21-YEAR-OLD ZURI

Serious Injury

AN INVESTIGATIVE REVIEW



Office of the Child and Youth Advocate, Alberta

October 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 Zuri. Her circumstances meet the criteria for a **systemic review**. Zuri was receiving Child Intervention through the Transition to Adulthood Program at the time of her 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.

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

Respectfully,

[Original signed by Terri Pelton]

Terri Pelton
Child and Youth Advocate (Alberta)

ABOUT ZURI AND HER FAMILY

Zuri[1] was 21 years old when she was hospitalized for severe frostbite. Zuri was receiving Child Intervention through the **Transition to Adulthood Program** (**TAP**)[2] at the time of her serious injury.

Zuri is an intelligent, thoughtful, and kind young woman who enjoys cooking, playing sports, and listening to music. She can advocate for herself and has a strong sense of faith. Zuri is the youngest of Chris and Sara's two children. They adopted her and her brother, Taye, when Zuri was 18 months old.

SUMMARY OF ZURI'S EXPERIENCES WITH GOVERNMENT SYSTEMS

Zuri from Birth to 17 Years Old

Zuri was born in another country, and little is known about her circumstances while she was there. When she was 18 months old, Zuri and her brother moved to Alberta after they were adopted.

Zuri received routine medical care after coming to Canada. When she was four years old, her parents noted concerns with her impulsive behaviours, and ability to follow directions and manage her emotions. Zuri began specialized early childhood programming. She was assessed and diagnosed with regulatory and attachment disorders. When she began Kindergarten, she had an Individualized Program Plan (IPP) that included an educational assistant. Her IPP ended in Grade 2 after her behaviours improved. Zuri was an average student throughout elementary school and did not require additional supports.

When Zuri was six years old, she began working with a pediatric psychiatrist and was diagnosed with attention-deficit/hyperactivity disorder and oppositional defiant disorder. She was prescribed medication and began therapy.

When Zuri was 11 years old, Child Intervention received a report about neglect related to her escalating behaviours. She had difficulty following direction, had physical and emotional outbursts, and lacked social boundaries. During this time, Zuri began leaving home without permission. School staff did not have concerns, and Chris and Sara were supported to apply for Family Support for Children with Disabilities (FSCD) before involvement ended. Five months later, the family was approved for respite care and community aide support through FSCD. Although the family used the community aide, they struggled to find respite caregivers who could meet Zuri's needs and rarely used it.

Within months, Zuri was admitted to an inpatient mental health program for three weeks because of her escalating physical and emotional outbursts. She was diagnosed with disinhibited social engagement disorder and a learning disorder, and her medications were adjusted. Recommendations included individual and family therapy, an IPP, and modifications in school, which were implemented; however, Chris and Sara declined family therapy.

Two weeks after she was discharged, 12-year-old Zuri was taken to the hospital following physical outbursts. Sara and Chris said that they did not have the capacity to meet her escalating needs and asked that she be admitted, but she did not meet the threshold. Child Intervention received a report about these concerns. It was determined that involvement would end as the family was connected to community-based supports and FSCD was exploring an out-of-home placement.

Within days, Child Intervention received a report about neglect related to abandonment. Sara and Chris were unwilling to have Zuri return home due to her behavioural challenges, and they felt they had exhausted all options. They entered into a Custody Agreement (CA), and Zuri was placed in a specialized group home. Her supports continued, and she had regular visits with her family.

Zuri settled into her placement. She began Grade 8 at a new school and joined the sports teams. Teachers noted that although she was a capable student, her instability impacted her grades; her IPP remained in place.

When Zuri was 12 years old, she began to leave her placement and use substances. At the conclusion of the CA, Zuri was returned home. It was determined that there was a strong safety plan in place, and FSCD continued to explore placement options. Intervention involvement ended. Four months later, Child Intervention received a report about similar concerns. Zuri was charged with causing a disturbance and received alternative measures, which she completed. Sara and Chris said that they were overwhelmed with the level of care their daughter required. Involvement ended after FSCD arranged an out-of-home placement.

Zuri was placed with a mentor, Amara, and remained there for five years. She had several support staff, but frequently left her placement, used substances, and had criminal justice involvement. She met with her probation officer regularly, and safety plans were developed that included Zuri carrying a naloxone kit and checking in with placement staff. Several referrals were made to addiction and mental health supports, which she often refused.

Child Intervention received two reports about abandonment and neglect. Concerns were related to Zuri's medical needs not being met and Sara and Chris not having the capacity to meet their daughter's needs. It was determined that the family had appropriate supports; intervention involvement ended.

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

Over the next year, Zuri's substance use escalated. She was confined under the *Protection of Children Abusing Drugs Act* (*PChAD*); recommendations included residential treatment and addiction support, which she refused. At school, Zuri had accommodations, but her attendance was poor because of her unstable circumstances. She often went to the hospital for substance use or mental health-related concerns, but frequently left before being treated or declined supports.

When Zuri was 15 years old, Child Intervention received a report about her being sexually exploited. She denied the concerns and refused voluntary services. Shortly after, she was admitted to the hospital for six weeks because of her declining mental health. She was assessed and diagnosed with substance use disorder. Although school was available, Zuri did not attend. She accessed addiction support while hospitalized but refused to follow discharge recommendations that included counselling, addiction treatment, and intensive psychotherapy. Caseworkers, probation officers, and healthcare professionals met to discuss planning. It was determined that Zuri had appropriate FSCD and community-based supports. Intervention involvement ended.

One week after her discharge from the hospital, Child Intervention received a report about neglect; concerns were related to Zuri's substance use and her physical and emotional outbursts in her FSCD placement. Sara and Chris said that she could not return home and applied for a *PChAD* Order. As FSCD remained involved, it was determined that Zuri and her family had adequate support, and involvement ended.

Although Zuri was seldom at her placement, she was told that she could return whenever she wanted, and she maintained some contact with Amara. When Zuri was 16 years old, Child Intervention received a report about neglect; she had been assaulted by her boyfriend and seldom stayed at her FSCD placement. Sara and Chris refused services, so Zuri entered into an **Enhancement Agreement with Youth**. She was connected to a support worker to develop life skills and explore employment and financial resources. She was given information about post-18 supports and adult disability services, but had limited engagement with her case team.

Zuri's circumstances continued to deteriorate; she had increased involvement with the justice system and frequently went to the hospital for substance use and mental health-related concerns. She often left before being treated or refused supports. Zuri's FSCD placement ended because of her lack of engagement with services. However, Amara and the staff there told her that she could reach out to them whenever she wanted.

Zuri from 18 to 21 Years Old

At 18 years old, Zuri entered into a **Support and Financial Assistance Agreement** (**SFAA**). She did not engage with her case team; there was little improvement in her circumstances, and her whereabouts were often unknown. The following year, her SFAA ended because she frequently refused services. Four months later, Zuri asked Child Intervention for support. She was incarcerated and wanted help to find housing and connect to services after her release. She entered into a TAP Agreement under the stability stream and was supported by a youth navigator.

After Zuri was released, she secured housing. Within months, she was evicted because of substance use and disrupting other tenants. Amara continued to support Zuri, and her case team tried to arrange services but were unsuccessful.

Nineteen-year-old Zuri was hospitalized in a stabilization program for ten weeks. Planning focused on securing housing, cultural connection, and addressing her criminal matters and addiction and mental health concerns. After her discharge, she was moved to a supported independent living program. Her circumstances briefly improved; she was enrolled in school and went to medical appointments. Zuri was connected to addiction services but did not engage consistently. Soon after, she was asked to leave because of her escalating substance use.

Zuri had housing instability, and her substance use and mental health concerns escalated. Her case team tried to engage her in planning and identify supports, but her whereabouts were often unknown.

When Zuri was 21 years old, she was seriously injured due to severe frostbite. She was hospitalized but left against medical advice. Soon after, Zuri was incarcerated and, while there, had surgery to address her injury. She continued to receive services through TAP, but her circumstances remained unchanged. The Office of the Child and Youth Advocate has since learned that Zuri passed away.

TIMELINE OF SIGNIFICANT EVENTS

Birth to 17 Years Old

- **Born in another country**
  - Adopted at 18 months old and moved to Alberta
- **4 – 10 Years Old**
  - Specialized early childhood programming
  - Assessed
    - Diagnosed with regulatory disorder, attachment disorder, attention-deficit/hyperactivity disorder, oppositional defiant disorder
      - Medication
  - Individualized Program Plan (IPP) in Kindergarten
- **11 Years Old**
  - Child Intervention involvement
- **12 Years Old**
  - Family Support for Children with Disabilities (FSCD)
  - Inpatient mental health program
    - Diagnosed with disinhibited social engagement disorder and learning disorder
    - Medication
    - IPP
  - Child Intervention involvement
    - Custody Agreement (CA)
      - Specialized group home
    - Substance use began
- **13 – 17 Years Old**
  - Child Intervention involved 6 times
    - Enhancement Agreement with Youth
  - Out-of-home placement through FSCD
  - 2 confinements under *Protection of Children Abusing Drugs Act* (*PChAD*)
  - Criminal justice involvement
  - Several hospital visits for substance use and mental health-related concerns
  - Hospitalized and assessed
    - Diagnosed with substance use disorder
  - FSCD out-of-home placement ended

18 to 21 Years Old

- **18 – 20 Years Old**
  - Support and Financial Assistance Agreement
  - Child Intervention involvement
    - Transition to Adulthood Program Agreement
  - Hospitalized in stabilization for 10 weeks

21-year-old Zuri was seriously injured

FINDINGS

Children and Family Services

Child Intervention first became involved with Zuri and her family when she was 11 years old because her parents did not have the capacity to meet her escalating needs. Over the following year, Child Intervention received four additional reports about similar concerns. Once, the family entered into a CA. Caseworkers collaborated and coordinated planning with Sara and Chris, and the professionals supporting them, to ensure they were connected to appropriate community-based services. During the last involvement, FSCD arranged for an out-of-home placement before intervention involvement ended.

Over the following three years, Zuri's needs continued to escalate; she refused services and seldom stayed at her FSCD placement. Child Intervention received four reports about these concerns. It was determined that Zuri and her family were connected to appropriate community-based and FSCD supports, and involvements ended. At 16 years old, Zuri entered into an Enhancement Agreement. By this time, her high-risk lifestyle had become entrenched. Although caseworkers tried to arrange supports, Zuri did not engage. Her whereabouts were often unknown, making service delivery challenging. At 18 years old, she entered into a Support and Financial Assistance Agreement and then a Transition to Adulthood Program Agreement, but had limited engagement with services.

Health and Mental Health and Addiction

Zuri received routine medical care for childhood illnesses and injuries after she moved to Canada. At four years old, concerns were noted with her behavioural and emotional development, and she was promptly connected to community-based health services. She received timely assessments and diagnoses and had appropriate pharmaceutical and therapeutic supports. As her needs increased, she was admitted to a specialized child psychiatry inpatient program, and her medications were adjusted.

In her adolescence, Zuri's substance use escalated, and her mental health declined; she was confined under the *Protection of Children Abusing Drugs Act* (*PChAD*). Zuri had timely assessments that clarified her needs and the supports she required, but she often refused services. As she got older, Zuri frequently went to the hospital for substance use or mental-health-related concerns. At times, she was hospitalized or was appropriately referred to addiction and mental health supports, but did not access them.

Education

At four years old, Zuri began a specialized early childhood program when concerns were noted with her development. She had timely assessments, and recommendations were implemented through Individualized Program Plans (IPP). Her IPP ended in Grade 2 because she had made gains and she was an average student for the remainder of elementary school.

Zuri's unstable circumstances impacted her education in junior high and high school. As her substance use increased and mental health declined, she seldom attended. Despite accommodations, her engagement was low, making implementing supports challenging.

Assisted Living and Social Services

Zuri was approved for Family Support for Children with Disabilities (FSCD) when she was 12 years old, which included respite care, therapeutic services and behavioural supports. FSCD caseworkers reassessed and adapted services to Zuri's evolving needs. When Sara and Chris could not provide the level of care their daughter required, FSCD caseworkers promptly explored and arranged an out-of-home placement. Although she did not access it regularly, her caregivers and staff let her know that she could return when she was ready to accept services.

Justice

Zuri became involved with the youth justice system at 12 years old, and it increased over time. She met regularly with her probation officer, who collaborated with her case team to coordinate services. During times when Zuri was incarcerated, she was offered addiction, mental health, education, and therapeutic supports, but she often refused.

THEMES TO TRACK

1. Health services

Health professionals were responsive and adapted supports to meet Zuri's evolving needs.

2. Substance use and mental health

Zuri was 12 years old when she began using substances, which escalated over time. The Advocate is deeply concerned about the number of young people impacted by substance use.

APPENDIX A: GLOSSARY

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) With Youth (EAY)

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.

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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