

18-YEAR-OLD WINNIE

Serious Injury

AN INVESTIGATIVE REVIEW

Office of the Child and Youth Advocate, Alberta

February 2026

LEGISLATIVE AUTHORITY

Under my authority and duty as identified in Section 9.1 of the *Child and Youth Advocate Act (CYAA)*, the following is an individual investigative review regarding Winnie. Her circumstances meet the criteria for a **systemic review**. Winnie was receiving Child Intervention through the Transition to Adulthood Program at the time of her serious injury.

Investigative reviews are designed to improve the lives of young people by identifying ways to enhance services and supports, leading to system improvements and better outcomes for young people and their families.

The investigation process includes:

- Examination of critical issues
- Review of documentation and reports
- Review of policy and casework practice
- Personal interviews
- Other factors that may arise for consideration
- Notification and involvement of the young person's family, Band, Delegated First Nation Agency, community or cultural group, relevant Ministry, law enforcement agency, Office of the Chief Medical Examiner, Alberta Health Services, and any other person the Advocate considers appropriate.

In accordance with the *CYAA*, investigative reviews must be non-identifying. Therefore, the names used in these reports are pseudonyms (false names). Great care has been taken to protect their privacy; however, there is no guarantee that interested parties will be unable to identify them. Accordingly, readers and interested parties, including the media, should respect this privacy and not focus on identifying the individuals and locations involved in these matters.

Investigative reviews do not contain findings of legal responsibility or conclusions of law nor replace other processes that may occur, such as investigations or prosecutions under the *Criminal Code* of Canada. The intent of a review is not to find fault with specific individuals but to identify key issues and meaningful findings.

Winnie's experiences were unique, and her injury has left a lasting impression on her and her family's lives. My thoughts are with Winnie, her family, and those who care about Winnie.

Respectfully,

[Original signed by Terri Pelton]

Terri Pelton

Child and Youth Advocate (Alberta)

ABOUT WINNIE AND HER FAMILY

Winnie¹ was 18 years old when she was hospitalized for severe frostbite. Winnie was receiving Child Intervention through the **Transition to Adulthood Program (TAP)**² at the time of her serious injury.

Winnie is a quiet, thoughtful, and kind young First Nation woman. She is creative and enjoys makeup artistry and music. She has a strong connection to her family and culture. Winnie is the youngest of Chester and Viola's three children. Her parents separated when she was seven months old, and Winnie and her brothers lived with Viola. When Winnie was two years old, Chester became the children's primary caregiver.

SUMMARY OF WINNIE'S EXPERIENCES WITH GOVERNMENT SYSTEMS

Winnie from Birth to 16 Years Old

Winnie was born healthy. She was briefly hospitalized and received treatment for jaundice before she was discharged to her parents' care. She received routine medical care for childhood illnesses. Viola struggled with substance use, and when Winnie was two years old, she and her siblings, Bill and Don, were sent to live with their father and had limited contact with their mother. Their paternal grandmother, Goldie, helped Chester care for the children.

In Winnie's first three years, Child Intervention received two reports about emotional injury related to the children's basic needs not being met and inadequate supervision. Each time, Chester entered into an **Enhancement Agreement (EA)**. A support worker helped him connect to community-based services and remained involved after intervention involvement ended. Goldie was a significant support to the family and obtained joint guardianship of the children.

At four years old, Winnie began an early childhood education program. Teachers observed challenges with her behaviours and communication, and she was assessed. Results indicated that she had mild to moderate developmental delays and a severe behavioural disability. She was diagnosed with anxiety and depression. Recommendations included art therapy, physiotherapy, and firm boundaries, which were implemented. She had an Individualized Program Plan (IPP) that included structured classes and routines, and group work for socialization and coping skills.

When Winnie was six years old, Child Intervention received a report about abandonment. Chester had left Winnie and her siblings alone for a few days to use substances. Goldie said that she could only care for Don because of limited space in her home. Winnie and Bill were **apprehended** and briefly placed in a foster home together. After Goldie moved to a bigger home, they were moved there, and a **Supervision Order** was obtained. Chester's housing situation was unstable, and at times, he stayed with Goldie. She went to parenting programming and agreed to supervise visits between Chester and his children. Involvement ended at the conclusion of the order.

Over the next three years, Child Intervention received three reports about risk of physical injury, emotional injury, and neglect. Concerns were related to Chester's substance use when he stayed with Goldie. The first two involvements ended after safety plans were developed that included a support worker and having Goldie's older daughter move into her home. During the third involvement, Goldie and Chester entered into an EA. A support worker helped her establish boundaries with him, which she had challenges maintaining, and he frequently stayed with her. Chester did not receive supports to address his substance use. Although concerns were unresolved, involvement ended at the conclusion of the EA.

Winnie received routine medical care for minor illnesses and injuries. In elementary school, she struggled academically. She did not have an IPP, but was given extra time to complete tasks, and her schoolwork was modified.

When Winnie was 13 years old, Child Intervention received a report about neglect; she was missing, and Goldie wanted help to locate her. The police were notified and discovered that Chester had taken his daughter overnight without informing Goldie. A safety plan was developed that included Goldie not allowing Chester in the home and supervising his visits with his children. Intervention involvement ended.

When Winnie was in Grade 9, teachers noted that she had challenges with reading, writing, and math. She was assessed, and results indicated that she had low intellectual functioning. Recommendations included an IPP for visual supports, simple language, extra time for tests and assignments, assistive technology, and adapted programming, which were implemented. In Grade 10, Winnie's attendance significantly declined; there were limited efforts to address barriers to her attendance. She began to use substances and became involved in high-risk activities.

At 16 years old, Winnie was taken to the hospital twice because of her increasing substance use, declining mental health, and poor physical health. She was treated and discharged to Goldie's care, after which, Winnie was confined under the *Protection of*

1. All names in the report are pseudonyms.
2. Bolded terms are defined in Appendix A.

Children Abusing Drugs Act (PChAD). Discharge recommendations included residential treatment and addiction management, which Winnie refused.

Child Intervention received a report about emotional injury related to Goldie's inability to manage Winnie's high-risk behaviours. She was using substances with her father, not attending school, and was missing for two months. Goldie entered into an EA and then a **Custody Agreement**. When Winnie was located, she was confined in a **secure services** facility. Once discharged, her behaviours escalated, and it was challenging to engage her in planning. She was often placed in specialized group homes or confined in a secure services facility. She frequently left her placement without permission to find her father and used substances.

Winnie from 17 to 18 Years Old

While in group care, Winnie had an IPP that provided modifications to accommodate her skill level; however, she rarely attended school due to her substance use. She was taken to the hospital several times for substance use-related concerns but often left without being treated. Winnie was frequently confined in a secure services facility, and was referred to a substance use dependency program. She was prescribed medication to help with withdrawal symptoms.

When Winnie was 17 years old, she became the subject of a **Permanent Guardianship Order**. She had an assessment to help with her transition to adulthood that found she had low cognitive functioning and would require adult disability services. Applications for Persons with Developmental Disabilities and the Assured Income for the Severely Handicapped were submitted and approved; however, Winnie's whereabouts were often unknown, impacting service delivery.

Winnie spent a significant amount of time with her father, and her high-risk lifestyle continued; she was frequently confined under various legislations. During times she was not confined, she was placed in specialized group homes for added support. She often left her placement without permission, and staff developed safety plans with her that included a naloxone kit and regular check-ins. She was frequently connected to addiction supports but denied her substance use and did not engage in services. When she left for extended periods, she was reported missing.

At 18 years old, Winnie entered into a TAP Agreement under the stability stream and moved in with a family member. Shortly after, she began using substances in the home and was asked to leave. She continued using substances and lived in a tent, often with her father. Winnie went to the hospital several times for substance use-related and respiratory concerns. She frequently left against medical advice before treatment. One month before her 19th birthday, Winnie was seriously injured from severe frostbite and was hospitalized. Ten days later, she left the hospital against medical advice. Winnie continues to receive child intervention services through TAP.

TIMELINE OF SIGNIFICANT EVENTS

Birth to 16 Years Old

• 7 Months Old

- Parents separated
 - Lived with mother

• 2 - 3 Years Old

- Father assumed full-time care
- Child Intervention involved 2 times
 - 2 Enhancement Agreements (EA)
 - Grandmother obtained joint guardianship

• 4 - 5 Years Old

- Early education program
 - Assessed
 - Mild/moderate developmental delay and severe behavioural disability
- Diagnosed with anxiety and depression
- Individualized Program Plan (IPP)

• 6 Years Old

- Child Intervention involvement
 - Apprehended
- Foster care
 - Supervision Order
- Returned to grandmother's care

• 7 - 10 Years Old

- Child Intervention involved 3 times
 - EA

• 13 Years Old

- Child Intervention involvement

• 14 Years Old

- Assessed
 - IPP
- Substance use began

• 16 Years Old

- Admitted to hospital 2 times
- 2 confinements under *Protection of Children Abusing Drugs Act (PChAD)*
- Child Intervention involvement
 - EA
 - Custody Agreement
- Confined in secure services facility

• 17 - 18 Years Old

- Permanent Guardianship Order
- Persons with Developmental Disabilities and Assured Income for the Severely Handicapped
- Confined several times under various legislations
- Specialized group homes
- Several hospital visits for substance use and respiratory concerns

18-year-old Winnie was seriously injured

FINDINGS

Children and Family Services

By the time Winnie was 16 years old, Child Intervention had been involved 8 times because of neglect and emotional injury related to her father's substance use. Each time, his mother, Goldie, said that she would support the children and access community-based services. Safety plans were developed that included Goldie setting boundaries with her son, which she had challenges maintaining, and he often stayed with her. Chester did not receive supports to address his addiction. A robust assessment of the effectiveness of the safety plans, and Goldie's ability to protect Winnie and her siblings from their father's substance use was required.

By 16 years old, Winnie's high-risk behaviours were entrenched, and Goldie did not have the capacity to keep her safe. She entered into a Custody Agreement, and the following year, Winnie became the subject of a Permanent Guardianship Order. She was frequently confined for her safety and, upon discharge, was placed in specialized group homes for additional support, but left soon after. Her unstable circumstances made service delivery challenging. Transition to adulthood planning was timely, and caseworkers collaborated with others supporting Winnie to coordinate services.

Health and Mental Health and Addiction

Winnie received routine medical care for childhood illnesses and injuries. In her adolescence, as her substance use escalated and mental health declined, she was confined under the *Protection of Children Abusing Drugs Act (PChAD)* and had timely assessments that clarified her need and the supports she required. When she presented at the hospital for similar concerns, she was referred to addiction and mental health supports, and met with a psychiatrist who prescribed medication.

Education

Winnie attended an early childhood education program, and when concerns were noted with her development, she was promptly assessed. Recommendations were implemented through Individualized Program Plans. She had several assessments that identified her strengths and challenges and informed educational supports throughout elementary and junior high school.

In high school, Winnie's substance use escalated, and her attendance declined. After she was apprehended, her engagement with her education was low, making implementing supports challenging.

Assisted Living and Social Services

Winnie was approved for adult disability supports; however, her whereabouts were often unknown, which impacted service delivery.

THEMES TO TRACK

1. Assessment

In her first 16 years, a robust assessment of the effectiveness of the safety plans, and Goldie's ability to protect Winnie and her siblings from their father's substance use was required.

2. Collaboration and information sharing

After Winnie was apprehended, transition to adulthood planning was timely and her case team collaborated and coordinated supports in an effort to meet her needs.

3. Substance use and mental health

Winnie was 15 years old when she began using substances, which escalated and negatively impacted her mental health. The Advocate is deeply concerned about the number of young people impacted by substance use.

APPENDIX A: GLOSSARY

Apprehended

The court grants the “Director” as defined in the *Child, Youth and Family Enhancement Act* (CYFEA) temporary custody of the child on reasonable and probable grounds that the child needs intervention in accordance with CYFEA.

Custody Agreement (CA)

A voluntary agreement between guardians and the “Director” as defined in the *Child, Youth and Family Enhancement Act*. Decision-making is shared and the young person is placed outside the home.

Enhancement Agreement (EA)

A voluntary agreement under the *Child, Youth and Family Enhancement Act* to provide services and support to a family or a young person who is 16 or 17 years old. It is intended to address protection concerns while the child remains with a guardian or lives independently.

Permanent Guardianship Order (PGO)

Under this order, the “Director” as defined in the *Child, Youth and Family Enhancement Act* becomes the sole guardian of a child. The order is sought when it is believed that the child cannot be safely returned to their guardian within a specified time frame.

Secure Services

The *Child, Youth and Family Enhancement Act* allows for the confinement of a child for up to 30 days for stabilization and assessment when the child is found to be an immediate danger to themselves or others.

Supervision Order (SO)

A court order granting the “Director” as defined in the *Child, Youth and Family Enhancement Act* mandatory supervision of a young person. Guardians retain custody.

Systemic Review

Under the *Child and Youth Advocate Act*, the Advocate may conduct a public review when a young person is seriously injured or dies while (or within two years of) receiving designated services (*Child, Youth and Family Enhancement Act* intakes, assessments, post-18 supports, was in open or closed custody under the *Youth Criminal Justice Act*, and/or involvement under the *Protection of Sexually Exploited Children Act*) to determine if systemic issues are present.

Transition to Adulthood Program (TAP)

A provincial program that provides financial supports and skill development for young adults transitioning to independence.

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