

19-YEAR-OLD AUDRA

Serious Injury

AN INVESTIGATIVE REVIEW

Office of the Child and Youth Advocate, Alberta

September 2026

LEGISLATIVE AUTHORITY

Under my authority and duty as identified in Section 9(2)(d) of the *Child and Youth Advocate Act (CYAA)*, the following is an individual investigative review regarding Audra. Her circumstances meet the criteria for a **systemic review**. Audra was receiving services 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. Releasing individual reviews ensures that each young person's circumstance is reported in a consistent manner and provides increased transparency and public accountability. I believe that this is in the public interest. I will review and report annually on themes identified across the investigative reviews and include recommendations.

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.

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

Respectfully,

[Original signed by Terri Pelton]

Terri Pelton

Child and Youth Advocate (Alberta)

ABOUT AUDRA AND HER FAMILY

Audra¹ was 19 years old when she was hospitalized with serious injuries after a fall and had surgery.² The police investigated and determined it was accidental. Audra was receiving services through the **Transition to Adulthood Program (TAP)**³ at the time of her serious injury.

Audra is a caring, thoughtful First Nation woman. She loves the outdoors, enjoys makeup artistry, music, and hanging out with her friends. Audra experienced instability in her life, and over time, she began using substances. Her mental health declined, and she became involved in the justice system.

Audra is part of a large blended family. Her parents, Fiona and Keaton, had four children together. They used substances, their relationship was volatile, and they often separated and reconciled. Audra's family was impacted by generational trauma, which affected her parents' ability to care for their children. As Audra grew older, contact with them became increasingly sporadic.

SUMMARY OF AUDRA'S EXPERIENCES WITH GOVERNMENT SYSTEMS

Audra from Birth to 9 Years Old

Audra was born healthy. At six months old, she was taken to the hospital for an upper respiratory infection. She was treated and discharged to her parents' care with medication.

When Audra was seven months old, Child Intervention received a report about emotional injury related to substance use and family violence. Involvement ended after a safety plan was developed with relatives, and the family was connected to community-based parenting and counselling supports.

Over the next year, Child Intervention received four reports about neglect and emotional injury related to Fiona and Keaton's substance use, family violence, and inadequate supervision. Safety plans were developed, and the family continued to access community-based supports. When Audra was 15 months old, Fiona had Duncan.

The following year, Child Intervention received a report about similar concerns. Fiona had given birth to Garrett and she and Keaton agreed to additional supports and entered

into an **Enhancement Agreement (EA)**. Within days, caseworkers received a report that Keaton had assaulted Fiona while intoxicated. He was arrested, and a No Contact Order (NCO) was put in place. Upon his release, Keaton went to stay with friends.

Over the following six months, a support worker helped Fiona develop routines and structure and connected her to community-based parenting, addiction, and childcare supports. Fiona's engagement was poor, and concerns about her substance use persisted. During this time, caseworkers received a report that the police had responded to the family home and found Fiona intoxicated. Audra and her siblings were **apprehended** and placed in a group home in their First Nation. Caseworkers consulted with Fiona's First Nation to determine how best to support the family.

Fiona entered into a **Custody Agreement (CA)** and began addiction treatment, but did not complete it. One month later, Audra and her siblings were returned home under a **Supervision Order (SO)**. It is unknown how concerns were addressed before the children were returned to Fiona's care.

Over the next six months, an in-home support worker helped Fiona access parenting supports and childcare, and her First Nation arranged addiction and counselling services. The NCO was lifted, and Keaton returned home; he completed addiction counselling and family violence programming; however, caseworkers received several reports about ongoing substance use and family violence. Audra and her siblings said that their parents drank alcohol, and at times, they felt afraid. Caseworkers cautioned Fiona and Keaton about their substance use and developed a safety plan that included multiple check-ins and not drinking alcohol in the family home.

When Audra was four years old, police responded to the family home following reports of concerns about the children's safety. Fiona was found intoxicated and did not have appropriate caregivers for her children. Audra and her siblings were apprehended and placed in the same group home in their First Nation. Fiona and Keaton entered into a CA and accessed similar services. Despite these interventions, their circumstances remained unchanged. Soon after, Keaton was arrested for physically assaulting Fiona. An NCO was granted, and they separated. After his release, Keaton's whereabouts were often unknown.

Audra received routine medical care during this time. She began Kindergarten in her First Nation, and teachers noted that she had speech difficulties. She was provided speech-language therapy.

Fiona told caseworkers that she wanted her children to be placed with relatives. She

1. All names in the report are pseudonyms.

2. Details about Audra's serious injury are not provided to protect her privacy.

3. Bolded terms are defined in Appendix A.

arranged for family members to provide care, and Audra and her siblings were moved there. Fiona completed addiction treatment, and her children were returned home under an EA. Caseworkers and the First Nation provided addiction, therapeutic, childcare, and in-home supports. Involvement concluded at the end of the EA.

Over the next two years, Child Intervention received six reports about emotional injury and neglect related to Fiona's substance use and inappropriate caregivers. During the first four involvements, a safety plan was developed, which Fiona continued to follow, and she was connected with a community-based support worker. The other two involvements concluded after it was determined that although Fiona used substances, she had appropriate childcare, continued to engage with addiction services, worked with a family support worker, and accessed community-based resources.

Audra was an average student in elementary school. Teachers noted that she had difficulty with math, and she received one-to-one support. As concerns arose about her attendance, she and her family were connected to the school social worker.

When Audra was eight years old, Child Intervention received three reports about neglect and emotional injury related to a lack of supervision and family violence. Involvements ended after safety planning or cautioning the family about the need for appropriate supervision and the persistent nature of the concerns. During this time, Fiona and Keaton often reconciled and separated. Audra and her family moved multiple times between different cities and shelters.

Before Audra turned 10 years old, Child Intervention received a report about emotional injury. An altercation occurred between Fiona and Keaton, and he was arrested. Caseworkers developed a safety plan with Fiona and connected her with community-based resources. Involvement ended after Fiona and her children moved to their First Nation to be closer to family and supports.

Audra 10 to 19 Years Old

Audra's education was impacted by her unstable circumstances. Between Grades 4 and 5, she changed schools 4 times, which coincided with her family's frequent moves. Concerns were noted with her reading, and she took part in a literacy group and received additional support to read independently.

When Audra was 10 years old, Child Intervention received a report about emotional injury and neglect related to Fiona's declining mental health, substance use, and housing instability. A safety plan was developed, and Fiona entered the first of four consecutive EAs; Keaton's whereabouts were unknown. A support worker helped her access housing and therapeutic services, while Audra and her siblings began working with a youth worker. Fiona had difficulty maintaining her gains and arranged for her children to be cared for

by relatives in her First Nation. Audra had regular visits with her siblings and took part in cultural activities and ceremonies. She frequently moved between her aunt Kathy's and her grandmother Dolly's homes because Kathy felt overwhelmed caring for several children.

Fiona's circumstances remained unchanged, and when Audra was 11 years old, she and her siblings became the subjects of a **Temporary Guardianship Order**. Caseworkers located Keaton, who said that he had relapsed and had housing instability. He was connected to addiction and therapeutic services, but his engagement was poor.

Visits were arranged between Fiona and Keaton, and their children, but they often did not attend. Audra began to have physical and emotional outbursts towards her siblings. Her therapist indicated that she was impacted by the inconsistent contact with her parents and recommended structured visitation, which was implemented.

Dolly told caseworkers that she did not have the capacity to meet Audra's escalating needs and asked that she be moved. Audra was placed with another relative, Sally, under kinship care. While there, she took part in cultural ceremonies, sports, and received routine medical care for minor illnesses and injuries.

Audra went to junior high school in her First Nation. In Grade 8, she had a specialized assessment that identified moderate cognitive difficulties. Recommendations included an Individualized Program Plan (IPP), classroom accommodations, consistent routines at home and school, participation in sports and cultural activities, a youth mentor, and monitoring her development, which were implemented.

Fiona and Keaton's circumstances did not improve, and at 13 years old, Audra and her siblings became the subjects of a **Permanent Guardianship Order**. Her therapist observed improvements in her well-being, related to placement stability and involvement in recreational activities, and recommended that therapy conclude. Soon after, Duncan was placed in the home.

Over the next year, Audra began leaving home without permission and hanging out with a negative peer group. Sally told caseworkers that she had difficulty managing the children's needs. Despite additional support, Sally asked that the children be moved. Audra was placed with Esme in a nearby city under kinship care while Duncan was placed with a relative.

Audra struggled with the transition, and at 15 years old, she began to use substances and leave her placement without permission. A safety plan was developed with her and Esme, and Audra was connected to a therapist, a youth worker, and she was seen by a specialized pediatrician. Audra shared her substance use and mental health issues. She was encouraged to take medication for her anxiety, but declined. Over time, she voiced

that she was happy living with Esme and felt safe.

In high school, Audra's attendance declined. She shared that she was bullied at school and was connected to a liaison worker. Her schoolwork was reduced, but her attendance did not improve, and she was transitioned to an outreach school.

That same year, Audra and a friend were charged with physical assault. She was sentenced to one year of probation, with an NCO, and she was required to attend counselling. Over the next six months, her substance use escalated, and she began missing probation appointments. Caseworkers and her probation officer met often to discuss planning and connected her with an addiction counsellor.

Audra returned to a community school for Grade 11. Her engagement was poor, and efforts by educators to increase it were unsuccessful. Her case team enrolled her in a specialized school program, but Audra refused to attend. During this time, Audra entered into a relationship with Jack. Caseworkers became concerned about their relationship dynamics and encouraged Audra to speak with her therapist and developed a safety plan with her.

At 16 years old, Audra had a psychological assessment to support her transition to adulthood planning. Results indicated that she had a history of instability, mental health challenges, and signs of trauma and anxiety. Recommendations emphasized the importance of stable housing, ongoing Child Intervention support, and prioritizing her mental health. It was also noted that although she did not have diminished cognitive functioning, she might qualify for the Assured Income for the Severely Handicapped (AISH) because of her trauma history. However, Audra refused adult disability services.

Esme said that she felt overwhelmed by Audra's escalating behaviours and substance use. Audra acknowledged making poor choices and associating with high-risk individuals, and began youth treatment. While there, she went to school and took part in group and individual therapy. She shared that she was learning new ways to cope with her emotions. Upon discharge, she was provided with a relapse prevention plan and encouraged to continue therapy. After returning home, Audra missed several addiction appointments and declined further services.

Audra's probation officer connected her to additional addiction and mental health supports; however, she refused services. When Audra turned 18 years old, she entered into a TAP Agreement under the stability stream. Her case plan included securing housing, developing budgeting skills, accessing mental health services, and connecting with community-based resources. Audra began living with her brothers and was supported in maintaining her relationships with her youth worker, siblings, and her First Nation community.

Audra told her youth worker and caseworkers about her conflictual relationship with her partner, Jack. Her case team continued to safety plan with her and encouraged her

to attend counselling, but she refused. Soon after, Jack was charged with physically assaulting Audra, and an NCO was granted. Audra continued to meet with him, and her case team developed additional safety plans to address her risk.

When Audra was 19 years old, she was hospitalized with serious injuries from a fall. The police investigated and determined that it was accidental. She underwent several surgeries and had extensive rehabilitation, including physiotherapy and occupational therapy. One month later, she was discharged and continues to receive services under TAP.

TIMELINE OF SIGNIFICANT EVENTS

Birth to 9 Years Old	10 to 19 Years Old
• Birth – 4 Years Old · Child Intervention involved 6 times · Enhancement Agreement (EA) · Apprehended · Group care · Custody Agreement (CA) · Supervision Order · Apprehended · CA · Group care · Kinship care · EA • 5 – 9 Years Old · Additional school supports · Child Intervention involved 10 times	• 10 – 13 years old · 4 school moves · Child Intervention involvement · EA · Placed with relatives · Temporary Guardianship Order · Kinship care · Therapeutic and youth work support · Began junior high school · Assessed · Diagnosed with moderate cognitive disabilities · Permanent Guardianship Order • 14 – 17 Years Old · Kinship care · Several school moves · Substance use began · Entered into a relationship · Youth worker · Youth justice involvement · Probation Order · Treatment · Assessed to determine eligibility for adult disability services • 18 – 19 Years Old · Transition to Adulthood Program Agreement · Independent living 19-year-old Audra was seriously injured

FINDINGS

Children and Family Services

During Audra's early years, she experienced multiple adverse childhood experiences that impacted her stability and development. Child Intervention became involved with her and her family when she was seven months old because of neglect and emotional injury. Concerns were related to her parents' substance use, family violence, and inappropriate caregivers. Although supports were arranged and safety plans developed, the concerns persisted, and the family's circumstances remained relatively unchanged. Audra would have benefited from robust assessments that addressed her level of instability, her parents' ability to meet her developmental, emotional, and safety needs, and the effectiveness of community-based supports and safety plans during critical stages of her early childhood development. Since this time, the Ministry of Children and Family Services has strengthened practice support related to Assessments.

When Audra was 10 years old, Child Intervention became involved for similar concerns, and she subsequently became the subject of a Permanent Guardianship Order. In her adolescence, she began to use substances, and her behaviours escalated to include criminal justice involvement. Caseworkers collaborated with her caregivers, school and justice staff to arrange counselling, addiction, and youth work supports. Case planning was culturally relevant, adjusted to meet her evolving needs, and supported her move to the Transition to Adulthood Program. However, Audra's engagement was inconsistent, and concerns about her safety, relationships, and substance use persisted, making implementing supports challenging.

Health and Mental Health and Addiction

In her first 10 years, Audra received routine medical care for minor illnesses and injuries. When she was 15 years old, she began using substances that impacted her mental health. As her substance use escalated, she received therapeutic and addiction treatment services. When she was discharged from programming, addiction and therapeutic services were offered, but her engagement was inconsistent, and efforts to encourage her to access supports were unsuccessful.

Education

In elementary school, Audra received timely speech and language services and supports, including literacy interventions, reading programs, and support from the school social worker. Despite multiple school moves, educational supports remained in place to address her learning needs.

In junior high school, Audra struggled academically and received a timely assessment that identified cognitive and learning needs. She was supported through an Individualized Program Plan, structured routines, and cultural supports. When she faced challenges with attendance and bullying, education staff collaborated with caseworkers, and additional supports were implemented, including reduced class sizes, connection to a liaison worker, and transitions to an alternative program; however, efforts by educators to engage her were unsuccessful.

Justice

At 15 years old, Audra became involved with the justice system and received timely and appropriate support, including counselling, and addiction and mental health referrals. Probation officers collaborated with caseworkers on planning.

THEMES TO TRACK

1. Assessment

In her early years, Audra required robust assessments that addressed her level of instability, her parents' ability to meet her developmental, emotional, and safety needs, and the effectiveness of community-based supports and safety plans during critical stages of her development.

2. Case planning

Once Audra became the subject of a PGO, she received collaborative, timely, and culturally appropriate services from Child Intervention and Justice to meet her evolving needs.

3. Toxic drug supply

Audra began using substances at 15 years old and it escalated into adulthood. The Advocate remains deeply concerned about the number of young people impacted by substance use.

4. Family violence

Audra was impacted by family violence as a child and had violence in her own relationships.

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.

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.

Temporary Guardianship Order (TGO)

The court grants the “Director” as defined in the *Child, Youth and Family Enhancement Act* custody and guardianship of a child for a specific period. The child is in the care of Child Intervention Services, and guardianship is shared with the parent/ legal guardian.

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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