Cree Nation. I'd like to say thank you to the advocate, Ms. Penrose and colleagues and everyone else for being here today, remotely or in person.

Today's meeting has been called to consider the 2019-2020 annual report. I just want to take a minute to recognize that the later report of this fiscal year, along with the rest of 2020, posed great challenges for the children's advocate office, from a flood to COVID-19. I want to commend her and her team for the ability to adapt and the perseverance to ensure that Manitoba's children continue to get services and care they need.

Mr. Chairperson, 2019-2020 was the second full year in which the children's advocate had worked with some of their new mandates, and, again, their office saw an increase in demand—a 6 per cent increase in

request for services overall and a 24 per cent increase in ongoing advocacy services.

Unfortunately, hundreds of kids continue to go unserved and lessons are lost because two mandates continue to be unproclaimed, ones that were supposed to be proclaimed in the spring of 2019. A year and a half into their second term, and the government still has yet to proclaim these sections to ensure that other government departments and services are held to account.

I look forward to today's discussion to learn about the impacts and changes throughout 2020 on the advocate's office and their work, outstanding recommendations and further discussions in the delay for proclaiming the outstanding mandate. I look forward to working together.

Thank you. Ekosani.

**Mr. Chairperson:** We thank the member.

Does the Deputy Manitoba Advocate for Children and Youth, Ms. Krone, wish to make an opening statement?

**Ms. Ainsley Krone (Deputy Manitoba Advocate for Children and Youth):** Yes, I do.

**Mr. Chairperson:** Ms. Krone.

**Ms. Krone:** Good afternoon. I'd like to thank the Standing Committee on Legislative Affairs for the opportunity to appear here today. My name is Ainsley Krone, and I'm the Deputy Manitoba Advocate for Children and Youth, responsible for child death reviews and investigations, research, quality assurance and public education, and I'm appearing on behalf of the Manitoba advocate who's away on a medical leave and unable to attend today.

I'd like to first acknowledge that the province of Manitoba is located on the original land of the Anishinabe, Cree, Oji-Cree, Dakota and Dene peoples, and the beautiful homeland of the Metis nation.

The work of our office extends throughout the province and throughout treaty areas 1, 2, 3, 4, 5, 6 and 10. Our team works every day in the spirit of collaboration and reconciliation to reach out, connect with and lift up all young people in the province, but especially First Nations and Metis children and youth who continue to be overrepresented in many of our provincial systems.

I'm pleased to be here on the advocate's behalf today to discuss the content of our 2019-2020 annual

report. This report was released in November 2020, and its theme is Amplifying Youth Voices.

We also put together a companion document focused on our youth engagement program, and it's called Nothing About Us Without Us. This afternoon I'll be providing committee members with a summary of the activities of our office over the past year, including our busy programs for advocacy services, child death investigations, research, quality assurance, youth engagement and our new public education program.

I'll tell you about the launch of our first youth Listening Tour, the special reports that we've released over the past year, the expansion of our Thrival Kits project and overall how every one of our programs grew in volume of workload even while we were all navigating a global pandemic.

I'd like to introduce the members of the committee to my counterpart deputy advocate, who is here with me today, and she's sitting behind me in the chairs. I'm not sure if those of you on the screens can see her or not, but with me today is Denise Wadsworth, who is the acting Indigenous deputy advocate responsible for advocacy services and youth engagement.

As members here will recall, it's been almost three years since The Advocate for Children and Youth Act was passed and proclaimed in the Legislature on March 2018. Through this legislation, an expansion and strengthening of our mandate to advocate in additional domains beyond child welfare came into effect. The ACYA answered, in part, several recommendations made by the late commissioner Ted Hughes in his final report on the Phoenix Sinclair inquiry released in 2014.

As a result of Hughes' recommendations and the subsequent proclamation of the ACYA, more children, youth and young adults are able to call us to help them navigate public systems, including Child and Family Services, adoption, disabilities, mental health, addictions, education, youth justice and victim support services, which includes domestic violence and sexual exploitation.

In 2019-2020 our office received 3,196 requests for advocacy services. About 69 per cent of the children, youth and young adults that we served had open files with child welfare, while 55 per cent had mental health and addiction issues. Ninety-nine per cent of the young people we helped had more than one health or social need,

which means that our advocacy officers are often co-ordinating help for them between several service areas like child welfare, justice and health care. Importantly, 42 per cent of the children, youth and young adults that we served had five or more health or social needs when they contacted us.

Our call volume this past fiscal again outpaced last year, this time by about 6 per cent, although it likely would have been an even larger increase if not for the impact of the global pandemic and temporary changes to the ways in which we were able to offer our essential services.

Like almost everyone over the past year, we've had to be flexible in our work environments due to COVID-19. The start of the spring shutdown did not stop our work as we pivoted to working from home by phone and video meetings with young people, their families, service providers and others.

Our intake, advocacy and youth engagement teams returned full time to our main Portage Avenue office in June, and we've kept our doors open to the public since then, taking COVID-19 safety precautions such as screening visitors, mandating mask use and repurposing larger meeting rooms to function as our intake offices. Our investigations, research, quality assurance and public education programs remain in our Osborne Street location at this time. And, of course, our storefront in Thompson also remains open with appropriate public health safety precautions in place.

Despite the ongoing pandemic, our offices remain busy. We carried 309 ongoing advocacy cases over from the previous year, and then, as mentioned, received 3,196 new requests for advocacy services this year. Of those, we provided short-term service and support to address many of the calls, but we determined that 789 of them required more complex and long-term support from our advocacy team, which is a 24 per cent increase over last year.

Our youth engagement team also had a very busy year and made 2,085 contacts with children, youth and young adults. That is a more than 500 per cent increase over the previous year. Our Youth Ambassador Advisory Squad celebrated its one-year anniversary this past fiscal, and the youth engagement program is now two years old.

Our two youth engagement co-ordinators delivered 33 educational workshops to young people on children's rights, while MACY staff as a whole offered 50 public education presentations

and 241 visits to communities outside of Winnipeg before travel restrictions came into effect.

Several community visits happened during our first youth Listening Tour. We mapped out communities to visit around the province so that we could hear directly from children and youth about the issues affecting them. We conducted in-person gatherings in schools and community centres.

While we managed to visit hundreds of youth in their home communities and in youth custody facilities throughout the province, our full tour got cut short due to COVID-19. In the interim we launched a youth survey online, which garnered more than 200 additional responses. We look forward to restarting the Listening Tour and travelling to more communities to meet with youth when it is safe to do so.

We also officially started a new public education program toward the end of this past fiscal. Public education is an important element of ensuring that children, youth, families and the general public understand the wide scope of work at our office, what supports that we can offer them in their lives, as well as educating the public about what we are finding in our child death investigations and research projects. Many folks still think of our office as working solely within the child-welfare realm, and we're grateful to be able to do much more advocacy in several additional domains now under the new legislation.

One of the new domain areas that we've been working the most in is mental health. This also includes our Thrival Kits project, which delivers mental health promotion curriculum to grade 4-to-6 classrooms throughout the province. This project was created as an upstream solution after the first two phases of our youth suicide research, in hopes of promoting mental health to younger grades before the onset of many mental health concerns.

\* (13:20)

We developed the Thrival Kits with our partners at the Canadian Mental Health Association and in collaboration with many Manitoba teachers and school administrators, who also see the value of promoting daily mental health activities in schools.

Thanks to a substantial investment from the Province in late 2019 under their Mental Health and Addictions Strategy fund, we were able to translate Thrival Kits programming into French and deliver the kits in both French and English to approximately 28,000 students this past fall. This expansion could

not have come at a better time, as many of us—children included—are experiencing higher stress and anxiety in our lives and needing to focus on good mental health practices. We're thrilled to be able to deliver this important program to so many classrooms throughout Manitoba and we look forward to expanding more in years to come thanks to the provincial funding.

Another major event that we experienced during the last fiscal year was co-hosting the national conference for the Canadian Council of Child & Youth Advocates here in Winnipeg in fall 2019. During the conference, our national council of child advocates released a national paper on youth suicide. The national paper incorporates findings from our province's previous youth suicide research and calls on the federal government to develop a national youth suicide prevention strategy.

In 2019-2020, 198 children, youth and young adults under the age of 21 died in our province. Of those, 62 deaths were assessed as being in scope for review by the Manitoba advocate, as there had been an open CFS file within the 12 months that preceded the death of the young person. As I'll explain later in my remarks, this CFS-only scope is more narrow than what is actually described in the full legislation that was passed and proclaimed in 2018. Of the 62 in-scope deaths last year, 13 of those children and youth were in care of CFS at the time of their death.

Last year, our child death reviews and investigation program completed 71 child death reviews and 26 more in-depth child death investigations. A summary of those 71 child death reviews was released in fall 2020 and is available on our website.

In addition to collaborating nationally on the Canadian youth suicide paper, we also released three of our own special reports in 2019-2020, two of which focused on youth suicide, an issue that continues to be far too prevalent in Manitoba. The youth suicide rates in our province outpace those across the country, with data from our office showing that suicide has become the leading manner of death for Manitoba youth ages 10 to 17 over the past five years, and a visual of that data can be seen on page 66 of the annual report in front of you.

**Mr. Chairperson:** Sorry, Ms. Krone. Unfortunately, your time has expired.

Is it the will of the committee to give leave for Ms. Krone to continue? *[Agreed]*

**Ms. Krone:** In February, we released a special report titled *The Slow Disappearance of Matthew: A Family's Fight for Youth Mental Health Care in the Wake of Bullying and Mental Illness*, which focused on the life and death of Matthew, a 16-year-old boy from Winnipeg who died by suicide in 2017.

His family struggled for many years to find him long-term mental health treatment that could have saved his life. Matthew's mother, who we were honoured to work closely with as we wrote his story, worked relentlessly to find Matthew the long-term help that he needed. And despite her efforts and those of a number of service providers, what was clear is that Manitoba does not have the type of intensive and longer term support that Matthew needed. What's more, many other families in our province today face similar battles as they desperately try to cobble together supports for their child.

Our team also finished an aggregate special report in March called *Stop Giving Me a Number and Start Giving Me a Person: How 22 Girls Illuminate the Cracks in the Manitoba Youth Mental Health and Addiction System*. It described similar service gaps in 22 girls' stories from across the province, most of whom lived in rural or northern communities. This report highlighted, again, the underfunded and ill-co-ordinated nature of youth mental health and addictions care in our province, which was also a major finding from the government's 2018 report known as the VIRGO report.

In our office's report on Matthew's death and the subsequent aggregate on the suicide deaths of the 22 girls, we made 15 recommendations to the provincial government regarding ways to improve the mental health and addictions system for youth in this province which could, in turn, help prevent youth suicides. In accordance with *The Advocate for Children and Youth Act*, our office will be tracking those recommendations and publicly reporting on government compliance.

We were pleased last week to learn that the government is dedicating significant resources in creating a stand-alone mental health and wellness department, and we very much look forward to working collaboratively with its staff and leadership towards good mental health for all children, youth and young adults.

The third special report that the advocate released last year was called *Safe and Sound: A Special Report on the Unexpected Sleep-Related Deaths of 145 Manitoba Infants*. This first-of-its-kind study

dove into 10 years' worth of data on unexpected sleep-related infant deaths in Manitoba. On average, we lose more than one infant every month in preventable ways where unsafe sleep conditions are present at the time of the death.

This is a project that we worked together on with the Office of the Chief Medical Examiner. We discovered recurring risk factors in infants' homes and laid out ways that these risks can be prevented. We made 13 recommendations for policy improvements to both the provincial and federal governments, which, when implemented, can help to prevent infant deaths in the province. The RCMP in Manitoba and the First Nations Health and Social Secretariat of Manitoba have both endorsed these recommendations, and we look forward to hearing the government's responses this year too.

I want to also share with the standing committee that our office has been working closely with the government's deputy minister's committee known as the Manitoba Advocate for Children and Youth Recommendations Action Planning Committee, which is also known as the MACY-RAP table.

In addition, our quality assurance program has also built positive working relationships with the MACY-RAP working group subcommittee as part of a comprehensive process of accountability following the issuing of formal recommendations from our office.

These two committees of departmental staff and leadership demonstrate that they are committed to system excellence, and we believe that our collaborative work to date has clear benefits for the lives of young Manitobans and their families.

I also want to note here that in addition to good working relationships with provincial government personnel, our office consults and collaborates regularly with members of First Nations and Metis communities, including governments and community leaders, both elected and grassroots. These efforts are integrated into all child death investigations, research reports and many child-specific advocacy cases.

In addition to external consultations, the Knowledge Keeper and Elders Council at our office provide guidance and insight for all aspects of the work that we do on behalf of young people in this province.

Additionally, we have an internal reconciliation committee, led by Denise Wadsworth, who's here with me today, that provides office-wide learning and



guidance about our ongoing responsibilities to offer services to work in ways that respect the treaties and offer culturally safe and appropriate services in each program area at MACY.

As you've heard, our office continues to be as busy as ever. And I believe our workload and call volume will grow. Our Thompson office, which we share with the Office of the Manitoba Ombudsman, hosted its official grand opening in April 2019, is located inside the City Centre Mall in Thompson and has helped to significantly increase our presence in the North while we amplify the voices of northern children and youth.

Last year, this small but mighty office received 352 requests for advocacy support services.

One exciting thing on the horizon for us there is that we'll be starting a Northern Youth Ambassador Advisory Squad this year which will be run out of the northern office.

In order to best serve all children, youth and young adults in our province, we want to encourage the government again to finish bringing into force the final two phases of our legislation. These include the expanded child death reviews and the central tracking of serious injuries. Both of these sections were proclaimed back in March 2018 but continue to be held back from coming into force. Because of their importance, I do want to take a couple of brief minutes to speak to them today.

Because expanded child death reviews remain pending, currently, reviews and investigations after the death of children—deaths of children are only triggered as being in scope if the child or their family was connected in some way to the CFS system in the 12 months before the death of the child. Once that criterion is met, we can and do review all designated services that were provided to the child or their family, but the only way that death comes into scope is still through the CFS system.

What remains outstanding is the broadening of that scope, as described in our legislation, to include deaths where there was no CFS involvement but the mental health, addictions or justice system was involved with the child or their family. As a result, some suicides and homicides can—continue to fall out of scope for our investigations team. There were 11 non-reviewable suicides and three non-reviewable homicides of youth and young adults last year.

While we were notified of all 198 deaths of young people under the age of 21 that occurred in Manitoba,

only 62 of them were in scope for our review. Importantly, 136 of those deaths fell outside of our scope for review.

The other piece of our legislation that was proclaimed in 2018 but held back from coming into force involve serious injuries to children. Specifically, we continue to wait for the Province to require CFS, justice, mental health and addictions services to report to the Manitoba advocate when children and youth sustain serious injuries while receiving those provincial services.

\* (13:30)

This important section of The Advocate for Children and Youth Act was included in the legislation because Manitoba currently has no centralized tracking or independent investigating of serious injuries to children. And therefore, the prevalence and severity of how many children are being harmed in unknown in our province.

What we do know comes from this work being done in other provinces. For example, in British Columbia, our counterpart in that province reported in their 2018-19 fiscal that there were 1,037 critical injuries to children, and it's reasonable to believe that here in Manitoba we would see similar numbers of those data were being tracked, given that while the child population is larger in BC, Manitoba children are more service-involved and therefore a higher rate of serious injuries would be reportable based on legislative criteria.

What we have—we have heard reports from our advocate colleagues in British Columbia and Alberta that they are seeing upticks during the pandemic, and we worry that this may also be happening in Manitoba, but we have no way of knowing.

While our legislation allows the advocate to review and investigate serious injuries that do come to our attention, the concern here is that we continue to rely on informal community sources and the media to alert us to those serious injuries, which means that our office is only made aware of a tiny fraction of the serious injuries that children and youth are sustaining. This large gap is exactly why the serious injury section of our legislation was included and what it was meant to address.

Our office is ready for these final two sections of the legislation to be brought into force. It's time for this work to happen for families in our province, and we're hopeful that the government will set a date for this to happen very soon.

The 2019-2020 fiscal year and 2020 more specifically have been difficult for all of us, and this is especially true for children and youth. School closures and social isolation are incredibly hard on young, developing minds. It's important for all of us to continue to amplify young people's voices and equally as important that we listen to them.

As we heard on our Listening Tour last year, and as we frequently hear from our youth ambassadors, young people are incredibly perceptive and often understand what's best for themselves and for their communities.

And so with that I would just say thank you very much for your time and attention. I appreciate the extra time that you gave me, and the opportunity to discuss our annual report and companion document with you.

And I welcome any questions or comments that you have, and I would just say that as I'm appearing on behalf of the advocate, I will do my level best to answer any questions that you may have.

Thank you very much.

**Mr. Chairperson:** Thank you, Ms. Krone.

The floor is now open to questions.

**Ms. Lathlin:** In addition to an unusual year with COVID-19, your office faced an unexpected move due to flooding at the beginning of 2020. In early March, you expressed concern—concern about, I quote, missing kids, because your move to an unidentified office building. COVID-19 also led to closing your office to walk-ins in mid-March.

Could you please explain the impact the move and closure of walk-ins had on children and youth of Manitoba and on your office fulfilling its mandate.

**Ms. Krone:** Thank you for that question.

I would say that, you know, I think that it's no surprise for—to anyone if I say that the conditions around the pandemic, that obviously continue today, have been really difficult for many organizations and many service providers, and we're no exception to that.

So, you know, as I mentioned in my remarks and as you referenced just now, there was a period of time where, due to the public health concerns, we moved our staff—our front-line service staff—home for a short period of time so that they could continue connecting with young people, but we were unable to keep the doors open for drop-in visitors at our Portage location.

The timing also kind of coincided with another flood that happened in our building, and I think that, you know, longer-standing committee members on this committee will remember that the advocate in previous years has spoken to the issue of some floods happening in our building. So we did experience another one this past year, and—so, I mean, you know, any time that an office is impacted by something like that, there is going to be some disruptions in service.

What I would say is that we have an incredibly dedicated, passionate group of people that work at the advocate's office, and regardless of whether it's a pandemic or a flood or, you know, temporary closures or connectivity issues or whatever happens to get thrown at us, the team is—the team finds a way to make sure that young people always know that they can contact us.

Even for that short time where we were unable to see them in person for public health reasons, we never shut our phone lines and our video lines to young people and their families and service providers. So we were able to continue delivering the services according to our mandate.

**Ms. Lathlin:** COVID's arrival, your office also shifted remotely. In the report, you state that, I quote: "Our work continued and in many cases expanded in new ways." I wonder if you can tell us how the transition was to working remotely. Any difficulties in how your work expanded in new ways?

**Ms. Krone:** Yes, I mean, I'm not totally clear on the question. Just, like, in terms of the impact and the transition to remote work, I would say that, you know, because of the nature of our work and the extreme sensitivity of a lot of the information that we do work with, you know, confidentiality and security of information and our ability to provide support services in ways that protect privacy and protect young people and their families is No. 1 for us whenever we were—we're thinking about, you know, moving people home or whatever.

So we did a whole bunch of different creative things, you know, in terms of securing of information. We have a pretty extensive digital filing system that we were able to connect people with remotely and, you know, utilization of certain platforms and—over others and that kind of stuff.

Some of the ways that we—you referenced sort of fresh new things that we were doing as part of those conditions. One of the things that we started doing was hosting Friday live Facebook events, and so those

have been going—I think the team, it's—they're run by the youth engagement team and our Knowledge Keeper.

And those ones, I think they just finished their 36th week in a row. They go live on Facebook—although the last couple of weeks have been pre-recorded, but Friday at 11 o'clock we send out sort of a teaching of the week and some information for young people, and it's also a way for us to connect with children and youth.

We featured our Youth Ambassador Advisory Squad quite a bit through some of those avenues, which was, you know, the remote opportunities kind of gave us some of those new creative things that we could do. We expanded our online presence through social media to continue connecting with young people and encouraging them to reach out to our office in new and different ways.

So, I mean, our focus really was to pivot in whatever ways that we could to make sure that young people knew that even though they were in some cases finding it difficult to access their regular services or their regular supports in their lives, that no matter what was happening in other areas of their life, that if they needed help from the advocate's office, we were here for them and they could contact us.

**Ms. Lathlin:** I recognize that COVID-19 began at the end of fiscal year 2019-2020. Can your office explain, due to COVID-19, did it lead to any increased volume of calls to your office and issues with access to services?

**Ms. Krone:** Yes, I mean, I think that what I would say is that, you know, young people and their families certainly were experiencing barriers to a number of different services around the province, you know, as people were everywhere around the globe, really.

And so some of the calls that we started getting around that were things like, you know, challenges accessing, let's say, regular mental health supports; if a young person had regular meetings that were scheduled, like on a weekly basis or something, and sometimes there were some challenges with that. We heard about visitation for children and youth in care being impacted by some of the restrictions, the public health restrictions.

And, of course, you know, with the remote learning and the, you know, the suspension of in-class learning for schools, that, of course, impacts a lot of young people. And so we heard from a lot of young people that, you know, the—both the mental health

impacts on that. Social isolation is a really big thing this year for young people everywhere, and Manitoba youth are absolutely part of that as well.

\* (13:40)

**Ms. Lathlin:** I know we have mentioned about our children in care—what kind of calls are we receiving in regards to visitation with kids in care throughout the pandemic? What are the—what are you hearing? What are the impacts that we're having on our children and the families, everyone that's involved?

**Ms. Krone:** As I'm sure you know, you know, any time a young person is in care, staying connected to their family, to their siblings, to people that they know and who love them is incredibly important. And, you know, when a young person is in care and then, you know, the conditions or the arrangements that you can typically count on, that, you know, there's a monthly visit—or on whatever schedule your visitation is—when that gets impacted, when—you know, when there's travel restrictions, for example, there were a number of places in the province that we just couldn't travel to, our—you know, visitation was impacted in that way.

Those obviously have a real impact on young people. Young children in particular don't always understand. They don't necessarily understand why they can't have their regular visits with their family, with their siblings, you know.

So that—it's incredibly hard to hear some of that stuff. But what I would say is that our office has an incredible group of advocacy officers who are extremely well versed in not just the CFS system but how to creatively think about some of those solutions.

So, you know, we, for example—just as a little example—we assisted a community organization that focuses on keeping children and their families connected by providing some iPads that we—they were able to use to facilitate visitation between children and families.

And I know that, you know, our office is not the only one doing that kind of stuff. And I think that, you know, one of the things that we saw was that even when there were incredible restrictions placed on moving around the province, regular visitation, regular appointments, that kind of stuff, that Manitobans really stepped up.

And our office as well, you know, we worked incredibly hard to make sure that young people were able to navigate these really difficult circumstances

by—and still remain connected to the people that love them.

**Mr. Chairperson:** Ms. Lathlin.

Ms. Lathlin, I think you're on mute.

**Ms. Lathlin:** In regards to visitations, has there ever been issues brought forward in regards to lack of personal protection equipment for visitations—for prohibiting visitations?

**Ms. Krone:** I'm sorry, I don't have information on that right now. I could certainly—you and I could connect after this and I could provide you with some additional information.

**Ms. Lathlin:** My next question is, COVID-19 has had tremendous implications on Manitobans' mental health, including children who have been impacted by changes in schooling, activities and abilities to see their family and friends. I'd like to see your recommendations on how we could better support kids' mental health.

**Ms. Krone:** Thank you for that question.

So, as I mentioned in my remarks, mental health is an area that we put a lot of focus into and a lot of effort and work into that area because it is incredibly important. And what I would say is that, you know, the advocate has been really diligent in terms of ensuring that what we're seeing is also information that is being shared with the public in really broad ways. So the annual report that you have in front of you actually has summaries on a number of specific recommendations that have been made with respect to mental health.

And, in addition, I would also encourage you to take a look at the report that the advocate put out this last fall, which is called *Are They Listening?*, which is the summary of government compliance with recommendations issued under The Advocate for Children and Youth Act, and it details the first four reports that the advocate put out, so that is: the *Circling Star* report in October 2018; the report about the girl named Angel in December 2018; it also includes the report called *Learning from Nelson Mandela*, which looked at pepper spray and solitary confinement practices in youth custody facilities; and the fourth report that this one summarizes is the Tina Fontaine report.

And so in that summary report that the advocate put out this last fall, there, again, are really extensive analyses on not only the recommendations that the advocate has made, her rationale and reason for the

recommendations, but also the process through which the government has responded to those recommendations, our analysis of the activities that they have undertaken and what work is left to do.

And so, you know, the advocate, wherever possible, is trying to be as transparent with all of the information that we're seeing and the changes that we are seeing, the areas of lingering concern, and a lot of that is detailed in the report that I just referenced, the back pages of the annual report.

As well, I would say—encourage you to check out our website, which has an entire section around recommendations that includes analysis by our quality assurance team and our monitoring team. You know, the point really is to provide as much information in detail to the public as possible about the things that we're seeing in terms of responses to those recommendations emerging from special reports.

**Ms. Lathlin:** In regards to mental health supports that you've referenced within the report, what about mental health supports and services for kids throughout this pandemic currently. What are the supports and services for our children throughout this pandemic?

**Ms. Krone:** So, I mean, the pandemic is obviously still ongoing. It's one of those things that we are watching very closely. We have been in regular and ongoing conversations not just with community partners in various organizations that are delivering mental health services to young people, but also with the government departments that are involved in that work as well.

So, you know, as I mentioned in my opening remarks, the social isolation piece and young people being cut off from, you know, peers at school, their abilities to, you know, participate in after-school activities or other activities like that, being limited in terms of being able to just get together with friends, all of that is incredibly impactful on young people.

Because, particularly, you know, adolescents and older children and adolescents who are really going through this process of discovering their identities as individuals, social isolation is something that is really hard on those kids in particular because it's a natural part of their growth and development.

And so it's an area that we hear about all the time, not just, you know, from people calling into our office asking for support, whether it's, you know, for mental health services or different things like that, but we also

hear about it from our Youth Ambassador Advisory Squad. They talk about the impact of the pandemic and, you know, with the young people that we continue to support, as well as the young people whose stories we learn about through our investigations in child death reviews.

So I would say that mental health has been an area of focus for the Manitoba advocate for the last number of years, and that has become even more of a focus for us now with all of the various restrictions that everyone is having to live under and live with, and so it continues to be top of mind for us. And, hopefully, you know, in the time to come we're going to be able to provide more information and analysis, specifically about the impacts of the pandemic. In some ways it's a little early to do that at this point, but we—you know, we certainly have a lot of anecdotal information coming in every day.

**Ms. Lathlin:** With the code red designated for another two weeks means that visitations are further cancelled. Am I correct?

\* (13:50)

**Ms. Krone:** I don't know if I would be able to say that's across the board. But again, you know, that's information that we could circle back with you on, Ms. Lathlin, and I'd be happy to provide any information that we do have about that.

**Ms. Lathlin:** I can confirm from personal experience that we haven't seen our nieces until—since mid-October. It is now January—close to mid-January, so we have to think about our families and the parents during this crisis as well while we're separated. It's hard to heal while families are separated and especially through this pandemic.

However, in regards to respite services, has your office received any calls regarding suspension of respite services for kids in care throughout this pandemic?

**Ms. Krone:** Yes, we have received some calls to that effect. And I would also provide information that one of the larger reports that we're working on right now is a review and examination of the disabilities services in Manitoba, and respite is a key issue for children and youth living with disabilities in their families. And so we have a lot of extensive analysis and research that's happening specifically to do with respite, and the advocate is going to be putting out a report that includes that information in the coming weeks.

**Ms. Lathlin:** Early 2019, government announced a review of youth and justice and its connection to child welfare. Have you heard from the government at all on when this review is set to be completed?

**Ms. Krone:** I don't have the timeline. I don't have that information on the timeline, but I would say that we are in pretty frequent ongoing conversations with many government departments, including Justice, whether it's through the MACY-RAP table that I spoke to previously or their working group. So we have, you know, we have ongoing conversations with Justice all the time, but I'm not sure on the timeline for that review report.

**Ms. Lathlin:** This question is for the minister.

When will this review be completed, and when will it be publicly be available?

**Ms. Squires:** I'd like to thank my colleague for that question, and I also just want to reflect on something that our deputy advocate said today, and that was how her office has been—is very pleased to have a very collaborative working relationship with government, and particular that MACY-RAP table, as well as my deputy minister.

And I would like to—this has been my first opportunity to dialogue with the children's advocate office, and so I do want to extend my sincere desire to work very collaboratively with the office and allow there to be an open invitation for dialogue and collaboration whenever possible. And so I just want to thank the deputy advocate, Ms. Krone, for your presentation thus far today and for your office's commitment to enhancing services for our children and youth in the province.

I know that mental health and addictions has—is a large focus of many people in Manitoba, that we know that the pandemic has exasperated conditions in many instances, and that is why our government is wanting to really take a holistic whole-of-government approach to mental health, wellness and recovery. And I look forward to working with my colleague, the new minister of that department, Ms. Gordon, on these issues and achieving outcomes for our children and youth.

We also recognize that child welfare in this province is certainly a non-partisan issue, and I really do look forward to working with my colleagues, Ms. Lathlin, Mrs. Smith and Mr. Gerrard. I know that all my colleagues in the Manitoba Legislature share our government's commitment to advancing wellness for children and youth in the province of Manitoba

and improving outcomes for them. And I certainly do look forward to a dialogue and relationship with them, and certainly want to also extend that invitation to my colleagues in the Legislature, particularly my opposition critics, an open invitation for further dialogue on these issues.

So, as the deputy advocate, Ms. Krone, had pointed out, there is that MACY-RAP table that is overseeing a lot of the intergovernmental work to ensure that we are taking a whole-of-government approach to, whether it be proclaiming some of those other sections of The Advocate for Children and Youth Act or expanding these services.

And I will commit to Ms. Lathlin and to the committee that we will certainly endeavour to proceed very quickly and come back with a definitive timeline, because we do believe that enhancing these services and opportunities for protecting children is crucial in the province. And I will be reporting back to you with a timeline and a deadline in the very near future.

**Ms. Lathlin:** I've a question in addition—an additional question to the minister—we—elaborate a little bit more on possible delays for this very important review of youth and justice and its connection to child welfare?

**Ms. Squires:** We do have the interdepartmental working group from the departments of Justice and Families, and we will be providing the response to the recommendations in the very near future.

**Ms. Lathlin:** I introduced Bill 213 in the fall to help address the issue of the lack of adequate access to northern sexual assault kits and trained professionals to administer those kits. Specifically, the bill requires the minister to report annually, by health authority, on the number of health professionals with special training to examine children who have been sexually assaulted and on sexual assault evidence kits and inventory.

I'd like to know what you think of this bill and if you agree that it will help address the lack of access to sexual assault services in the North for our children. Thank you. This is to the advocate, sorry.

**Ms. Krone:** Thank you for that question. Unfortunately, I haven't been able to read that bill. I'd be happy to do so and then maybe we could have some conversation about that afterwards.

I mean, obviously, you know, accessibility of response services when a person experiences a traumatic event like a sexual assault, that's an incredibly important thing to be doing. And—but, like

I said, I haven't—I have not read the bill that you put forward, so—but I'm happy—you know, our office would be happy to have those conversations with you.

**Ms. Lathlin:** I would like to proceed to ask the minister the same question.

**Ms. Squires:** As the member is aware, the Department of Families does assist in providing training on trauma-informed care to health service providers, as well as providing a wide range of support services for children and youth survivors of sexual abuse and assault. New funding announced in this past year to specialized treatment and supports will improve outcomes for children and youth services.

\* (14:00)

We know that in Manitoba we're very fortunate to have the SANE program, the sexual assault nurse examination program, that we have expanded. We believe in the work that they do. We believe the—in the importance of the work that they do and we know that there are certain capacity limitations that we are looking to address, and I commit to the member that consideration, as with every other piece of legislation that comes before us in the House as members of the Legislature, we certainly do examine and look at the merits of all legislation, and her bill is certainly no exception to that.

**Ms. Lathlin:** This is in regards to proclamation. You explain on page 72 of the report about 12 suicides were outside of scope of your current mandate, but would have been within if you had the outstanding sections, if the proclamation would have been proclaimed. Could you explain the implication of not conducting these investigations?

**Ms. Krone:** You know, this relates to the piece of the legislation around the expansion of the child death review portion of our legislation. And, you know, it's—we get child death notifications, official ones, from the Office of the Chief Medical Examiner, sometimes daily, sometimes multiple times a week, but we get sort of an ongoing rolling list of young people who have died in our province.

And one of the things that we do immediately is we assess whether that death falls into scope for review of the advocate based on legislative criteria, and as I spoke to in my opening remarks and as you're referencing, you know, on page 72 of the annual report, that scope remains narrow because the expanded piece that Commissioner Hughes really, really wanted to see and which, obviously, we want to

see as well, would bring those additional deaths—a number of additional deaths into scope for review by the Manitoba advocate.

And I would say that, you know, there's a—of the 198 young people under the age of 21 who died in Manitoba during this fiscal year—and you'll see some of the data laid out in earlier sections of the report—a lot of those deaths are of young children under the age of two who had medical conditions, congenital issues, prematurity, those sorts of things.

And, sometimes, you know, when we see the initial assessment of some of those deaths, we know that there's not necessarily anything that could've been done to achieve a different outcome. And—but I would say that it's always really difficult to see the suicides and the homicides and some of the accidental deaths that are happening for children, youth and young adults where we see that our scope doesn't reach them.

You know, our ability to take pause, to gather all the evidence, to analyze it carefully, to speak to family, to go to the community—you know, when we're able to travel, in video ways otherwise—but our ability to do really comprehensive examination of what was going on for that young person prior to their death, whether it was by accidental—or a suicide or a homicide, you know, we learn a lot of stuff about where the gaps are in services to young people. We learn a lot about the experiences of families trying to access services. We work typically very closely with family, particularly for those reports where the advocate is going to make the report public.

And so I spoke before in my comments about Matthew's mom, for example, who worked very closely with us, and this was a woman who was a complete warrior for her family and for her child, and she worked really hard to try to find the services that her son needed. And the reason why we called it The Slow Disappearance of Matthew is because she witnessed his death, in some ways, over many years. She saw the decline. She saw what was happening for him.

And, you know, our ability to go in with our expertise in terms of system review and analysis and investigation really helped to bring some answers for her around what was happening. And it's not just unique to that report, but that is something that we're able to do when we do have the scope and the mandate to go in and look at some of these deaths.

So there are a lot of lessons typically to be learned when a young person dies by suicide or homicide, in

particular; sometimes also, the accidental deaths, depending on the circumstances of the death and their life beforehand. But there are a lot of lessons that right now are being lost to us as, you know, as advocates for young people, as Manitobans, as surviving family members, because there are some deaths, as I mentioned, that continue to fall out of scope where there would be really incredibly important lessons to learn.

Many suicides, if not all of them, are preventable if resources are provided early and robustly enough. And so for those young people whose deaths fall outside of scope for the Manitoba advocate, we're unable to learn those lessons. We're unable to share that information with the family and their, you know, surviving siblings and friends. We're unable to talk to the public or to the government about what might have made a difference for that young person.

And those are incredibly hard, you know, when we get those notifications and we see that a suicide or a homicide has fallen out of scope for us because it does feel like lessons are lost.

**Ms. Lathlin:** Thank you. I appreciate how you've explained how important these proclamations will be.

So, with that, have you been given a timeline as to when both sections will be proclaimed?

**Ms. Krone:** I know in the past there have been some timelines discussed. I don't have current information on that, though.

**Ms. Lathlin:** Once again, with those important provisions within the sections, have you been given any explanation on why these delays are happening?

**Ms. Krone:** Well, I mean, maybe this is a better question for the minister to answer, but I—you know, she referenced in her remarks earlier, you know, obviously, we know that the government is focused on the pending changes under the federal child-welfare legislation. We know that that is a concern for the government and so that is—that's one of the pieces that we've been advised, you know, in reference to the outstanding pieces of legislation.

**Ms. Lathlin:** So I'll ask the minister the question: if she can explain when she intends to proclaim these two sections. Thank you. *[interjection]*

**Mr. Chairperson:** Minister Squires.

**Ms. Squires:** I do want to take a moment to thank the advocate for the reports that she has prepared and, through her, I would like to extend my gratitude on

behalf of the government to all the families who participated in either the compilation of the reports or the reviews. And we know that there are very sensitive and delicate matters at hand, and for these families to be able to understand and comprehend the greater good that would come from sharing their experiences is quite tremendous. And so I know that we will continue to benefit from the reviews and the testimonies that the advocate's office has compiled, so just want to extend gratitude for that.

As everyone knows, we did proclaim that new act in March of 2018 and are working to determine when the remaining review of both services that are subject to the advocate's investigations mandate would be proclaimed.

I am working again with my new colleague, Minister Gordon. There'll be a lot of—that new department will be part of this intergovernmental department that is taking that whole-of-government approach to ensuring that we have an all-of-government response to the recommendations made by the advocate as well as working with the affected departments and government-funded agencies to identify the most effective and efficient way to report serious injuries of children and youth involved in the CFS mental health, addictions and youth justice services.

So we certainly will be moving forward with this very important work and I do look forward to providing an update to the children's advocate's office as well to the members of the Legislative Assembly in the very near future.

**Ms. Lathlin:** Another question for the minister.

Exactly a year ago, the former minister of Families attributed the delay in proclamation to the implementation of Bill C-92.

\* (14:10)

Could the minister please explain the progress her government has made on the implementation of Bill C-92? *[interjection]*

**Mr. Chairperson:** Ms. Squires.

**Ms. Squires:** Sorry, the virtual format is challenging. I'll say that.

We are working very closely with community in terms of how the federal legislation will impact community and the services that we all provide, whether it be directly from the community, the provincial government or the federal government, and

what the new legislation—the implementation of the new legislation, how it will affect the way we deliver services in the province of Manitoba, as well as how community can expect to receive services.

And so that work is definitely ongoing. I can share that my colleague, the previous minister, had written to the federal government on more than one occasion—on multiple occasions, quite frankly—to get information directly from the federal government on the aspects of the implementation. And we're still awaiting a response.

So, unfortunately, that work and that information that we need to proceed with that work has been delayed, but I can commit to this committee that I will be reaching out to my federal colleagues and counterparts to ensure that we get information as soon as possible so that we can continue to provide that information and service delivery to community in the best possible manner.

**Ms. Lathlin:** I would like to ask questions about our children in care.

I was hoping the advocate could indulge me for a moment to answer a few questions about concerns. Basically, the Pallister government has changed how they count number of children in care. They're now relying on a count through the CFIS *[phonetic]* system.

We know that system is not comprehensive; it's not reliable for counting for that purpose. The Auditor General has already explained in comprehensive detail the limitations of that system. Can the advocate provide her understanding of the limitations of the CFIS *[phonetic]* system?

**Ms. Krone:** Well, I would say that, you know, CFIS *[phonetic]* has been the focus of a lot of analysis and discussion over many years in our province, including during the Phoenix Sinclair inquiry and other places.

I guess to summarize—I'm sure the advocate would have far more information about this than I'm about to provide—but what I would say is that, you know, one of the concerns that I know the advocate has spoken to in the past is the inconsistency across the system and the need to ensure that documentation and record keeping is done in a consistent way and that it follows really careful quality assurance processes.

And the quality assurance piece is actually something that the advocate spoke to in that recent report about recommendations compliance that I



referenced before, called Are They Listening? that she released in the fall. And so, you know, the pieces around quality assurance within the CFS system is an ongoing concern of the advocate and, as I mentioned, is something that she wrote about recently.

So I would say that that's probably one of her chief concerns with CFIS [*phonetic*], but also just, you know, record keeping in general.

And I know that there are—you know, there are different—within the four CFS authorities, there are different practices and policies and—you know, developed in cultural methods and in different things like that. And so I think the advocate's position would be that, regardless of what the details of the system are, all—at the end of the day, ultimately, we need to ensure that service is consistent for families and for young people and that workers feel that they have the information that they need to provide the best quality of services to the families that they're supporting.

**Ms. Lathlin:** On page 73 of the government's annual report, it says that there are 9,849 children in the care of Child and Family Services as of March 31st, 2020. Yet, that very same annual report says that the average monthly number of children in care who are in receipt of EIA health services is 12,182. That's a difference of nearly 2,300 children. Can the advocate give me her understanding of why there might be thousands more children in care in receipt of EIA health benefits than the government counts as children in care?

**Ms. Krone:** I'm not sure I completely understand your question, but you're talking, I think, about two different counts, and so I'm not sure why those numbers would be different.

**Ms. Lathlin:** It's notable that, by the government's own disclosure, the average monthly number of children in care who are in receipt [*inaudible*] at all over the last three years. That could be seen on page 48 of the Families annual report.

In fact, in 2017 and 2018, while the minister claimed at the time that there were—that there had been a 3.6 per cent decrease, the department now reports that the average monthly number of children in care in receipt of health services increased that year by 2.2 per cent.

I would like to ask the advocate if she can explain her understanding of this contradictory information, or perhaps the minister can answer that.

**Ms. Krone:** I don't have the report in front of me that you're referencing so it's difficult for me to respond to that, so that would be my response to that. Sorry.

**Ms. Lathlin:** Can the minister answer the question? And I can repeat it as well.

Thank you.

**Ms. Squires:** I'm happy to say this to my colleague, that I'm more than eager to go through the Families report at our next available opportunity in Estimates or in the House. There are several opportunities for us to go through that Families annual report in greater detail, and I'm not sure if the Standing Committee is—on Legislative Affairs is the appropriate place to go through that Families annual report.

But just very quickly in regards to her question about the counting, I can say, indeed, there are 8 per cent fewer children in care on March 31st of 2020 than there were on March 31st of 2017, and that our government has certainly—is working with all the agencies and authorities involved in ensuring that we provide the best service possible for children in care and to reunify children as quickly and as efficiently as possible wherever it is safe to do so.

Our government—this department has also ended that long-standing practice of the birth alerts, so we do believe in working with families and with community and the advocate's office on ensuring the best outcomes for children and youth in the province of Manitoba.

\* (14:20)

And in regards to the record-keeping initiative that the critic has raised here, I certainly do want to extend an open opportunity to the advocate's office to continue that dialogue on the record keeping. We know that CFIS [*phonetic*] has provided long-standing challenges going back decades in the province, and so—wanting to ensure that we are on the same page. So I look forward to continued dialogue with the advocate's office on that.

And in specifics to Ms. Lathlin's question, we know that there are certain times where children can be reunified with their families and still be receiving benefits and services. And so I don't know if it's a fair comparison, the two lines that she's comparing. But at any rate, I certainly look forward to going line by line through the annual report during the Estimates process with the critic.

**Mrs. Bernadette Smith (Point Douglas):** First of all, I just want to congratulate Daphne and Ms. Krone and

all of their staff for all of the tremendous work that they do on behalf of our children in Manitoba. You know, certainly, it's important work.

And also I just want to echo, you know, the criticalness of proclaiming those two parts of legislation, and hopefully, you know, Minister Squires hears the advocate and how important that is to include in the work that they're doing so that we can get a full picture of what's happening in Manitoba so that we can ensure that that doesn't continue to happen, that we can put things in place to, you know, address why there's serious 'injurejury'-injuries in—for children or deaths. So, again.

And then I just want to congratulate Minister Squires and welcome her to her new portfolio and really thank her for the invitation to work collaboratively together. I look forward to that, and I really hope that for the sake of Manitobans that we can, you know, accomplish some work that'll really, you know, help around mental health, addictions and certainly addressing the high numbers of kids in care and helping to, you know, shift that to putting supports in place to keep families together.

So my question's for the advocate. In your special report, *Are They Listening?*, you highlighted significant compliance issues among several government departments and within specific systems; specifically, Health, Seniors and Active Living had the lowest compliance rate, with only 25 per cent seeing action.

On page 85 of your annual report, of the 28 recommendations you made in 2019-20, 46 per cent are related to mental health and addictions and 57 per cent of them were made to Manitoba Health, Seniors and Active Living.

Because of history and noncompliance, are you concerned about the new department taking action on your recommendations?

**Ms. Krone:** I hope I understand your question. So I would say that, you know, the Health department is obviously one of the larger departments in the province, and so there's a lot of young people by way of mental health and addictions services that require supports from that department. And so—and, you know, it has always been kind of an area of key focus for the advocate to look at what's happening for young people.

So with the, you know, with the announcement, the recent announcement about the stand-alone

department, as I mentioned in my opening remarks, we are excited to see what that's going to look like.

You know, stigma is something that continues to be a factor for young people seeking mental health supports, for families seeking treatment for young people and their families and for all of us to really, you know, understand what it is that young people need when their behaviours or their actions are crying out for help. And so we're excited to see, you know, what the plan is going to be. Obviously, it's a bit of a blank canvas for those of us on the outside right now, but, you know, the stand-alone mental health and wellness department is something that theoretically we're quite excited about.

We hope that it's not going to be seen as a secondary department in terms of, you know, brain health versus body health. That's obviously something that we don't—we're not anticipating is going to be an issue because of the signal of dedicating specific resources to mental health and wellness. But that is obviously a key focus of a lot of the work that we have done to date and continue to do. And we're not alone on that.

Obviously, you know, all the members here are aware of the massive VIRGO report that happened in 2018—the one that was released. We've built a number of our reports on top of what Dr. Rush and some of the folks in his team talked to Manitobans about and talked to the government about. And so, you know, we're trying to build on some of that existing infrastructure when we talk about what's needed for young people.

And so it continues to be an area of significant focus for us and we're going to continue, you know, with a pretty serious gaze towards what's happening with respect to mental health and addictions in the province.

As I mentioned in my remarks also, it's an area—the reason why we're focusing so much on it is because we keep on hearing about it from young people and their families. We keep on hearing about young people who are struggling to find supports that work for them. You know, the story of Matthew was a story about a young person who really needed intensive, long-term mental health and addiction support and it just doesn't exist here in our province. And so there are some young people whose needs are so significant that they outpace what we currently have here in Manitoba.

And that's—you know, that's where the work of the advocate can be really helpful, because we have the ability to not just look at what's happening specifically for Manitoba children and youth, but we can also, you know, tap into our national network. And we look internationally at best practices and we bring that information back to Manitoba and look at it through a Manitoba lens about what would work well here in our province for young people.

And so those are the nature of some of the recommendations that you reference, you know, on page 85 and in that larger report that the advocate released in the fall, and it will continue to be a significant focus for us moving forward.

**Mr. Chairperson:** Mrs. Smith. Mrs. Smith, I think you're on mute.

**Mrs. Smith:** Sorry about that. Technical difficulties with, of course, being remote.

So first of all, I just want to commend, again, the advocacy office for doing the youth listening tour and for really talking about nothing about us without us, because we can't possibly understand the scope of the work that needs to be done without actually hearing from the people who actually need the support. So I just want to put that out there.

This question's for the advocate. Are you aware that the new Minister for Mental Health, Wellness and Recovery is not, in fact, responsible for The Mental Health Act?

**Ms. Krone:** Thank you very much for that question.

I—because it's a pretty fresh announcement—for us, anyways—I haven't had an opportunity to read the—you know, the mandate letter or anything like that, so I'm not aware of most of the parameters of that new role.

**Mrs. Smith:** This question's for the minister. Would you agree that there's implications to the new minister to adequately exercising changes to mental health services for youth, since they are not responsible for the act?

**Ms. Squires:** Again, I want to echo my earlier comments that I'm looking forward to working with my colleague, MLA Smith, and I know that she has extensive experience in working on—for the betterment of children and youth in the province of Manitoba. And so I look forward to that ongoing dialogue that I'm certain that we will have. But, again, there's tremendous respect for the work that she has done in the past.

I'm also very eager to begin my work with Minister Gordon in her capacity as the Minister of Mental Health, Wellness and Recovery, and know that she certainly does have a huge focus in front of her in supporting Manitobans in achieving mental health outcomes and achieving recovery from addictions and other afflictions.

\* (14:30)

And so I certainly am eager to be taking on, again, a whole-of-government approach. Also, working with Minister Stefanson in her role as Minister of Health. I do believe that there's a lot of interface.

Our government has certainly always viewed some of these larger complex societal problems with a whole-of-government lens. That is why we struck the Gender-Based Violence Committee of Cabinet back in 2018, knowing that it would take all of government's approach to addressing some of the very, very complex problems stemming from gender-based violence.

And, really, I see the collaborative relationship that is already forming between this new department and other areas of government that have been—has—have more long-standing practices as being integral and also being as co-operative. So I do look forward to working with my colleagues on a whole-of-government approach towards achieving, you know, wellness and recovery for Manitobans.

**Mrs. Smith:** My question's to the child's advocate: Do you feel the government has provided adequate mental health supports and services for kids throughout the pandemic, and even before?

And the advocate also spoke about looking at other provinces and our province being behind in providing the proper resources and supports to children. Can the advocate speak about what supports she thinks should be implemented here in Manitoba and what our government can be doing now to address the increased mental health supports that are needed for children?

**Mr. Chairperson:** Thank you to the member for the question. I just want to remind members that perhaps we could keep this within the scope of the committee, which is to address the actual Manitoba advocate's report, but I will address Ms. Krone.

**Ms. Krone:** So, in terms of, you know, what we're seeing with respect to mental health and what services are still required, you know, you, yourself, Ms. Smith, spoke about some of the summary pieces around the

recommendations that are listed on page 85 and 86 of the annual report. And some of those pieces, although they're just, you know, brief statements of what the actual recommendation was—the more fulsome information is, you know, in some of those other reports like the Are They Listening? report and, you know, upcoming analyses as well.

But mental health, as I've said a few times today, continues to be a chief focus for our office because it is so incredibly important for young people and, you know, the—many of the themes of the advocate's work over the last, you know, few years, since the new legislation was proclaimed, have really been around the issue of access, so, access to mental health.

We know that that is really different between young people who happen to be located in urban centres versus young people who are located in rural and remote communities around our province, and that is something that she spoke about at great length in that report that I referenced before called Stop Giving Me a Number and Start Giving Me a Person.

And that title is actually—it comes from our Youth Ambassador Advisory Squad. It's a quote from one of our members who has a lot of lived experience within the youth mental health system, and what that young person said to us is that, you know, every time they went in for treatment or in for stabilization to a facility and they came out, they were handed a piece of paper with a number—with phone numbers and services that they should contact to kind of put together their plan for afterwards. And that young person talked to us about how ineffective that was because they were struggling so hard.

And so they said to us, you know, just stop giving me a number and start giving me a person. Like, start connecting me with people who can actually help me navigate.

And so one of the things that the advocate wrote about in her reports during this fiscal that we're talking about today are pieces around access to mental health and addiction services. So the advocate made a formal recommendation about what she calls system navigators.

So really connecting young people who are either in need of mental health support services or who are maybe emerging from in-patient or more intensive services, connecting them with somebody who knows the system really well, because the mental health and addictions system in Manitoba is quite widespread, it's kind of spread out, it's delivered by lots of different

organizations and groups and departments, and so it makes it really difficult for young people in particular, and also by extension their families, to know who to call when there's certain things going on, who to call when they don't qualify for a particular service, where else they can get help and support.

And so, access, knowledgeable navigation, you know, the issue around youth hubs, is something that the minister referenced before. It's a really promising model that, again, the advocate wrote about and made recommendations with respect to youth hubs expanding that piece throughout the province, because there is some evidence that when we collect services together in a central location, that it does address some of those access issues that young people are experiencing, not just here in Manitoba. I mean, it's, you know, it's not exclusive to our province; it's something that many systems across the country and other places also experience challenges and barriers to young people being able to access those services.

So anything that we can do to break down those barriers, whether it's, you know, not handing a young person a sheet of phone numbers and stuff to call, but actually connecting them with someone that can help them; collecting services into a single location so that, you know, when they—when a young person goes there, they can be connected to the appropriate service that's going to meet their needs. All of those sorts of pieces speak to the issue of access, and that is an ongoing focus for our office and for the advocate's reports.

**Mrs. Smith:** Just a question. I was on the website earlier, and I noticed that out of 10 investigators that there were three vacant positions. Have those been posted and, if so—or, if not, when are they going to be posted?

**Ms. Krone:** So, we have a couple of open competitions right now that we're working with our HR department on. There's a couple of—we've had a couple of new investigators come in on terms to cover off some of the work.

We've just recently been able to post and hire a systemic advocacy position that's going to be sort of a broad look at some of those larger systemic issues that come to our attention all the time. We've had—we're also currently in the process of hiring another researcher for our team. We have some coverage competitions that are happening for our advocacy services as well.

So, there's sort of, you know, there's pieces kind of all across the office in multiple departments that we're working on right now.

**Ms. Lathlin:** Can the minister please tell us what's going on with the monies allocated for respite services for children in care that are no longer happening because of COVID? What's happening with the funding there?

**Mr. Chairperson:** I again remind members that if we could keep questioning—the line of questioning to the scope of the child—Manitoba advocate's report, that would be much appreciated.

**Ms. Squires:** I certainly do welcome an opportunity to discuss this issue with my colleague offline at our earliest convenience. I will just note, for the committee's information, that respite is essential and that while it is—it has been impacted to a certain degree because of the global pandemic, it is classified as essential and continues. But I'll be more than happy to take this offline with MLA Lathlin.

**Ms. Lathlin:** Your annual report indicates a significant increase in ongoing advocacy services. Could you explain if there are specific areas of service that are reoccurring in your calls and advocacy work?

\* (14:40)

**Ms. Krone:** Thank you for that question.

I would encourage you to take a look at page 46 of the annual report. At that—in that section, one of the things that the advocate has done is summarize some of the trends in advocacy cases that are coming to our attention. And so you see that we've broken it down there into the different domain areas.

So, at the top of the list, of course, is child welfare and adoptions, which remains one of our busier areas of the office. So, as you can see there, case planning, long-term case and placement planning and placement concerns and placement breakdown—those are what we assessed as the top concerns that are coming to our attention through the advocacy services program with respect to child welfare. But, as you can see on that page there, a similar analysis has been broken down for the different domain areas that—where the advocate has responsibility.

And then the other thing that I would—would I—I would add to that is, if you flip over the page, on page 47, that's the piece where we broke down, you know, the children's rights that are being impacted by some of the issues that are coming to our attention. And, as members of the committee know, you know—

I know the advocate has spoken at length about this in previous presentations—is that, really, you know, children's rights to equitable, meaningful, robust services are really at the core of everything that we do when we're responding to calls.

And so we wanted to offer Manitobans some insight into some of the children's rights issues that we are seeing being impacted by some of the concerns that are coming to our attention. And so that's the graph on page 47.

**Ms. Lathlin:** I wanted to ask a question about one of the reports titled The Slow Disappearance of Matthew.

And—recommendation No. 2 in The Slow Disappearance of Matthew is similar to that of a special report from 2018, which suggested the development of a province-wide policy to limit, reduce and phase out suspensions.

My question is: Are you satisfied with the government's responses thus far to this recommendation and what remains outstanding?

**Ms. Krone:** So what I would say is that because this report was released in February of 2020, our team is gearing up to release a more comprehensive examination of the government responses to the recommendations in this particular report.

The Are They Listening? report that some of us have spoken about earlier today is the one for the first four reports. What we have set up by way of process—or, what the advocate has established as her process is that we provide the government once we've issued recommendations—once the advocate has released a report and issued recommendations in a formal capacity, we provide about a six-month turnaround for the government to be able to meet, figure out how they're going to respond to it, and then we start doing some more of our analysis work.

So while the recommendation that you referenced—No. 2 in the Matthew report—is in sort of that, you know, we haven't released a formal report analyzing the government's response to that. You are correct in saying that it is one that we have spoken about before.

And so what I would indicate is that, you know, the piece around suspensions and expulsions is an issue that we detailed to some extent and degree in the report on the life of Tina Fontaine, because that was an issue that was also present in her life. You know, there are—we have a lot of concerns around

suspending and expelling students in these particular stories, because some of the circumstances that are coming to our attention are where there isn't necessarily imminent—a threat to other individuals and it's more about a behavioural issue.

And so one of the things that the advocate did that we do reference in our annual report is that we made a formal submission to the government's education commission, whose report obviously has been delayed with respect to the public release of it. But we did speak at quite—at some length with that commission. We met with them. They also actually met with their Youth Ambassador Advisory Squad directly to get some recommendations from youth about what should happen within the education system, and then we provided a formal written submission to that commission as well.

So, you know, along with other Manitobans, we are looking forward to seeing what the result of that—the commission's report is going to look like when it is released to the public.

**Ms. Lathlin:** My question is for the minister, if she has done a work on this very important initiative.

Thank you.

**Mr. Chairperson:** Thank the member again. Perhaps, again, this might be a question that's out of scope. Could the member ask a question as it pertains to the report?

Thank you.

**Ms. Lathlin:** Okay, my—

**Mr. Chairperson:** Ms. Lathlin, I believe you're on mute.

**Ms. Lathlin:** My rebuttal is that I am asking questions in relation to the annual report.

**Ms. Squires:** I would just ask that the question, then, be restated, please.

**Mr. Chairperson:** Ms. Lathlin.

Ms. Lathlin, I believe you're on mute.

**Ms. Lathlin:** My question is in relation to this conversation, is the recommendation No. 2, one of the reports in discussion today, The Slow Disappearance of Matthew. The recommendation was to suggest the development of a province-wide policy to limit, reduce and phase out suspensions. Would like to ask the minister on the work that has been done to proceed that.

**Ms. Squires:** I appreciate my colleague for clarifying her question, and we do know that expulsion and suspension is a very broad topic and touches upon, perhaps not many people, but in a very, very profound way, and needs to be approached very diligently. And I'm very pleased to know that the children's advocate has made a report to that commission on K to 12 and also have had the youth adviser—their youth advisory committee provide comments and feedback into that commission on K-to-12 education in the province of Manitoba.

And I certainly look forward to contributing on a whole-of-government approach to improving outcomes for youth and children as it pertains to mental health and wellness in the province of Manitoba, as well as looking forward to working collaboratively with the Minister of Education (Mr. Cullen) on this very important work that he is undertaking.

**Mrs. Smith:** I just want to let the minister know that there's also a report that's been done by the Winnipeg Indigenous Executive Circle, called State of Equity in Education Report. And that was done in September 2020, and it talks about the very thing that Ms. Lathlin was bringing up around suspensions and ensuring equity in education and that kids are, you know, kept in school and that they're, you know, reflected so that they feel a sense of belonging and mastery and all of those things.

But my question is to the advocate. I just want to understand. Earlier she spoke about kids in care. After 12 months, they're no longer allowed to investigate serious incidents? Was I hearing that correctly? So, a kid, after they've transitioned out of care, 12 months later—12 months and one day, there's a serious incident, that the child's advocate is not, in the scope of their work, allowed to investigate.

\* (14:50)

**Ms. Krone:** Thank you for that question. So, as you know, the legislation is pretty specific when it comes to what's in scope, what's out of scope.

The 12-month window is something that was—is part of The Advocate for Children and Youth Act and it speaks to—you know, in the case of serious injuries. Part of the piece that's still in development, from my understanding, is regulations around reporting.

And so, you know, we could certainly have some further conversation about this after this meeting to talk about some of the pieces around the serious injury, but with respect to, for example, the child

death investigations, the criteria are very clear—that it's 12 months preceding the date of death of the child.

And so that is a—it's a very specific window, and so 12 months plus a day, you know, to your example, would technically be out of scope with respect to the child death investigations.

**Mrs. Smith:** The other two parts of the proclamation—if they were brought in, would that widen the scope so that if that child—after 12 months and a day, you know, there was a serious injury—would that broaden the scope of your work to be able to look into that?

Because we know that kids in care often, you know, have higher rates of suicide; they end up going missing; they end up being murdered; they're in the—incarcerated at higher rates. So all of those things play a role, and, you know, being out of care for 12 months doesn't mean that those things and, you know, the lasting effects of being away from your family, changed that.

So, if those two are proclaimed, would that broaden that scope, is my question to the advocate.

**Ms. Krone:** Miigwech for that.

I—what I would say is that the pieces around the serious injury legislation—as I mentioned, the regulations have not been written yet, and the regulations with respect to the reporting in. And so the reason why I distinguish that is because, you know, when regulations are written, you know, at this point, like, I don't know if they would be specific to the date of the injury or the date on which the service that's reporting into the advocate became aware of the injury.

So, those would be important things to clarify within the regulations that are to be written.

**Mrs. Smith:** If Mr. Gerrard is in the room, I'd like to turn it over to him.

**Mr. Chairperson:** Do we have leave to turn the question over to Mr. Gerrard? *[Agreed]*

**Hon. Jon Gerrard (River Heights):** Thank you, and thank you to the opposition caucus.

I have a question which I'd like to bring up. In the report of the Manitoba Advocate for Children and Youth, there's a section here on where there are service gaps, and clearly, it's important to identify areas where there may be service gaps.

And I want to refer to a report that was done in Pennsylvania which showed that children who were in

foster care, when they were tested before they entered care, had rather high levels of lead in their blood such that nearly 90 per cent of these children had levels of lead which were above or equal to 10 micrograms per decilitre. And that's a—quite a high level—five micrograms per decilitre is now considered high, so that's double.

And what—one of the things that was interesting was that the children who are taken into care, when they were compared with their siblings, the children taken into care had much higher levels of lead than their siblings. And we know that lead exposure, lead toxicity, can be associated with a variety of behavioural problems. We know that, sometimes, this can be a factor which is passed on from the mother because the lead exposure in the mother, the lead crosses the fetal barrier.

And in another article by a Dr. Hauptman, who's from Boston Children's Hospital, done with people from Harvard Medical School, they write that their aim is to develop a multipronged approach—

**Mr. Chairperson:** Just want to say that, you know, this question is a bit off topic. If we could find a way to bring it back to the scope of the report, that would be appreciated. Thank you.

And just a quick reminder, we are approaching the time of 3 o'clock, about 5 minutes to. To continue on past that we'd have to get leave from the committee.

So with that, back over to Dr. Gerrard.

**Mr. Gerrard:** This is relevant because of the association of lead with many of the issues which may bring children into care and because what we're looking at in the report is children coming into care. And where there are gaps in the service and what is being suggested is that there be a much better assessment of blood lead levels, and where the children who are taken into care have higher blood lead levels, that these be addressed in a variety of ways to bring the lead levels down. And I just wondered whether you would comment on this and whether there's any work on this in Manitoba.

**Ms. Krone:** That is a fascinating question. Unfortunately, I'm going to probably disappoint you in saying that I don't know much about lead levels for children coming into the system. But I think that what I could comment on is that I think it's really important, you know, for the full scope of understanding in terms of why young people are being identified by that system, by the CFS system, by the justice system, by

whichever system they happen to be interacting with, I think that we need to always assume that there are probably more things going on than what's on the surface and that it's really important to ensure that, you know, service providers that have the responsibility to provide services that are holistic and that respond to all of the needs of a young person need to be shored up.

And so if that, you know, as you're speaking to, like, additional medical pieces, I'm not sure, but, you know, I would probably defer back to you as a medical professional. So I'm sorry I can't be more helpful with respect to lead levels in blood.

**Mr. Chairperson:** With the time almost 3 o'clock, I just want to put it back to—what's the will of the committee at this point?

**Mr. Gerrard:** Could we sit for 10 more minutes?

**Mr. Chairperson:** Is that—it's been suggested we sit for 10 more minutes. Is that the will of the committee? *[Agreed]*

**Mr. Gerrard:** So I think the concern here is in part that there are parts of Winnipeg where a report at the end of last year done by Intrinsic showed that—predicted, based on various models that they were looking at, that there will be high levels of lead in children.

And so this is particularly relevant to the circumstance of Winnipeg where we have had lead smelters, where we have had scrap metal recycling and machines to look after that. And I would just ask that this is something that you take a careful look at and see if there is a gap here that should be addressed.

I will send you separately, and I can send to other members, a series of recommendations that are being made, were being made, just in the last couple of years from Boston Children's Hospital and Harvard Medical School.

I want to come back to the situation of the COVID pandemic. Are there concerns about the care of children in the COVID pandemic? Are you seeing an increased number of reports of problems—you've been following suicide, for example—and other concerns. Where are the gaps now because of the COVID pandemic?

\* (15:00)

**Ms. Krone:** Thanks for that question, Dr. Gerrard.

I would say that, you know, it's still, as you can appreciate, pretty early on in terms of the broader

analysis of the impact of the pandemic and—but when we look at what's happening for young people in our province, the concerns that are being reported to us, the things that we're seeing when we're working with young people, working with service providers and, you know, investigating deaths or conducting our research—that there's no denying that the pandemic is having significant impacts on young people.

We spoke before in this committee around the table around the impact on mental health. Addictions is also something that is certainly top of mind for us right now with respect specifically to the pandemic and the effects of social isolation, you know, feeling cut off from normal routines, cut off from support systems and in—people in our lives. Young people are really feeling the effects of that.

I spoke also before about the, you know, remote learning, in-class suspensions, you know, learning from home. All the—like, the whole transition that happened for young people in the spring and is happening right now for certain age grades.

And so, you know, that isolation piece can't really be understated—how incredibly impactful that can be for young people whose entire existence really focuses right now on social connections, identity through those social connections, figuring out who they are for their lifespan.

You know, disruptions and interruptions in that natural, normal process is absolutely going to have some pretty significant impacts.

You know, the impact of the pandemic is something that—it's on our radar to do probably a more comprehensive examination at some point, but right now, you know, we're kind of in the process of gathering anecdotal information and more comprehensive systemic statistics, and data is probably going to be forthcoming from our office.

**Mr. Gerrard:** I'd like to explore with you two particular areas.

I was talking with people on Manitoba school boards earlier today, and they were saying that they were having trouble with some of the students having trouble finding them.

And some of those students were children in Child and Family Services care, were sometimes were moved from one house to another.

And so I would like some help and understanding and comment from you on, No. 1, what measures have been taken to try and make sure that children



who are in care are going to be able to up-to-date—or, keep up-to-date with their education because they're a group of children who have been deprived, and they need that education more than everybody else in some ways. And, historically, too many of them have not been completing high school.

And the second part I'd like to ask comment on is the concern about addictions, because I'm hearing an increased concern over addictions, perhaps early on in the pandemic with meth and now more and more with opioids. And I wonder if you're seeing concerns brought to your office with addictions and how—you know, where are we in terms of being able to provide the adequate support.

**Ms. Krone:** So to the first point that you were making around contact with children with the disruptions in the education system, it's an issue that the advocate has been concerned about since the suspension of in-class learning earlier the—last spring.

It's something that she raised with the Department of Education, and we continue to, you know, to watch that carefully because we were also concerned, along, you know, along many—along with many community organizations and educators and schools themselves—concerned about some of those young people for whom coming to a school, coming to a classroom, being connected to their teacher is a really critical aspect of their safety net, and sometimes it can also be that the place where they feel the safest in their day is coming to school, and where their teacher is a beacon of safety and hope for them.

And so when there are interruptions to those systems, that can be incredibly difficult, impactful and risky for some of those kids. And so we—you know, we are definitely concerned about the abilities of those young people to stay connected with some of those safety nets. It is something that, you know, I'm glad to hear that, you know, you're also concerned about that. It's something that, you know, we'd be happy to chat about later in addition to, you know, kind of the time constraint piece right now.

But that is absolutely something that the advocate remains concerned about is, you know, because we know that in the province, not everybody has the ability to connect remotely through their classroom or, you know, through the digital means that are available to many of us, you know, in other circumstances.

With respect to your comments about addictions, I would say that that is also something that the

pandemic is amplifying and exasperating in the lives of a lot of young people here.

So, whether that is calls coming in, cases that are coming to our attention with respect to ongoing addiction issues where young people are seeking treatment and seeking supports, you know, all of that stuff is being impacted by the abilities of young people and their families to access services in ways that meet the needs of young people.

One of the things that the advocate has spoken about and written extensively about is this piece around ensuring that services, you know, with respect to mental health and addiction in particular, that those services need to be available when kids are ready for them.

And what we continue to see in Manitoba and, again, is written about extensively in the Advocate's reports, are issues around wait lists and wait times sometimes becoming the significant barrier to young people actually receiving the treatment that they require and to which they're entitled.

So, you know, there's—there are examples where young people identify themselves; they come to our office and they say, okay, I'm ready. And there just isn't a service that's available for them. And that, again, is incredibly hard, you know, as advocates for young people, and it's also hard for the service providers who just say, we actually just don't have a bed right now.

So it's one of the reasons why the advocate has made specific recommendations to that effect that those services need to be expanded and it's an area that we continue to monitor in terms of compliance on those recommendations through our act and an area that we'll continue to watch moving forward.

**Mr. Gerrard:** One very quick question: Do we know if children who are in care are more likely than other children to have problems with addictions and, if so, what measures need to be taken to help prevent addictions?

**Ms. Krone:** I don't have the information in front of me in terms of whether children in care are more or less likely to have issues with addictions.

You know, certainly, young people that are living with addictions are not uncommonly also those young people who are being identified by various support systems, whether that's CFS, whether that's Justice, or

mental health and addictions, obviously, because of the impacts of their addiction.

And so whether that's more prevalent in CFS, I wouldn't be able to speak to. I mean that's certainly something that, you know, again, we could maybe have some follow-up conversations around, but, yes, that's how I would respond, yes.

**An Honourable Member:** Your mic's not on.

**Mr. Chairperson:** Try that again. The hour being 3:09 p.m., I will now put the question on the report.

I now invite all virtual committee members to unmute themselves so that their responses to the questions can be heard.

As a reminder to all, the member of this—the members of this committee are myself, Mr. Johnston, Mr. Lagassé, Ms. Lathlin, Mrs. Smith (Point Douglas), and Honourable Ms. Squires.

Annual Report of the Manitoba Advocate for Children and Youth for the fiscal year ending March 31st, 2020—pass.

This concludes the business before us.

The hour being 3:10 p.m., what is the will of the committee?

**Some Honourable Members:** Rise.

**Mr. Chairperson:** Committee rise.

**COMMITTEE ROSE AT:** 3:10 p.m.

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