



11-YEAR-OLD ANIKA

AN INVESTIGATIVE REVIEW

Office of the Child and Youth Advocate, Alberta
September 2026

LEGISLATIVE AUTHORITY

Under my authority and duty as identified in Section 9.1 of the *Child and Youth Advocate Act (CYAA)*, the following is an individual investigative review regarding Anika. Her circumstances meet the criteria for a **mandatory review**. Anika and her family were receiving Child Intervention through a Temporary Guardianship Order at the time of her passing.

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.

Anika's experiences were unique, and she left a lasting impression on those who knew and loved her. My heartfelt condolences go out to her family and those who cared about Anika.

Respectfully,

[Original signed by Terri Pelton]

Terri Pelton

Child and Youth Advocate (Alberta)

ABOUT ANIKA AND HER FAMILY

Anika¹ was 11 years old when she was found deceased in her placement. The Office of the Chief Medical Examiner continues to investigate her death. Anika was receiving Child Intervention through a **Temporary Guardianship Order (TGO)**² at the time of her passing.

Anika was a bright girl who always smiled and was a strong advocate for herself. She was the youngest of Viren and Seema's children and had two sisters, Myra and Veda, with whom she had a close bond. Prior to Anika's birth, the police and Child Intervention were involved with her family because of family violence and her parents' alcohol use.

SUMMARY OF ANIKA'S EXPERIENCES WITH GOVERNMENT SYSTEMS

Anika from Birth to 7 Years Old

Anika was born premature and was moved to the neonatal intensive care unit for medical and feeding support. After five weeks, she was discharged to her parents' care and continued to be followed by a community-based feeding clinic. During her childhood, she received routine medical care for minor illnesses and injuries.

In Anika's first five years, Child Intervention received four reports; concerns included her parents' alcohol use, physical injury, and neglect related to a lack of food. The family was referred to community-based supports, and once, a safety plan was developed before involvement ended.

During the fourth involvement, Viren and Seema entered into an **Enhancement Agreement (EA)** regarding Anika and Veda; Myra was not included as she was over 18 years old. The family developed a safety network and a safety plan to address the concerns. They were connected to a community-based support worker, Reema, who remained involved after intervention involvement ended.

When Anika was three years old, she was assessed with a learning delay and began attending early intervention programming in a classroom with a high teacher-to-student ratio. She had an Individualized Program Plan (IPP) that included fidget toys, auditory cues, and transition time when routines changed. By Kindergarten, she transitioned to a community school and no longer required IPP supports.

When Anika was seven years old, Child Intervention received two reports about emotional injury related to family violence and her parents' alcohol use. Seema obtained an

Emergency Protection Order (EPO) and said that she had support from relatives and Reema. Viren left the family home, and although it was noted that little had changed in the family's circumstances, intervention involvement ended. Soon afterward, he returned and began living in the basement.

Over the next three years, the police responded to the home numerous times because of family violence, Seema and Viren's alcohol use, and her declining physical and mental health. Often, they transported the children or made arrangements for their grandparents to pick them up when Seema was too intoxicated to care for them. Once, Viren was arrested for breaching the EPO. He was charged and began working with a probation officer and justice navigator.

Anika attended the same school up to Grade 5. Her poor attendance was concerning, and a school social worker supported the family to address it.

Anika from 8 to 11 Years Old

At the conclusion of the EPO, Viren and Seema reconciled. Over the next year, Child Intervention received three reports about similar concerns. Anika's family was still connected to Reema and had relatives who could provide support; however, her parents' circumstances remained unchanged. During the third involvement, they entered into an EA. The police continued to respond to the home because of Viren and Seema's alcohol use and family violence, and when Anika was nine years old, she and Veda were **apprehended**. They were briefly placed with their aunt and uncle, who had challenges following the visitation plan, and they were moved to a kinship home with other relatives.

Reema and a family support worker helped Viren and Seema develop strategies and connect with resources to address the concerns. Viren and Seema, their support network, and professionals supporting the family met regularly to review planning and adjust supports as the family's needs changed. Caseworkers also met with Anika and Veda regularly to keep them informed and involved in planning. Visits with the children were arranged to maintain family and cultural connections, but Seema and Viren often cancelled. Nine-year-old Anika shared with caseworkers that she felt no one cared about her because of her lack of contact with her family. In consultation with her parents and case team, it was determined that visits would be confirmed before informing Anika about them.

A few months later, Anika was taken to the hospital twice because she was nauseous and vomiting. During the first visit, she was diagnosed with a bladder infection, treated, and discharged to her caregivers with a prescription for medication. The second time, she was diagnosed with appendicitis and had surgery. Her parents were updated on her prognosis, and they attended her medical appointments.

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

Although Viren and Seema made some gains, they had difficulty maintaining them. Anika and Veda disclosed that they felt uncomfortable during visits when their parents were intoxicated. Caseworkers discussed the concerns with Viren and Seema, who denied them, and alcohol testing was arranged, but they did not follow through. When Anika was 10 years old, her caregivers said they were overwhelmed by the children's needs and family dynamics and could no longer provide care. Anika and Veda were moved to a foster home.

Seema worked with an addiction counsellor, who joined the service team along with Viren's justice supports. After two negative alcohol tests, visits increased. Within weeks, police responded to the home for alcohol use and family violence. Caseworkers applied for a TGO, which was granted with Viren and Seema's consent. They continued to use alcohol, and violence in their relationship often required a police response.

Anika and Veda were moved to kinship care with a family friend, Amal. Anika's new placement was outside her school's catchment area, so caseworkers arranged for transportation to limit disruptions to her education.

When Anika was 11 years old, she was taken to the doctor because of concerns about her lack of eating and sleep. Recommendations included adjusting her meals and monitoring her sleep. It was noted that she ate more when her mother cooked, so caseworkers developed a plan with Seema for her to bring lunch to school for Anika.

Amal told caseworkers that she had challenges meeting Veda's needs and that their relationship was conflictual. Veda asked for a new placement and was moved. Anika said that it hurt her not to see her family. Despite efforts by the case team to encourage visits, her parents had challenges following through.

Eleven-year-old Anika was picked up from school because she was not feeling well. She went to sleep that evening, and the following morning, she was found deceased. The Office of the Chief Medical Examiner continues to investigate her death. Anika is deeply missed by those who knew and loved her.

TIMELINE OF SIGNIFICANT EVENTS

Birth to 11 Years Old

• Birth – 7 Years Old

- Born premature
 - Neonatal intensive care unit
- Ongoing police involvement for family violence and parents' alcohol use
- Child Intervention involved 6 times
 - Safety plan
 - Community-based resources
 - Enhancement Agreements (EA)
- Early intervention programming
 - Individualized Program Plan
- Community school for Kindergarten

• 8 – 11 Years Old

- Child Intervention involved 3 times
 - EA
 - Apprehended
 - 3 kinship care placements
 - Foster care
 - Temporary Guardianship Order
- Appendicitis surgery
- Sister moved to different placement

11-year-old Anika passed away

FINDINGS

Children and Family Services

Child Intervention was involved with Anika and her family several times because of her parents' alcohol use and family violence. At times, Viren and Seema received support through agreements and community-based services; however, their circumstances continued to be unstable, and interventions remained unchanged. Anika and her siblings would have benefited from an earlier assessment of their parents' capacity to provide care, the effectiveness of community-based supports, and the impact of the chronic instability on their well-being.

After Anika was apprehended, caseworkers collaborated with other professionals supporting the family to inform planning. The case team met regularly with Viren and Seema and their extended family members, and supports were adapted to meet their evolving needs. Efforts were made to lessen the impact of inconsistent visitation on Anika and her sister, and caseworkers involved them in planning.

Health

Anika was born prematurely and spent five weeks in the hospital before she was discharged to her parents' care. She received community-based health services to address feeding concerns. Anika received routine medical care and, at nine years old, had surgery for appendicitis and received appropriate follow-up care. Two years later, concerns were noted about her eating and sleep. Recommendations included adjusting her meals and monitoring her sleep, which were implemented, and she did not require further medical intervention.

Education

When Anika was three years old, developmental concerns were noted, and she was promptly assessed. She began early intervention programming and received appropriate supports through Individualized Program Plans (IPP). By Kindergarten, she was meeting her developmental milestones, transitioned to a community school, and did not require further IPP supports. In elementary school, Anika's attendance became a concern; she was supported by a school social worker, and her attendance improved.

Justice

Over a span of two years, beginning when Anika was seven years old, the police responded numerous times because of family violence. Often, they transported the children or made arrangements for their grandparents to pick them up when Seema was too intoxicated to care for them. Seema applied for an Emergency Protection Order and once, Viren was arrested for breaching it. Despite the persistent nature of the concerns, interventions remained relatively unchanged. Anika and her sister would have benefited from an assessment of the impact of family violence on their well-being to inform police interventions.

THEMES TO TRACK

1. Assessment

In her first nine years, Anika and her sister required an earlier Child Intervention assessment of their parents' capacity to provide care, the effectiveness of community-based supports, and the impact of the chronic instability on their well-being.

Anika and her sister required an assessment of the impact of family violence on their well-being to inform police interventions.

2. Collaboration and information sharing

After Anika was apprehended, her case team collaborated and shared information to inform planning.

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.

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.

Mandatory Review

Under the *Child and Youth Advocate Act*, the Advocate must conduct a Mandatory Review when a young person dies who had an agreement or order under the *Child, Youth and Family Enhancement Act* at the time of their death. A public report must be released within one year of being notified of the young person’s death.

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.

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