Safe Guarding the Other 23 Hours: Legislation of Child and Youth Care Practice in Ontario
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Our Service Settings

Child Welfare, Youth Criminal Justice, Child and Family Mental Health, Paediatric/Adeolescent Health and, Mental Health Care, Specialized Education, Youth Shelters, Mental Health and Substance Abuse, Residential Treatment.
Safe Guarding the Other 23 Hours: Legislation of Child and Youth Care Practice in Ontario

The History of Child and Youth Care Practice

Child and Youth Care Practitioners work with vulnerable children and youth in a range of Ontario services. It is estimated that there are 10,000 CYC Practitioners, also known as Child and Youth Workers (C.Y.W), Child Care Workers (C.C.W) or Child and Youth Counsellors (C.Y.C), working each day in Ontario supporting children, youth and their families (Ministry of Training, Colleges and Universities Ontario, 2014). They practice in a variety of service settings including: child welfare, youth criminal justice, child and family mental health, paediatric/adolescent health and mental health care, specialized education, youth shelters and mental health and substance abuse residential treatment. CYC Practitioners apply a developmental-ecological perspective to their work with children, youth and their families (Anglin, 1999; Mattingly, Stuart, & VanderVen, 2001). They position their practice from the standpoint of the child and they work within the child’s day-to-day environments (Bettelheim & Emmy, 1949; Redl & Wineman, 1952; Stuart & Martin, 2014). Practitioners emphasize the interaction between the child and their physical and social environments, including the macro cultural and political settings (Trieschman, Whittaker & Brendtro, 1969). The CYC practitioner engages with the child in their life events, in attempts to stabilize crisis and promote optimal development and functioning.

The changing titles of the practitioner reflect how the role of a child-focused practitioner has evolved over the history of time. Ontario has led the way and began its first formal training program in Child and Youth Care through Thistletown Regional Centre in 1957 (Gilmour-Barrett & Pratt, 1977). Traditionally known as Child Care Workers, in 1957 the title changed to reduce the confusion between those who work in early childhood education. CYCs support children and youth with emotional, social and behavioural difficulties and the title Child and Youth Worker was used to signify the difference. As the field of Child and Youth Care developed, the scope of practice evolved, and several variations of the title were developed and embraced by employers and educators. Child and Youth Care Practitioner (CYCP), has emerged as the title most inclusive of the various levels of CYC specific education (certificate, diploma, degree, graduate degree, and PHD) and the wide variety of settings that the CYCPs practice with children and youth and their families.

The Specialized Skill Set of the CYCP

Child and Youth Care in Ontario has expanded its professional competencies and strengthened its skills inventory and is considered the gold standard for working with the highest risk children and youth. As stated previously, CYCPs are found in a variety of settings...
Our Specialized Skill Set

Assessing Risk and Developmental Needs of Vulnerable Children and Families; Designing and Implementing Therapeutic Intervention into the Child’s Environment; Implementing Crisis Intervention and Safety Planning with Children Youth and their Families; Employing Systems Level Intervention Through Direct Care, Supervision, Consultation, Training and Advocacy; Developing Therapeutic relationships in Challenging Contexts; Applying Group and Systems Theories in Milieu Work; Fostering Resilience and Applying a Strength Based Approach to Assessment and Intervention.
where-in youth’s lives unfold. Child and Youth Care Practitioners possess a specialized knowledge base and a unique skill set. The specialized skill set of a CYC Practitioner includes: assessing risk and developmental needs of vulnerable children and families; designing and implementing therapeutic intervention into the child’s environment; implementing crisis intervention and safety planning with children youth and their families; employing systems level intervention through direct care, supervision, consultation, training and advocacy; developing therapeutic relationships in challenging contexts; applying group and systems theories in milieu work; fostering resilience and applying a strength based approach to assessment and intervention. (Mattingly, Stuart, & VanderVen, 2001, Canadian Council of Child and Youth Care Association, n.d.). In a wide variety of settings, CYC Practitioners work collaboratively with multi-disciplinary teams to; ensure the child/families basic needs are met, establish stability and safety, and nurture the optimal development of the child. The practice of Child and Youth Care includes:

“...At the core of all effective child and youth care practice is a focus on the therapeutic relationship; the application of theory and research about human growth and development to promote the optimal physical, psycho emotional development of young people towards a healthy and productive adulthood; and a focus on strengths and assets rather than pathology” (Council of Canadian Child and Youth Care Associations, n.d).

In practical terms, Child and Youth Care Practitioners are specifically trained to focus on building therapeutic relationships with high risk and vulnerable children and youth and their families (Harder et al, 2013). As stated, most often this work is accomplished within the context of difficult and challenging life circumstances. CYCPs support children and youth and their families in high-risk situations and in moments of extreme vulnerability. Subsequently, regulation of the Child and Youth Care profession is in the best interests of children, youth and their families. It will ensure standards of practice by establishing; a regulatory body to promote accountability in highly demanding contexts of practice and required qualifications to act as a safeguard for children by ensuring that caregivers have the highest standards of education including expert knowledge in child development and the care, protection and intervention of high risk children and youth (Campbell, 1990). Educational standards are needed to ensure that qualified workers, who have a specialized skill set, are mobilized to care for the “special needs these young people bring with them into the system of care”(Office of the Provincial Advocate for Children and Youth, 2013), without influencing greater harm.

The Population Served by the CYCP

The population served by CYCPs are those children and youth who struggle to achieve success in typical settings in which children develop to become productive contributing stable members of our communities (i.e. family homes, schools, communities, peer groups). Quite often, these are also the children and youth without the external resources required to meet their basic needs, which exasperates the severity of their issues and risks, and amplifies their need for protection and intervention. School and community based CYCPs intervene by providing early supports to the child and their family, and assisting the child in navigating their life space. Those children requiring protection, or further supports, are served by CYCPs in specialized settings. Some of these services/settings include; emergency placements, hospitalizations, emergency shelters and secure treatment programs. Practitioners also work with young people in conflict with the law, as well as those who experience trauma, chronic illness and disability. CYCPs work with the child to stabilize them within their life space, and to reduce the risk of harm they face directly, or that they may pose to others. It is within these specialized intervention settings, with this high-risk population of children and youth, that the CYCP implements their specialized knowledge and skill set.
We serve children and youth who struggle to achieve success in typical settings in which children develop to become productive contributing stable members of our communities. Quite often, these are also the children and youth without the external resources required to meet their basic needs, which exasperates the severity of their issues and risks, and amplifies their need for protection and intervention.
Children and Youth in Ontario have the right to consistent and high quality care in the services that they receive (UNCRC, 1989). The failure to regulate the Child and Youth Care profession increases the vulnerability of many children and youth in the province. As stated, Child and Youth Care Practitioners support a very vulnerable population: the children, youth and families whose complex needs place them at extremely high risk within communities and within institutional settings. These risks range on a continuum and can pose a risk of future harm toward themselves and others.

Since 1995, there have been twenty six inquests into the deaths of high risk vulnerable young people, who were connected to governmental care systems (child welfare, youth justice, and children’s mental health) and living within residential placements (Office of the Provincial Advocate for Children and Youth, 2010)...

“...Seven of the young people who died in custody had diagnosed mental health issues and/or significant special needs. Half of the young people who died in custody hung themselves. One of the young people who died in custody was denied adequate medical treatment for a medical condition that ultimately led to his death while another was subject to peer violence that caused his death. Six of the Inquests found the cause of death to be homicide by a parent or guardian. Four of the Inquests involved the death of children in a house fire and two involved the Sudden Unexplained Death of an infant. Two young people died of restraints at the hands of staff while residing at residential placements. One young person died of hypothermia after being exposed to the elements and one young person hung herself shortly after her child welfare file was closed, despite requests from the community that she receive services...” (Office of the Provincial Advocate for Children and Youth, 2010)

These residential “placements”, although funded by the government, are not required to employ qualified care providers (trained and formally educated) and yet the children served, are those whom demonstrate difficult to stabilize behavioral and emotional problems that often require intrusive intervention to prevent further harm. Without minimal qualifications, children will remain at risk of child maltreatment from unqualified caregivers providing inadequate care. Specialized knowledge is needed to provide developmentally responsive intervention, in order to reduce risk while ensuring that children’s rights are protected and their voice heard, while the provision of quality care is delivered to ameliorate further instability and crisis, in order to support the child’s optimum development (Snow, 2006).

Suicide is the leading cause of non-accidental death among 10-24 year olds in Canada, and amongst Aboriginal youth, these rates are estimated to occur five to six times higher (Statistics Canada, 2010). Given these alarming statistics, Children’s Mental Health Ontario recommended, in their position statement on Reducing Child and Youth Suicide (2010), that the Government of Ontario identify child and youth suicide as a significant public and mental health concern. As noted, many of the youth being cared for within the governmental care facilities mentioned above, have significant mental health difficulties, which include high risk of suicide. CYCPs serve schools and communities by identifying those at risk and then engaging in primary prevention and secondary and tertiary intervention when necessary. Those identified as contemplating self-harm, are served by CYCPs in treatment programs, outreach teams and crisis services. Ensuring that the care they are receiving has basic standards is best achieved through the
legislation of CYC Practitioners. Regulating the profession would ensure that children and youth, experiencing risk in Ontario, would be safeguarded by educated professionals who are best equipped to provide the quality of care needed to reduce their risk of harm.

Education and Training in CYC

There are twenty-three community colleges across Ontario that offer a CAAT Diploma in Child and Youth Care. In Ontario CYC programs are 6 semesters or 3 years long, although a number of colleges offer “fast-track” options and/or advanced credits for those with related post-secondary education. All programs feature a combination of academic instruction and field placement (on-the-job training with up to 1500 hours of supervised practice in a wide range of practice settings). Annually, Ontario community colleges graduate approximately 1,000 CYC students.

In addition to the educational opportunities provided by community colleges, CYC Practitioners can earn an Honors degree (4 year B.A) in Child and Youth Care. In Ontario, this degree is offered both at Ryerson University and Humber College. Across the country, there are 10 University level BA programs in Child and Youth Care. Child and Youth Care Practitioners can also pursue graduate and doctoral degrees in Child and Youth Care from several recognized Canadian universities such as; The University of Victoria in British Colombia, or Mount Saint Vincent University in Nova Scotia.

Postsecondary academic programs in Child and Youth Care are now seeking to become accredited through the Child and Youth Care Education Accreditation Board. The accreditation process aims to ensure quality education for Child and Youth Care Practitioners through the assessment and review of postsecondary educational programs and the development of standards. The intent of the accreditation process is to ensure that graduate program outcomes will ultimately affect the quality of life and care received by young people who are served by Child and Youth Care Practitioners (Child and Youth Care Educational Accreditation Board of Canada, 2015).

Ministry required training also exists for CYC Practitioners. Given that CYC practice is currently not legislated, those untrained in the prevention of aggressive behaviour and the use of physical restraints, are employed by community agencies caring for high-risk children and youth. As there are untrained individuals in the role of CYCPs, and as there have been at least two inquests into the deaths of young people in care due to the misuse of physical restraints since 1995 (Inquests and Young People in Care: The Involvement of the Advocates Office, 2010), the Ministry of Child and Youth Services has approved six different physical restraint training programs that must be adopted by all community based and institutional programs providing direct care to children in the care of the Ontario government. In addition, as a key recommendation from the province wide review of the Child and Family Services Act, the Ministry of Children and Youth Services, is bringing together a panel of experts to review the province’s child and youth residential service system. This panel includes the Director of the School of Child and Youth Care at Ryerson University (Ministry of Child and Youth Services, 2015).
Ministries Governing Child and Youth Care Practice

A large number of Child and Youth Care Practitioners are hired within organizations that are funded by the Ministry of Child and Youth Services in Ontario. As we work within the life space of the child or youth, the work we do crosses over into other Ministries in which youth have contact, or in which the CYCP is directly employed. CYCPs can also be found working in settings funded by the Ministry of Health and Long Term Care, the Ministry of Education, the Ministry of Community Safety and Correctional Services, the Ministry of Aboriginal Affairs, the Ministry of Community and Social Services, the Ministry of the Attorney General and the Ministry of Training, Colleges and Universities.

CYCPs have the ability to collaborate with service providers in different Ministries in order to provide seamless service and support to the youth using an integrated care model. The benefits of having Child and Youth Care practitioners work across multiple Ministries is that they may be following a child or youth and their progress across sectors, as we work within the life space of the child or youth. Legislation is essential to support collaboration and best practices across Ministries and between professionals to ensure best services are provided. Legislation will support all professions to retain their own professional identity and value the contributions of all team members.

Other Regulated Helping Professions

As you are likely well aware, other helping professionals working with children and youth are regulated and legislated. This is an important aspect of this proposal given that these other helping professions, are not specifically trained to provide intervention with the level of risk and vulnerability that the CYCP faces in their day to day work with children and youth at risk of harming themselves or others in various practice settings. Further, these other helping professionals have not acquired a specialized skill set or knowledge base to work this population, and yet without the legislation of CYC practice, they can be employed to support these children in care.

As defined above, Child and Youth Care Practitioners support change within the life space of children, youth and their families. Within this context of practice, the CYCP is focused upon building therapeutic relationships with high-risk youth, to affect positive growth in the individual, as their life unfolds. As stated, more often than not, this work occurs in the midst of challenging life circumstances (e.g. the child is apprehended and is in foster care, the child has been suspended from school and is now required to attend a specialized classroom, the child has been sexually assaulted and is living on the street, the child identifies as LGBTQ, is rejected from their family home, and is now suicidal, the child is diagnosed with severe mental health disorder and is residing in residential treatment, the child is incarcerated, the child has a substance abuse problem and is residing in a rehabilitative program etc.), that is resulting in a crisis experience.

Both Social Workers/Social Service Workers and Early Childhood Educators could be employed within a CYC practice setting serving high risk and vulnerable children and youth with specified needs. However, their scope of practice does not include a specialized skill set or formal education in this regard. In addition, they are legislated to provide services to different client groups.
For example, Social Workers, or Social Service Workers, work within a wide variety of settings and utilize a broad macro level approach to affecting change with all client populations (i.e. those with disabilities, the aging, survivors of domestic violence, immigrants etc.);

“[Social Work] aims to help people develop their skills and their ability to use their own resources and those of the community to resolve problems. Social work is concerned with individual and personal problems but also with broader social issues such as poverty, unemployment and domestic violence. Human rights and social justice are the philosophical underpinnings of social work practice. The uniqueness of social work practice is in the blend of some particular values, knowledge and skills, including the use of relationship as the basis of all interventions and respect for the client’s choice and involvement (Canadian Association of Social Workers, 2000).”

They are generalist practitioners, not specialized in working specifically with children and youth, and in particular not specialized in working with high-risk unstable children and youth. Although, Social Workers with a graduate and/or PHD degree could focus their research and practice with some of the same clientele as the CYCP, their roles are fundamentally different in that the focus for the CYCP is within the child’s life space as crisis experiences unfold.

Early Childhood Educators, on the other hand, have a specialization in assessing a child’s developmental needs and designing curriculum and programs to help a child’s overall development (i.e. fine and gross motor skill development, social, cognitive and emotional skill development) (College of Early Childhood Educators, n.d). Unlike the CYCP, they are specifically trained and educated to support the overall development of children aged newborn to school aged, within group day care, family care and/or educational settings. ECEs have a defined focus on educational and developmental needs of young children under the age of twelve. As defined in the Code of Ethics and Standards of Practice for the College of Early Childhood Educators;

“Members of the College of Early Childhood Educators (the College) plan and deliver ‘inclusive play-based learning and care programs for both pre-school and school aged children’ (Early Childhood Educators Act, 2007). Members of the College work in a wide variety of settings, including but not limited to regulated early learning and care settings, private home environments, family resource centres, hospitals, public and private schools, colleges and universities, and in government settings (College of Early Childhood Educators, pg. 6)”.

The Ontario Association of Child and Youth Care (OACYC)

Child and Youth Care Practitioners in Ontario have the option to belong to a professional association. The OACYC is the representative association that speaks on behalf of Child and Youth Care Practitioners who provide services to children, youth and their families and who have education and/or experience in Child and Youth Care. The membership categories offered through the OACYC are; full professional certified, full professional, student and organizational.

Full professional certified members are individuals who hold a diploma or degree in Child and Youth Care or have completed the certification process through the Child and Youth Care Certification Board. Full professional membership is the “grandfathering” option for membership for those individuals who hold a related degree or diploma or who have 4000 hours of employment as a Child and Youth Care Practitioner and have a minimum of 600 hours of CYC education in theory through trainings, workshops or post-secondary education. The student category is for individuals who are currently enrolled in a full time or part time Child and Youth Care program at a post-secondary
institution. The organization category is for agencies and organizations such as hospitals and education systems that are signed on as members of the OACYC, these are organizations that typically hire Child and Youth Care practitioners and they want to support the OACYC (OACYC, n.d).

The OACYC’s movement to becoming a legislated profession is based on a desire to align child and youth care practices with existing and evolving requirements of employers and Ministries to ensure that practitioners are accountable to a regulated college and implementing best practices. The goal of seeking legislation is to serve and protect the public interest and to ensure that children are receiving care from qualified professionals who are qualified and screened to care and protect them.

Demonstration of being a self-regulating profession is seen as a prerequisite to becoming a legislated profession. Such legislation indicates that a profession is sanctioned by the government through an act passed in the Ontario legislature. Activities demonstration such include the existence a code of ethics, standards of practice and the promotion of high standards and quality assurance as well as by providing ongoing education, processing memberships and investigating complaints of misconduct (Anglin, 2001). In the past decade, the OACYC has engaged in a number of efforts to prepare for legislation. This includes:

- Educating CYCPs in Ontario about changes to regulated practices in other health care professions in Ontario
- Encouraging membership in the OACYC across Ontario
- Encouraging organizations to adopt hiring and performance review practices that ensure their employees are members of the OACYC
- Adopting the standardized certification process through the Child and Youth Care Certification Board (CYCCB)
- Adopting CYCCB Code of Ethics to be adhered to by members
- Encouraging post-secondary educational settings offering CYC education, to become accredited through the Child and Youth Care Education Accreditation Board (CYCEAB)
- Receiving support from the Office of the Provincial Advocate for Children and Youth
- Meeting with M.P.P, Soo Wong to understand what actions and documentation is required to bring a bill forth to the Legislature of Ontario
- Circulating a petition looking for support to get a Bill passed to regulate the profession of Child and Youth Care in Ontario. Signatures being sought from Child and Youth Care practitioners and residents of Ontario who are in support.

Although Child and Youth Care Practitioners work with some of our most vulnerable children and youth, at present, the profession remains unregulated and children and youth remain at risk of harm. Presently, anyone can claim to be a Child and Youth Care Practitioner, without any credentials or education. Agencies employing them cannot ensure that their staff are adequately knowledgeable to ensure the safety and well being of the vulnerable children in their care. Children at-risk and their families deserve to know that the people sent to help them at their most vulnerable moments are fully qualified CYCPs.

The Ontario Association of Child and Youth Care Practitioners mission, objectives and ethical code form the foundation for creating and maintaining trust with our members. These also provide a process for self-government and addressing concerns in a way that is fair and accountable and is determined by best practice principles.
Presently, anyone can claim to be a Child and Youth Care Practitioner, without any credentials or education. Agencies employing them cannot ensure that their staff are adequately knowledgeable to ensure the safety and well being of the vulnerable children in their care.

The OACYC aims to:

- Represent our members in consultation with government and organizations that serve vulnerable children, youth and their families.
- Support progressive and evidence-informed Child and Youth Care practice by maintaining educational and ongoing professional development standards as criteria for membership.
- Collaborate with colleges and universities and with national and international organizations to enhance recognition of the CYC/CYW unique skills, knowledge, and scope of practice.

The 5 Founding OACYC Objectives include:

1. To promote, improve and maintain an enlightened and progressive standard of care;
2. To encourage active public interest in child care work
3. To work in cooperation with other groups in the promotion of legislation in the interest of the members
4. To further the training and opportunity for specializing
5. To encourage uniform training programs of the highest possible standards.
Benefits of Legislation

In pursuing legislation, the primary aim of the field of CYC is to establish professional standards, some of which include:

- The title/name of the profession (who can call themselves a CYCP)
- Admission to the profession (what education/training is required)
- Standards of professional practice (what constitutes good CYC work, and what does not)
- Determination of appropriate ongoing education and training for members of the profession
- Assurance of the members adherence to the Code of Ethics and standards of practice within Child and Youth Care
- Accountability and Investigation of complaints of misconduct which includes disciplinary action, in the best interest of the public

We believe legislation will support our efforts to:

- Ensure public safety and safe care of high risk and vulnerable youth from a strength base perspective
- Establish Professional recognition by health care providers and other professionals in the social service industry
- Increase levels of accountability for CYC Practitioners in the Province of Ontario
- Promote ethical Child and Youth Care practices (best practices)
- Establish public confidence in Child and Youth Care services
- Ensure commitment and leadership to move the profession forward

Risks of Unlegislated CYC Practice

- Ongoing vulnerability of children and youth in care
- Insufficient accountability processes for employers to hire skilled staff
- Continued employment of unqualified staff
- Inadequate education and skill sets of those employed to serve high risk and vulnerable youth
- Continued high rates of turnover and burnout in high risk settings
- Continued harm to high risk youth in care requiring intrusive intervention
- Continued inquests into the death(s) of children in care
- Escalating risk to communities given the risk some high risk youth pose to others
Conclusion

Although Child and Youth Care Practitioners work with some of our provinces most vulnerable children and youth, at present, our profession remains unregulated. Subsequently, we remain most concerned about the 23 hours of intensive treatment and care, high-risk youth and children are receiving outside of psychotherapy sessions (Treischman, 1969). This care and treatment, when delivered with educated best practices, is known as intentional Child and Youth Care Practice and serves as a safeguard for children and their families. Ontario has long known of the risks associated from unqualified staffing occurring in children’s residential care. In 1987 the government conducted a survey of Staffing Qualifications for services provided under the Child and Family Services Act. This survey resulted in a request for urgent and immediate action on the fact that minimum qualifications existed for Child and Youth Care professionals providing care to high risk and vulnerable youth in Ontario. This concern was echoed in the follow-up report in July 1991. For too many years, our most vulnerable children and youth have been left without the most basic safeguard- a minimum standard of qualification for those who care for them. As stated, since 1995, there have been 26 inquests into the deaths of children in care. We believe legislation would reduce this number drastically.

Subsequently, the OACYC, on behalf of our members, requests that the Ontario Legislature determine the positive impact of legislation on the families of Ontario in this matter and move forward with legislation of the profession. The legislation of Child and Youth Care Practitioners can be a pivotal step in taking action in the work the province has committed to in terms of increasing the quality of Children’s mental health, education, and child protection service provision and the protection of Indigenous peoples rights.
References


