

Emerging into Adulthood: Experiences and Perspectives of Former Youth in Care in Manitoba

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We also want to acknowledge the survey participants who revisited their care/system experience in order to share their pain and triumphs and to help further generations of child and youth who are part of the child welfare system.

"We all have a story to tell, and no story should ever be silenced or forgotten." - Richard Wagamese (Wabaseemoong/ Ojibway)

EXECUTIVE SUMMARY

This research examines the transition into adulthood expectations and realities of youth who have been in the care of Child and Family Services in Manitoba by evaluating the skills, knowledge, and experiences that youth had upon exiting care and experiences since aging out. Manitoba's child welfare system is complicated and involves many levels of government that are responsible for the best interests of children and youth in care to commit to engaging youth with lived experience to guide service delivery and provide a more equitable transition from adolescence to adulthood. In Canada, the social expectation is that parents are responsible for supporting their children through many stages of development and that the government provides services to assist in development such as public education. When it comes to children and youth in government care, child development responsibilities are delegated to the provincial government. This study provides both a qualitative and quantitative analysis of the self-efficacy, knowledge, skills, and abilities required by youth exiting care as identified by their peers.

Manitoba's child welfare system is complicated and involves many levels of governance over the best interests of children and youth in care. In Manitoba, the Department of Families is the government ministry responsible for the protection of children, and the work is delegated from the Minister of Families to the Child and Youth Services Division which oversees the Child Protection branch. The Child Protection branch is responsible for the operations and delegation of child protection services to Child and Family Services (CFS). Child protection services are then delegated to four CFS Authorities which oversees the further delegation of child protection and development services to CFS agencies.

This research is based on the results of a survey designed by a group of former youth in care in Manitoba who called themselves the Research Ambassadors (RAs), comprised of nine youth ranging from 20 to 29 years old. The RA's started with creating themes related to adulthood knowledge, skills, and abilities. The themes include positive and supportive relationships, rights, identity, education, employment, finances, knowledge about programs and services, health (physical and mental), self-care, housing, life skills, and interpersonal skills. Next, they used their own experience, research, and insightfulness to compile a lengthy list of skills, knowledge, and abilities that any adult would need to be independent – the goal set out by CFS. Those lists were converted into survey questions with the help of the Centre for Social Science, Policy and Research, who then entered the questions into Qualtrics to collect data. Most of the questions provided participants with an opportunity to add a narrative response. The survey provided information for mental health supports and an opportunity to receive a gift card for participation.

The survey yielded 114 verified participants who exited care on their 18th birthday or whose Agreement with Young Adults (AYA) ended at 21 years old. 68% of participants identified as Indigenous (50% First Nations, 15% Metis, 3% Inuit), 11% identified as mixed race and 21% identified as white. All four CFS Authorities were represented and 67% of participants were in care under a permanent ward status. The survey demographics do not accurately represent the current in care population, but help to provide insight and details about the abundance and unreasonable amount of knowledge, skills, and abilities a youth must acquire before their 18th birthday, or for a select few their 21st birthday.

The results illustrate that the standards and policies related to youth aging out of care in Manitoba are not being met, and include stories of human rights violations, racism, and other forms of abuse from caregivers, workers, and other non-related adults in their lives. Below is a synopsis of the results:

Positive and Supportive Relationships

Embedded in the colonial threads that began and continue to operate in the child welfare system in Manitoba today is the social construct of independence as a virtue, while at the same time creating or ignoring the structural inequality that exacerbates the difficulty for marginalized people to reach the predetermined, and sometimes forced, goal of independence. Yet, the CFS Service Manual states that caseworkers should meet with their clients at least once a month and begin transition planning at 15 years old. Transition planning includes youth having a supportive network before and after exiting care.

The survey participants were asked about the frequency of meetings with their caseworker, the frequency of transition planning, and the supportive adults in their lives. The experiences of the survey participants do not align with the policies or standards, as only 31% of participants met with their workers at least once a month, 35% met at least once every three months, and 10.5% either met with their caseworker once or twice a year. When participants were asked if they left care with two or more adult supports in their lives, 50% of youth did not exit care with at least two supportive adults in their lives.

Part of decolonizing and increasing equity in the child welfare system is designing laws, policies, standards, and practices that are rooted in community collectivism. The benefits of community collectivism are further backed by several academic fields including psychology, sociology, Indigenous studies, anthropology, social work, and health sciences. Part of decolonizing the land is designing a culturally appropriate system that prioritizes relationship and community building as the foundation for a youth's transition into adulthood.

Advocacy and Rights

Understanding human rights empowers individuals to advocate for the safeguarding of their freedom, protection, and equality. In Manitoba, the Child and Family Services Act (2023) states “Families and children are entitled to be informed of their rights and to participate in the decisions affecting those rights”. Additionally, learning about types of advocacies, the channels of advocacy, and how to connect with advocates is important as children and youth in care often lose their natural advocate(s) upon apprehension. The study asked several questions related to rights knowledge prior to exiting care including CFS rights, tenancy rights, employment rights, health rights, the United Nations Convention on the Rights of the Child (UNCRC), and how to contact a youth advocate.

The results illustrated a significant deficit in rights and advocacy knowledge and skills at the time of exiting care. When participants were asked about their knowledge of CFS rights 88% stated they did not know, less than nine percent knew about the UNCRC and 40% of participants were not taught any rights information. For those who did learn some rights information, the highest response rates were 24% for employment rights, 20% for tenancy rights, and 11% for health rights.

In the absence of rights knowledge and natural advocates, children and youth can seek support from the Manitoba Advocate for Children and Youth (MACY), however; 23% knew how to contact a youth advocate, and only 11% knew about MACY. The results dictate a need for more rights education in transition planning, and an investigation into how the CFS system is adhering to the law.

Identity

Learning and feeling safe to explore one’s identity helps develop resiliency, confidence, adaptability, and social skills.

Furthermore, Manitoba law requires that services for children and youth in care include their physical, emotional, and psychological safety, security, and well-being which includes their ethnicity, culture, and family origins (CFS Act, 2023). Survey participants were asked questions related to identity including safety exploring their identity in the home regarding culture, gender, religion/ spirituality, connection to community, the language of their heritage, and sexuality. The results demonstrate that most participants felt unsafe to be themselves and explore their identity.

Survey participants were asked to rate their experience in learning, embracing, and practicing the culture(s) in the home(s) they lived in. The analysis of the results show that 18% of the respondents felt ashamed by their caregivers, while 18% felt supported to learn and practice their culture. The other 67% were somewhere in between, and 40% felt safe exploring, learning, and participating in their culture. When asked about feeling safe exploring gender and sexual identities, 79% of participants felt unsafe exploring their gender identity, 73% felt unsafe exploring their sexual identity, 70% felt unsafe exploring their religion or spirituality, and 68% felt unsafe connecting to communities important to them. The narrative responses from participants demonstrated a range of experiences; from being supported to explore their identity by foster parents, to neither being supported nor shamed, to being shamed through verbal abuse and bullying from caregivers.

Education

Education is a pathway out of poverty and provides valuable skills for adulthood, such as critical thinking and interpersonal skills. However, the pathways available for a youth in or from care to attend post-secondary school in Manitoba demonstrate inequitable access to post-secondary supports.

Survey participants who did attend post-secondary school reported positive results while attending school, despite the barriers and inequitable support. Those who attended post-secondary school had a decreased level of housing and food insecurity and were more likely to earn above \$26,000 per year. The survey did not directly ask participants about the correlation between education and well-being, but narrative responses suggest that money received towards living supports (band funding, student loans, tuition waiver) provides safety and security to a population who are at a high risk of homelessness. This report recommends further research to analyze the long-term economic gain for the province when people with lived experience have their basic needs covered while attending post-secondary school.

Employment

Like many Western countries, the expected pathway to adulthood is often employment-focused, with the social norm of entering the workforce after transitioning from the education system. The Preparing Youth for Leaving Care section in the CFS manual (2022) does not require employment skills or knowledge, just that youth have “[a] plan for employment” (Chapter 1). Due to the ambiguity of the standard, the RAs determined that employment skills encompass both hard and soft skills. While 71% of survey participants have been employed since exiting care, nearly half (35%) of them have been fired or laid off from at least one of their jobs. This research did not delve deeper into the cause of unemployment, but lack of practical work experience and interpersonal skills, age, and the COVID-19 pandemic are plausible causes of lack of stable employment for the survey participants. While the Manitoba Government does invest in youth employment programming, there is no publicly available information about specific employment skills training for youth exiting care and whether there is inclusion or emphasis on interpersonal skills.

Financial Skills

Financial literacy is an important life skill for youth emerging into adulthood. While many youth who grow up with their parents will learn skills like budgeting, opening bank accounts, credit card management, and maintaining a stable income, youth in care rely on the system to provide them with those skills. Furthermore, it is well documented that most young adults continue to receive financial support and skill development from their parents well into adulthood. The CFS Standards require that youth are equipped with financial literacy skills that include budgeting, banking, paying rent, and credit cards (CFS Service Manual, 2023). Yet, when participants were asked about the skills they acquired prior to exiting care, more than 50% of survey participants did not learn any financial skills prior to exiting care. While 50% exited care with a bank account, several participants remarked about the lack of support to obtain one and no skills knowledge beyond opening the account. The most common skills that youth learned before exiting care were budgeting and saving money (42%, respectively), and understanding debt and credit cards were the least commonly learned skills, at 16% and 19%, respectively.

When examining financial stability, there is a direct correlation between education obtainment and earnings. survey participants were asked about their educational obtainment and 75% (n= 86/114) have earned a high school diploma and/or post-secondary education. Of that population, 93.5% of participants have earned more than \$26,000 per year compared to 50% of youth without a high school diploma. The government-funded AYA program provides another pathway for financial stability for permanent wards who exited care on their 18th birthday and can remain in the program until their 21st birthday while they work on pursuing their goals. Of the 114 participants, 76 identified themselves as permanent wards who exited care on their 18th birthday, yet 25% of that group did not receive an AYA.

The CFS standard states that youth should be developing an AYA agreement before exiting care, and the only terms that would suggest a reason for denial are if developing the agreement is inappropriate to do, but does not define what is appropriate or inappropriate (CFS Manual, 2023). Further investigation regarding the AYA program and outcomes is quite limited because there is no publicly available information as to how many permanent wards were denied AYAs, the reasons for denying youth, or information explaining reasons why youth are removed from the program before their 21st birthday. However, this study would suggest that investment in unobstructed access to education will yield better results for the Manitoba economy than the current model being used in Manitoba.

Health and Wellbeing

Healthcare services in Manitoba align with other provinces and territories in Canada in the sense that one requires a personal health care number to access free medical support and offers an income-based prescription drug benefit program. Access to medical support, awareness about medications, blood type, family health history, and trauma-focused mental health supports are vital for youth exiting care (who are not transferred to adult disability services) as they will be solely responsible for managing their own physical and mental health. When survey participants were asked about health and well-being, 52% exited care with their health care number and card, 3.5% knew about their biological family's medical history, 26% knew their doctors' information, <9% knew their blood type, and 18% knew their vaccinations.

When asked about health-related services that they knew about or had access to while in care and after exiting care, many participants did not receive counselling, nor were they aware of important services such as Pharmacare and post-care mental health support. For example, access to prescription medications is vital in maintaining good mental health, and all youth who have exited care would be eligible for the program, yet only 11% of participants were told about the program before exiting care.

Housing

It is well documented that youth exiting care have a high risk of becoming homeless. Current data states that former youth in care are about 200 times more likely to experience homelessness compared to the general population. There are several factors that increase housing insecurity for former youth in care, including poverty, no or poor credit score, lack of a guarantor, and age discrimination. When survey participants were asked about their housing experiences since exiting care, 19% of survey participants indicated current core housing needs, which include homelessness, emergency shelter, transitional housing, couch surfing, or more than two people living in a single-room occupancy situation. When asked if they have ever been denied housing and why, the top 5 reported reasons are: bad or no credit, no references, no guarantor, no money for damage deposit, and being too young. When comparing the barriers that many youth from care experience to the general population, many of their peers have the privilege of parents as references, guarantors, support for damage deposits, and advocacy in the event of rights violations.

The ability to secure and maintain housing requires a wide variety of skills, knowledge, and resources. For example, youth need to know how to pay rent, find adequate housing that fits within a limited budget, pay a damage deposit, navigate housing services and support, conflict management, how to get utilities in their name, rent-based benefit programs, rental rights and how to find an advocate. Survey participants were asked about the above housing skills they learned before they exited care, and 37% of survey participants indicated that they did not have any of these skills prior to exiting care, and less than 20% knew about housing advocates. In Manitoba, there is a rental benefit program specifically for former youth in care, however, roughly 10% of the survey participants knew about the benefit.

In conclusion, the bravery and vulnerability of the 114 survey participants illustrated a fragmented, inconsistent, and opaque system that left a significant number of children and youth feeling traumatized and unready to meet the system goal of independence at the age their CFS support stopped. How can youth ask for what they need when they do not know if they have a right or entitlement to it and fear consequences for asking? One survey participant remarked that they didn't know there were so many skills, information, and abilities they needed to have. The social norm is that passing on information, teaching skills, and demonstrating abilities is a gradual transitional process that happens over the duration of one's life, and growth is supported by families and communities. Manitoba's youth in care deserve to have gradual transitions into adulthood surrounded by people and a system that honours their journey with teachings, time, and compassion.

DEFINITIONS

Alumni of Care: this term is most used in a North American context meaning one who was emancipated from the child welfare system at the age of majority.

CFS Agencies/ Agencies: An authority is responsible for providing the delivery of child and family services through one or more agencies (CFSA Act, 2023).

- General Authority: CFS of Central Manitoba, CFS of Western Manitoba, Jewish Child and Family Service, and Winnipeg, Rural & Northern CFS.
- Metis Authority: Metis Child, Family, and Community Services and Michif Child and Family Services.
- Northern Authority: Awasis Agency of Northern Manitoba, Cree Nation Child & Family Caring Agency, Kinosao Sipi Minisowin Agency, Nikan Awasisak Agency Inc., Nisichawayasihk Cree Nation FCWC, and Opaskwayak Cree Nation Child & Family Services.
- Southern Authority: Animikii Ozoson Child and Family Services, Anishinaabe Child and Family Services, Child and Family All Nations Coordinated Response Network, Dakota Ojibway Child and Family Services, Intertribal Child and Family Services, Kinonje Abinoonjiag Niigan Inc., Sandy Bay Child and Family Services, Sagkeeng Child and Family Services, Southeast Child and Family Services, West Region Child and Family Services.

Aging Out/ Aged Out: This term is used to describe one's emancipation from government care. The legal requirement in Manitoba is that a youth ages out of care on their 18th birthday.

Agreement with Young Adults (AYA) or Extension of Care: the Manitoba Advocate for Children and Youth (MACY) defines this program as a child's care with a child and family services agency that can be extended beyond the age of majority (18) to the age of 21 years (MACY, 2020). The AYA program eligibility is only for youth who exited care under a permanent ward status. Separate from the definition provided by MACY, we would like to note that once youth turn 18 years old, the continuation of support and services are offered under contract or legal agreement between the young adult, their social worker, and CFS, generally.

Authorities: The purpose of this Act is to establish authorities that are responsible for administering the delivery of child and family services in Manitoba. The four authorities are:

- The First Nations of Northern Manitoba Child and Family Services Authority;
- The First Nations of Southern Manitoba Child and Family Services Authority;
- The Metis Child and Family Services Authority;
- The General Child and Family Services Authority.

CFS Service Manual/ CFS Manual: A set standards for the delivery and administration of child, family and adoption services in Manitoba as required by law.

CFS System: This encompasses the Ministry of Families, the Child and Family Services (CFS) branches, the four CFS Authorities (Northern, Southern, Metis, and General) and all CFS agencies operating in Manitoba.

Child or Children: For this report the definition of a child or children are individuals who are under the age of majority in their province.

Futures Forward Program: is a provincially funded program that supports youth 15–29 who are aging out or have aged out of Manitoba’s child welfare system. The program is a collaboration between Youth Employment Services Manitoba (contract holder), Canadian Mental Health Association, and Community Financial Counselling Services. The Futures Forward program is funded by the Department of Mental Health and Community Wellness.

Legal Status of Children and Youth in Care: We borrow the definitions provided by the Manitoba Advocate for Children and Youth (MACY).

- **Temporary Ward** - refers to a child who is under the temporary guardianship of a CFS agency. All guardianship rights and responsibilities of the child's parents or guardians are suspended for a period of time determined by the court.
- **Permanent Ward** - refers to a child who is under the permanent guardianship of a CFS agency. The guardianship rights of the child's parents or guardians have been terminated.
- **Voluntary Placement Agreement (VPA)** - the Child and Family Services Act provides for a parent, guardian or other person who has actual care and control of a child, to enter into a voluntary placement agreement with an agency for the placing of a child without transfer of guardianship.
- **Voluntary Surrender of Guardianship (VSG)** - This provision in the Child and Family Services act allows for a parent, guardian or other person who has actual care and control of a child to sign an agreement turning over guardianship to a child and family services agency. It has the same effect as a permanent order of guardianship in that it terminates all parental rights and obligations.

Indigenous: This report uses Indigenous Services Canada’s definition of Indigenous people which includes people with Aboriginal, First Nations, Metis, and Inuit ancestry.

Manitoba Advocate for Children and Youth (MACY): The Manitoba Advocate for Children and Youth is empowered by legislation to advise children, youth, and young adults of their rights and the services which should be available to them. The Advocate also has the responsibility to raise issues with the government on behalf of the province's children and advise the government on issues and areas of concern (MACY, 2023).

Research Ambassadors (RAs): nine youth, previously in care, who exited the CFS system in Manitoba. The basis of their Authority representation is based on their aging out date. At least 3 youth had been in care under multiple Authorities. The representation is as follows: 3 General Authority, 2 Southern Authority, 2 Northern Authority, and 2 Metis Authority.

Research Team: Includes variations of YES Manitoba staff, Research Ambassadors, or the Centre for Social Science Research and Policy staff team.

Transition out of care: Child and Family Services Service Manual states that youth should begin their transitional planning at age 15 and planning will end on their 18th birthday, with an exception for permanent wards who are also receiving Agreements with Young Adults. The maximum age a youth, who is in care as a permanent ward agreement, can receive AYA funding is 21 years old.

Visible Minority: In this report, we use the Statistics Canada definition of a visible minority as persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour.

Youth or Young Adult: In this report, we are using the United Nations' definition of youth, which is a person between the ages of 18 to 29. There is a lack of consensus across academia, non-profits, and government spaces regarding how to define terms such as "child," "youth," "adult," or even "emerging adult." Definitions for the terms often conflict depending on the situation they are used in.

Youth Engagement Specialist: employed by Youth Employment Services Manitoba to manage the project funding outcomes.

INTRODUCTION

In the summer of 2022, Youth Employment Services Manitoba (YES MB) hired a Canada Summer Jobs term employee to conduct a literature review. This review's aim was to determine the skills and knowledge that youth require as they transition into adulthood, and how those align with the current policies, standards, and services available for youth exiting care and emerging into adulthood. The analysis uncovered a lack of provincial or federal standards and skill demonstrations that youth must perform in order to be ready for independence. Young people in and from care have been advocating for change to the transition from care process for over 30 years. As stated by Doucet (2020a), "multiple reports have called upon provincial and territorial governments to implement an exiting care framework that is centered on young people's readiness, rather than age, to ensure they are provided with the same level of care and unconditional support that their peers receive" (p.17). In this report, the voices of 114 young people who have transitioned from care will provide insight into the modern experience of aging out. "Asking young people to reiterate their stories of being let down by systems can be retraumatizing, causing more harm" (Altieri et al, 2022, p. 6), and so we thank the young people who chose to share their experiences in the hopes of creating a better system of care in Manitoba. With this qualitative study, we are bringing together the voices of young people in care and alumni of care to shine a light on the experiences that impact their transitions to adulthood (Fuchs et al, 2008, p.22).

Manitoba is the original land of the Anishinaabeg, Cree, Oji-Cree, Dakota, and Dene peoples and the homeland of the Métis Nation. The province is home to approximately 1,342,153 people, of which approximately 18 percent are of Indigenous descent, and of which approximately 60 percent of this population live on reserves (Statistics Canada, 2023).

From the 2016 Canadian census, it is estimated that five percent of the entire Canadian population is Indigenous, as approximately 1.67 million identify with at least one of the following groups: Aboriginal, First Nations, Metis, and Inuit (Indigenous Service Canada, 2022). Manitoba was largely colonized by the Scottish and British explorers during the fur trade and was officially entered into the Confederation in 1870; 200 years after the Hudson's Bay Company controlled Rupert's Land. The continuation of migration to Manitoba over the last few hundred years has resulted in several religious and ethnic minorities also calling the province home (Urquia & Walld, 2020).

As colonialism moved into Manitoba, generations of Indigenous children and youth were forcibly removed from their homes and communities, only to be placed in government-funded institutions such as residential schools. The historical process of removing Indigenous children from their homes and placing them up for adoption, known as "the 60s Scoop", continues to this day and has been coined "the Millennium Scoop" (Tremonti, 2018). According to the Manitoba Advocate for Children and Youth (MACY), "First Nations children have higher rates of involvement with child and family services, including apprehensions, compared to all other children in Manitoba. Close to one-third of all First Nations children in Manitoba spend some time in care of child and family services during their childhood" (2021b, p. 10). While there is increased awareness and understanding of the colonial structure that undergirds the child welfare system, and attempts to improve legislation and policies, "the child welfare system remains rooted in the colonial structures that ensure the continuation of structural inequities and systemic racism" (Manitoba Advocate, 2021a, p.21). It will take intentional, drastic changes to create a system that is truly centered on the well-being of children and families.

Manitoba is the guardian of some amazing young people. These are young people who face profoundly negative life experiences and social conditions, and yet they hold and practice incredible strengths and values (Dunsmore, 2019, p.8). These young people strive to be active in their communities, exhibit resourcefulness, and are philanthropic despite not having enough for themselves, and are fiercely protective of the ones they love. Fundamentally, most youth with lived care experience want to care for others in ways that they did not receive care. These young people practice generativity, dreaming big dreams for their own lives while looking to the future with hope and working for a better world for their loved ones and communities. They work hard to keep that hope alive, and even though they face ongoing structural and systemic barriers to achieving their goals, these young people show great concern for others who share their experiences or who are coming up behind them. These magnificent beings are Manitoba's youth in and from care.

The inequity that children and youth face while in the system and as they emerge into adulthood has been highlighted in research for decades. Yet, the improvements on the system have been marginal, and these children and youth are a long way from mirroring the same pathways to adulthood as their peers in Manitoba when the system does provide similar opportunities to children and youth in care. For example, Statistics Canada reported that 35.1% of young adults between the ages of 20–34 years old live continue to with at least one parent (Statistics Canada, 2021).

In Manitoba, youth in care are legally required to exit their placement on or by their 18th birthday unless they are a permanent ward on their 18th birthday and they meet the transition plan agreed upon with their case worker. If the youth meets the ward and plan requirements, they should be offered an Agreement with Young Adults (AYA); however, the survey results show that a significant amount of those who are eligible for the program did not receive it.

BACKGROUND

Child Welfare System in Manitoba

The legal status of children in care impacts the support and services they may be eligible to receive when they reach the age of majority. As of March 2022, there were 9,196 children and young people in care in Manitoba, the highest number per capita across Canada. Of those children, 90 percent are First Nations, Métis, or Inuit (Manitoba Advocate, 2021a, p. 19). Of all the children in care, "70 percent are permanent wards, 3 percent are under a voluntary placement agreement, and the remaining 27 percent are children in care under a temporary legal status where reunification with families is the primary goal" (Manitoba Families, 2020, p. 74). For youth transitioning out of CFS care, their ward status is terminated at the age of majority which is 18 years old in Manitoba (The Age of Majority Act, 1987; CFS Act, 2023). The overall experience of aging out is lonely and isolating for youth (Kovarikova, 2017). Youth exiting care are going from a situation where most major (and minor) decisions are made on their behalf by foster parents, social workers, or group home staff, and then they find themselves positioned to make very important decisions on their own. The often abrupt transition of decision-making responsibilities and reliance on support networks to independence regardless of abilities demonstrates the inequitable transition to adulthood that youth exiting care face compared to their peers, not from care. Dr. Melanie Doucet (2020b) states, "young people today continue to rely on their social support networks, including their parents, friends, and communities, throughout their adult lives" (p. 140). Youth aging out of care are deprived of this social support network, and the adverse outcomes have been well documented.

Research shows that "youth 'aging out' of care in Canada are up to 200 times more likely to experience homelessness than their peers who are not in care, with Indigenous and LGBTQ2S+ youth facing an even higher risk" (Doucet, 2020a, p. 15).

Many young people age out of care and are no longer able to afford the rental costs of their independent living placement due to challenges securing or maintaining stable employment or accessing financial support through adult services. The majority of youth who have aged out of care in Canada live below the poverty line, struggling to balance financial responsibilities with limited financial resources (Kovarikova, 2017, p. 15).

In Canada, each province has its own jurisdiction over child welfare, and transition services vary greatly. The lack of standards and national legislation leads to inconsistencies in supports and resources offered to young people transitioning from care. As pointed out by Dr. Melanie Doucet (2020a, p. 9) "Canada is one of the very few Western countries that does not have national legislation and/or standards supporting the transition to adulthood for youth in care." The impact of inconsistent legislation, policies, and standards across the country and within Manitoba has a negative impact on children and youth in care, and their ability to self-advocate.

At the time of this report, Manitoba's child welfare system is governed by the Department of Families, which also oversees Children's Disability Services, Community Living Disability Services, Employment and Income Assistance, Manitoba Housing, Homelessness Strategy, Gender-based Violence Program, and Adoption and accessibility compliance. The current Minister for the Department of Families is also the Minister for Accessibility, Francophone Affairs, and Gender Equity Manitoba Secretariat. The provincial Acts related to the Department of Families include: The Child and Family Services Act (CFS Act), the Child and Family Services Authority Act (CFSA Act), the Adoption Act, and the Advocate for Children and Youth Act (ACY Act), The Family Maintenance Act, The Fatality Inquiries Act, the Financial Administration Act, the Freedom of Information and Protection of Privacy Act, the Intercountry Adoption Act, the Ombudsman Act, the Personal Health Information Act, the Protecting and Supporting Children (Information Sharing) Act, and the Social Services Administration Act.

Additionally, two federal Acts apply to child welfare in Manitoba the Act Respecting First Nations, Inuit, Metis, Children, Youth and Families, and the Youth Criminal Justice Act (CFS Service Manual, 2022).

The Department of Families publishes the number of children in care in their annual report each year, breaking the number(s) down by Authority and Agency and the federal and provincial financial contributions towards the child welfare system. While there are several publicly available reports that confirm 90% of Manitoba's 9,196 children in care are Indigenous, the government does not break down racial or ethnic identifiers to determine the different races and/or ethnicities of the other 9% which include refugees and immigrant families. Further, the Manitoba government does not track or report on the numbers of 2SLGBTQ+ youth in care, despite evidence from other provinces that 2SLGBTQ+ youth are more likely to have CFS involvement (Massinon, 2020).

The CFSA Act delegates "administering and providing the delivery of child and family services in Manitoba" (CFSA Act, 2023) to four Authorities. So, while the Department of Families oversees the "safety, security, and well-being of children through the provision of services that are designed to preserve, sustain and restore families in the least disruptive manner possible" (CFS Act), the delegation of this work is given to the four Authorities based on the CFSA Act. The Authorities then delegate responsibility for the day-to-day support of children in care to their agencies.

One recent exception to the Authorities Act happened in January 2023, when Peguis First Nation implemented their own child welfare legislation. They are the first of the Indigenous Governing Bodies to introduce child welfare legislation after the Act Respecting First Nations, Inuit, and Métis Children, Youth and Families became official law in 2019. Therefore, Peguis is not considered part of the CFS or CFSA Acts and is not included under this paper's definition of Authorities. The transition of children from the Southern First Nations Network of Care (SFNNC) to Peguis is currently in progress.

The delegation of services and support to the Authorities means that Authorities are responsible for the creation, implementation, adherence, and evaluation of their own policies, regulations, and standards. Each Authority then delegates its services and support to the CFS Agencies they govern. Each Agency makes its own policies, regulations, and standards on service delivery, funding allocations, and entitlements. Ultimately, there is a lack of direction in the child and family services legislation to hold the Authorities and agencies responsible for ensuring youth are set up for positive outcomes when they age out of care (McEwan-Morris, 2012, p. 13)

Children and Youth Transitioning Out of Care in Manitoba - Policies and Standards

The Department of Families prescribes certain conditions for preparing a youth in their transition to adulthood. Currently, the Manitoba government describes adulthood as independence, however, this is not an accurate definition of what the policies and standards are encouraging. According to the Webster's Dictionary (2023), the definition of independence is "not requiring or relying on something else; not looking to others for one's opinions or for guidance in conduct; not requiring or relying on others". Whereas, the CFS Age of Majority standard requires that caseworkers ensure that youth have a "stable support network" prior to exiting care (CFS Standards Manual, 2023). Further, the term independence is contradictory to Indigenous and best practice lenses of building community and healthy long-term relationships (Doucet, 2018). As such, child welfare advocates across Canada have been calling to remove the term "independence" from the terminology used to describe transitioning into adulthood and instead adopt words that more accurately reflect the experiences and goals of youth in care. More appropriate words include:

- **Self-efficacy:** an individual's belief in [their] capacity to execute behaviors necessary to produce specific performance attainments.
- **Self-sufficient:** needing no outside help to satisfy one's basic needs.
- **Interdependent:** the dependence of two or more people or things on each other.
- **Adulthood:** the state or condition of being fully grown or mature. (Cambridge University Press & Assessment, nd).

The current transition standards set by the Department of Families are located in the CFS Service Manual and are set out in volume 1, chapter 1, section 7 (see below). While the Department of Families has a service manual, it is the responsibility of the Authorities and Agencies to determine how the standard is interpreted and put into action. The manual divides transition planning into two categories: accessing services and minimal skill development requirements. Skill development includes basic life skills like cooking, money management, employment, and a social network. The standards lack direction related to education, emotional intelligence, interpersonal skills, mental health, culture, health, and housing. Further, the current policy for the planning process is so vague that one could interpret that the youth are not part of the transition discussion or plan. The policy states, "at the planning stage, the case manager and the key individuals identified at the assessment stage develop ways to address the needs and issues of the youth and where applicable the family (CFS Service Manual, 2023, Chapter 1)." This policy creates a gray area whereby a case manager does not have to consult the youth in making the plan, and the transition plan can be determined by whomever the case manager identified at the assessment stage, regardless of whether that person is still a support the youth had identified. Any exclusion of youth in the transition plan is not acting in the best interest of the child and is in violation of Article 12 of the United Nations Convention on the Rights of the Child (UNCRC, 2023; CFS Service Manual, 2023; Government of Canada, 2017).

CFS Standard 1.1.7 Preparing Youth for Leaving Care

Age of Majority / Transitional Planning – The case manager is responsible for ensuring that all youth in care, regardless of legal status, at the age of 15, have a detailed transition plan with a view to them leaving care. The plan must involve the assessment and development of skills needed for adult living.

If the youth is 15 years or older and is expected to return to their family prior to their 18th birthday the transition plan will also reflect the family's involvement, where appropriate, in the following process.

Preparations for becoming an adult include but are not limited to ensuring the youth can access the following if appropriate:

- referrals to appropriate adult services
- continued medical, dental and prescription coverage
- development of an Agreement with Young Adults to be offered for supported services which reflects the cultural background identified by the youth.
- ability to identify the process to secure safe and appropriate housing with additional support
- explore and identify future learning opportunities including post secondary education, trades and other training that would enable the youth to enter or continue in the workforce
- assistance and referral to available funding sources for continued lifelong learning

Preparation for becoming an adult includes but is not limited to ensuring the youth has the following skills:

- ability to perform basic life skills such as laundry, shopping and maintain personal hygiene
- understand basic concepts of money management including banking, paying rent, budgeting and credit cards prior to and after transition planning is completed
- plan for employment readiness
- development of a stable social support network prior to and after reaching adulthood

All transition plans must include evidence of consultation with the youth and where appropriate, alternative care providers, legal guardians, educators, family of origin and/or any other applicable parties identified in the care plan by the youth.

Planning Process

“At the planning stage, the case manager and the key individuals identified at the assessment stage develop ways to address the needs and issues of the youth and where applicable the family. Planning also ensures that any risk factors identified in the assessment are addressed so youth are safe and personal and family functioning are strengthened. Plans must be flexible, reviewed regularly, and revised to recognize successes and changing needs. To recognize success, outcomes must be described in measurable ways” (CFS Service Manual, 2023).

The Government of Manitoba has not reported on this standard, provided youth with information about their rights related to this standard, nor reported the outcomes of the children emancipated from their guardianship in the last decade. This is in spite of mounting evidence that youth transitioning from government care into adulthood have significantly poorer outcomes in health and education, as well as social, emotional, and financial areas compared to those without CFS experience (Healthy Child Manitoba, 2017).

The provincial government is aware of the need to have transparent information about the well-being of the children under their guardianship, and reporting was mandated to provide updates related to the well-being and development of young people through the Provincial Healthy Child Manitoba Strategy (Youth Employment Services, 2022). However, the government repealed The Healthy Child Manitoba Act (HCMA) on November 6, 2020, ending legislated requirements to evaluate the well-being, development, and outcomes of children in care (Province of Manitoba, 2023).

When examining available annual reports from the Ministry of Families, the four authorities, and subsequent agencies, there is little to no reporting on preparation and readiness for youth to exit the system including how many children have transition plans, life skills training, and frequency of meeting with key individuals who have been designated to support the youth. The authorities and agencies lack transparent and youth-friendly information about what transitioning into adulthood means, what supports youth can receive, and what their rights are.

METHODOLOGY

Youth Employment Services Manitoba (YES MB), received funding from the Northpine Foundation's and the Building Sustainable Communities Grant (Government of Manitoba) with the purpose of engaging young people in project development, advocacy, and systems change. Part of the funding was used to develop a better sense of how youth who were transitioning from CFS care were prepared for adulthood, to recommend specific skills and knowledge required for adulthood, and empower youth to advocate for better transitions out of the CFS system.

YES MB holds the contract for Futures Forward (a joint initiative between the Canadian Mental Health Association, Community Financial Counseling Services, and Youth Employment Services Manitoba) which provides wrap-around services to hundreds of youth exiting government care in Manitoba each year. Services include employment, education, housing, mental health, Indigenous cultural programming, basic life skills, and financial counselling support for youth 15-29 years old who have had or currently are receiving services from Child and Family Services in Manitoba (Futures Forward, 2023). The Futures Forward program is funded by the Provincial Government's Department of Mental Health and Community Wellness, which provides services to over 600 unique clients each year (Futures Forward, 2023).

In October 2022, a group of young people who had aged out of CFS began meeting to develop a methodology to determine what skills are needed to be an independent young adult, assess how prepared youth were for adulthood when they exited care, and how they have fared since aging out of care. The research was designed using a participatory action research model and the team of youth referred to themselves as Research Ambassadors (RA).

This group of youth includes nine young people with at least two youth representing at least one of four CFS Authorities (several youth had been in care under more than one Authority). The group developed the criteria for participation in the research (18–29 years old) based partly on Statistics Canada’s definition of youth (15–28 years old), and also, a discussion around how youth in care are likely behind in their development due to traumatic childhood experiences. In fact, children in care are five times more likely to have post-traumatic stress disorder (PTSD), similar to the rates of Vietnam veterans (Pecora, White, Jackson, and Wiggins, 2009). The RAs received training from the Centre for Social Science Research and Policy and YES MB’s Youth Engagement Specialist. The information the RAs learned was used to design the survey questions, draft, and pilot the survey, analyze the findings, and create an outreach and media strategy, with the support of YES MB’s Youth Engagement Specialist.

The design allowed for quantitative data collection with the option for participants to add qualitative data. The goal is to use this information to determine the life skills required to be an independent adult and evaluate whether the CFS policies and standards about youth transitioning out of care are in line with the experience of youth who aged out of their system. Then, in the areas where policies and standards are not meeting expectations, offer directions for further evaluation to the government ministries responsible for supporting youth as they transition into adulthood.

Defining Adulthood Skills

Due to the lack of provincial and federal definitions, standards, or policies of what ‘independence’ means in relation to expected skills, knowledge, and abilities demonstration for youth exiting care, the RAs created their own criteria which included over 130 skills and information they would need to master for a healthy, happy, and successful adulthood.

The skills that the RAs determined came from their own experience, the experiences of folks they are connected to who exited the system, the Adult Readiness & Aging Out of Child and Family Services in Manitoba Report (YES MB, 2022), and the Equitable Standards Evaluation Model (Doucet, 2022). They also received a workshop from Dr. Shayna Plaut, the (former) Director of the Centre for Social Science Research and Policy about research methodology and ideologies.

Skills were arranged into themes to inform the development of questions that would evaluate the transition to adulthood readiness. The RAs then took those themes and worked with the Youth Engagement Specialist at YES MB to develop questions based on the following categories: what they would have needed to be independent; did they have what they needed to be independent; and how are youth doing after aging out? The RAs also included demographic information (ex. ethnicity, gender, single parents) in hopes of evaluating equity amongst the experiences of marginalized youth with those without care experience.

Themes that were identified by the RAs include:

- Positive and supportive relationships
- Rights
- Identity
- Education
- Employment
- Finances
- Knowledge about programs and services and eligibility requirements
- Health (physical and mental)
- Self-care
- Housing
- Life Skills (cooking, cleaning, driving, identification, goal setting and planning)
- Interpersonal skills

Comparing the themes that youth who aged out of the system identified and what is written in the CFS Service Manual, there appears to be a disconnect between what youth need for “independence” and what the system is required to provide. The research results echo the disconnect between the needs of youth transitioning into adulthood and what they receive in practice.

Survey Design

There are some unique factors that shaped this research process and the results. The original plan was for the Research Ambassadors (RAs) to travel throughout Manitoba to conduct information sessions with youth who had aged out of care and invite them to take the survey in person. This method would allow for the goals of the survey, as well as apply Indigenous research methodologies through storytelling. It would also ensure that issues of internet access and stability would not be a factor in participation. In addition, if there were literacy or cognition concerns, a person would be able to ask a question or access support. Unfortunately, COVID-19 and poor winter travel conditions had a significant impact, and thus in-person travel was no longer an option in the time remaining for the project. Therefore, although by no means ideal, the RAs chose to create an online survey that was distributed through the CFS agencies, youth-serving agencies, Friendship Centres, Indigenous-focused organizations, and social media.

YES MB contracted the Centre for Social Science Research and Policy (CSSRP), located at the University of Manitoba, to assist in the survey design, privacy and ethics review, program the survey in Qualtrics, and proving analysis. As noted above, the Research Ambassadors (RAs), in consultation with the CSSRP, drafted, reviewed, and edited the questions. Once satisfied with the questions, the survey questions were then reviewed by a committee made up of representatives from the Southern First Nations Network of Care, the General Authority, Manitoba Advocate for Children and Youth and the Manitoba Human Rights Commission. When the questions were finalized, the CSSRP entered the survey questions into Qualtrics.

When developing the ethics and approach with the RAs, they expressed a distrust in government collecting their information, as they were concerned about participants being exploited or punished for their contributions. Therefore, they wanted participants to remain as anonymous as possible. Those who completed the survey were offered an option to receive a \$20 gift card (honorarium) to a select variety of stores in acknowledgment of sharing their time and knowledge. This aligns with current practice in community-based research as well as Indigenous principles of reciprocity. If a person did choose to receive an honorarium, they were taken to another page where they were provided an email address and instructions to request the honorarium. In this way, no email addresses could be linked to responses in the data set and the surveys remained completely anonymous. The decision to call the honorarium a reward was made by the RAs as many of them indicated that they had never heard the word honorarium before and reward is more youth-friendly.

The survey began with an introduction about privacy, confidentiality, and eligibility requirements. Eligibility included: between 18–29 years old have exited care in Manitoba on your 18th birthday, or you currently or previously received Agreements with Young Adults (AYA or Extension of care) or the Supports for Young Adults grant. Participants were then taken to the survey for further eligibility screening and completion of the 47 questions that explored the participant's experiences before exiting care and since aging out. The survey was designed with multiple choice questions with options to explain, expand, and reflect through open-ended responses to the themes of the previous questions (ex. Housing, ID, education, income). Two questions (46 and 47) were explicitly designed to be open-ended narrative based in nature.

Prior to going live, there were several discussions with the RAs, CSSRP, and the Youth Engagement Specialist about how to ensure the authenticity of survey participants. The decision was to mandate the month and year of birth to eliminate those who did not meet the age criteria, to ask both the CFS Authority and Agency to ensure that the responses match the agency to the Authority that governs it, and a reCAPTCHA button at the end of the survey.

The survey was launched on February 13, 2023, and closed on March 31, 2023, with the goal of receiving 100–200 completed surveys from eligible participants. The survey was advertised at community organizations, government, social media, and through the website www.bethesystemchange.com. The distribution through social media channels (Reddit, Twitter, Facebook & Instagram) attracted the attention of an overwhelming amount of fraudulent or ineligible participants looking to gather the reward, and the survey was therefore overloaded by non-human respondents.

Within one week there were over 1,000 responses and, by the time the survey was closed there was a total of 4139 responses. After the first week, the research team realized the survey was being inundated by bots, and steps were taken to increase security, including creating a second "reCAPTCHA" button and any data that had a ReCAPTCHA score of less than 0.60, a response time of less than 525 seconds were removed from the data. In addition, everyone who requested a gift card was contacted (as they had provided their email address when requesting the gift card) and asked a few questions (i.e.: what agency were you under? What was your ward status? etc.) to verify they were, in fact, a human with lived experience in Manitoba CFS. On March 7th (at the halfway point of the survey being live) YES MB ceased offering an honorarium as the goal of 100 participants was believed to be met. The survey remained open until March 31 but without the reward option.

After review, 114 of the 4130 responses were deemed valid. This was a less-than-ideal situation as it is quite possible some valid responses were not included; however, the research team is confident that the 114 who are included are, in fact, humans who aged out of CFS care in Manitoba and thus this was the data set used in the subsequent analysis. The data was then separated between qualitative (narrative) and quantitative (statistics). The CSSRP research team analyzed the data separately and then compared the findings to develop a “story” from the data – identifying themes and commonalities as well as disparities and absences.

There are a few explanations for why the responses seem to differ from how CFS youth are commonly portrayed. Firstly, this was an online survey requiring internet access, literacy, ability to concentrate, and interest. Thus, respondents were a self-selected group of invested people, with the skills and time to answer the survey, who presumably heard about the survey because they are connected to organizations/agencies that offer support to these youth. Secondly, the questions were designed by those with lived experience and, because of the framing of the questions itself, may be eliciting, and soliciting, different responses than the traditional “deficit model” often used when researching “vulnerable populations.” Lastly, there have been some significant changes in child welfare policy over the past three years – most notably the moratorium on aging out during Manitoba’s COVID-19 state of emergency (March 2020–March 2022), as well as the Act respecting First Nations, Inuit, and Métis children, youth and families (Bill C-11), and a concerted effort to increase AYAs for all eligible youth.

To be clear: there was never an attempt at generalization. Rather, as is the ideal in any mixed-methods research design, the quantitative data and qualitative data speak with and to one another to develop a story based on the experiences of those who chose to participate in the research.

The quantitative data pointed towards patterns of experiences, including patterns of absence/gaps, whereas the qualitative data provided the nuance and deep description of the lived experiences of youth, aged 18-29, who had aged out of the child welfare system in Manitoba. These youth chose to spend their time filling out a survey on their experiences transitioning to adulthood because, in the words of one respondent, they want “to make things better for those who are coming after us.”

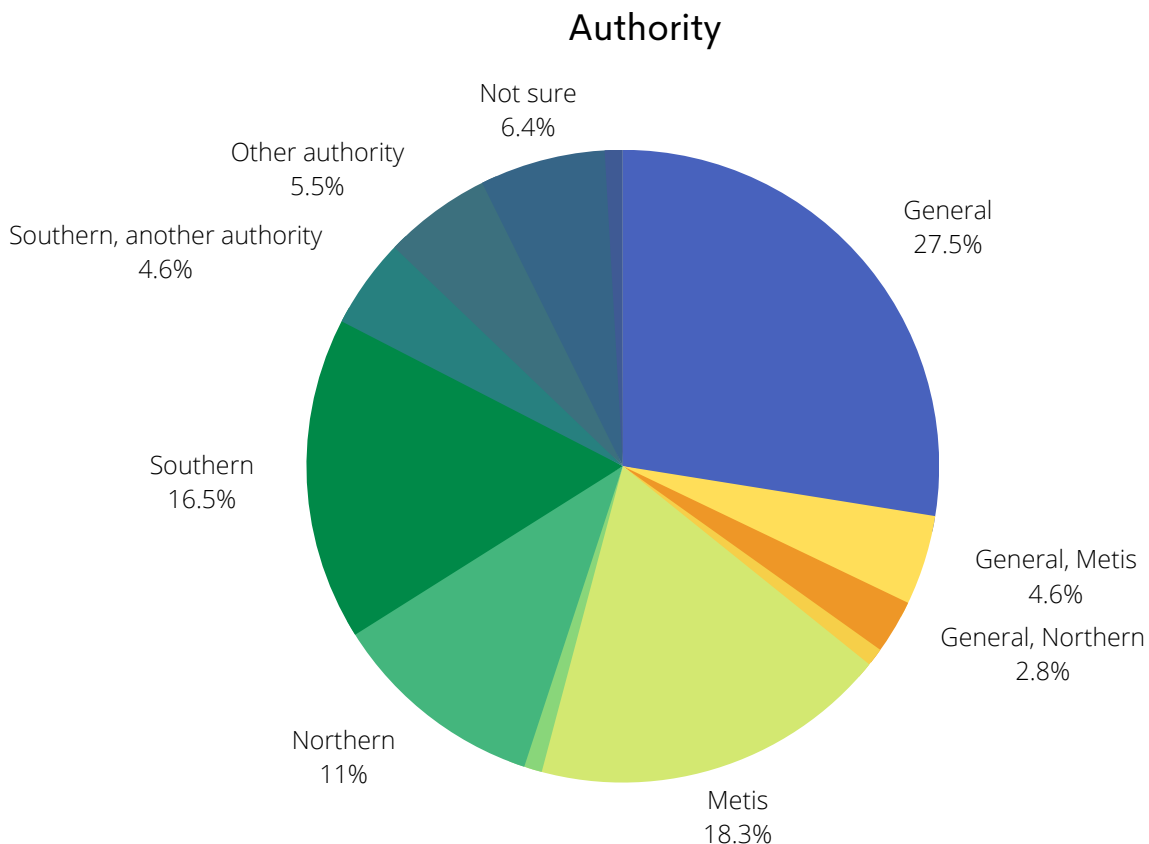
Demographic Data

The way the current child welfare structure operates in Manitoba results in confusion for young people who receive protection services from CFS because, as mentioned above, each authority and agency has its own rules, approach to service delivery, and entitlements to youth and families. The majority of survey participants were not able to name both their agency and authority, which is important for what one can expect from service delivery, rights and entitlements, and connection to culture and community. When survey participants were asked what CFS Authority provided services to them, 11% indicated that they didn't know, and 12% listed their CFS agency. When it came to agency results, 7% did not know their agency or chose not to answer, and 14% of participants had received services from more than one agency. The inconsistency and lack of communication of rights, entitlements, and expectations when a youth changes authority and/or agency can result in negative consequences and service disruption for youth in care.

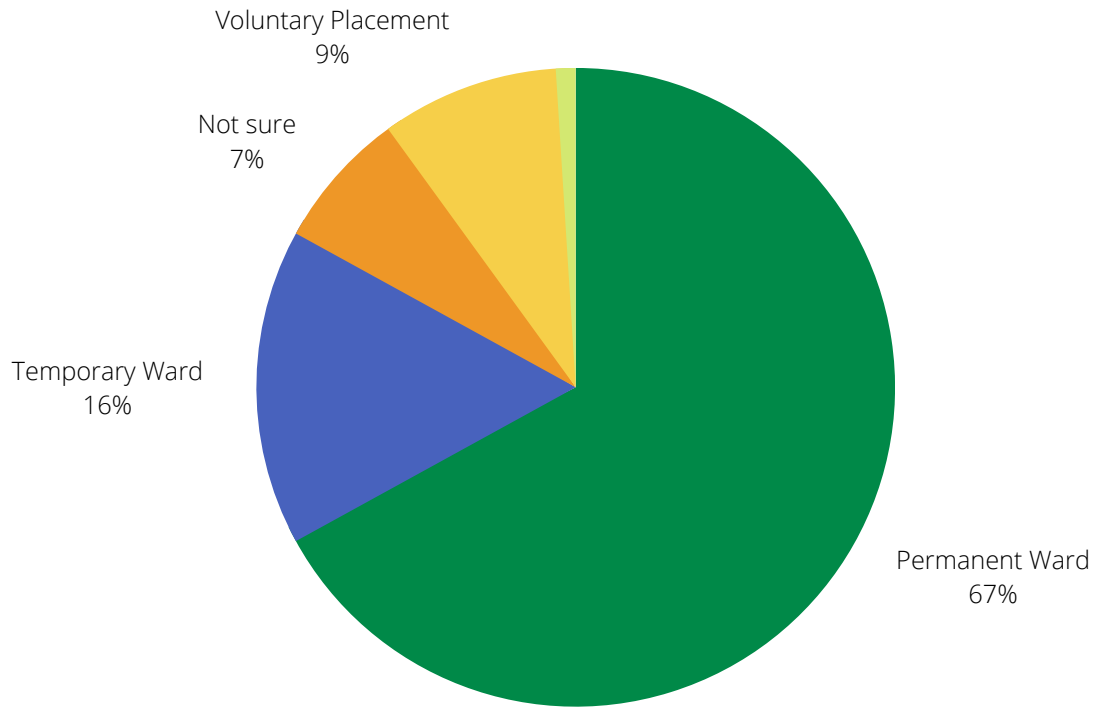
The four authorities are: First Nations of Northern Manitoba Child and Family Services Authority (FNNMCFS); Southern First Nations Network of Care (SFNNC); Métis Child and Family Services Authority (Metis CFS); and the General Child and Family Services Authority (GA).

Representation from all 4 authorities was found amongst survey participants, with 28% participants from the GA, 18% from Metis CFS, 17% from the SFNNC, 11% from the FNNMCFS and 11% did not know their authority. There were options for participants to select more than one authority, "another Authority", "not sure," and "any additional information you would like to add". The results from those categories varied, but most respondents listed their CFS agency and a few others responded with the city or town that their office was located in.

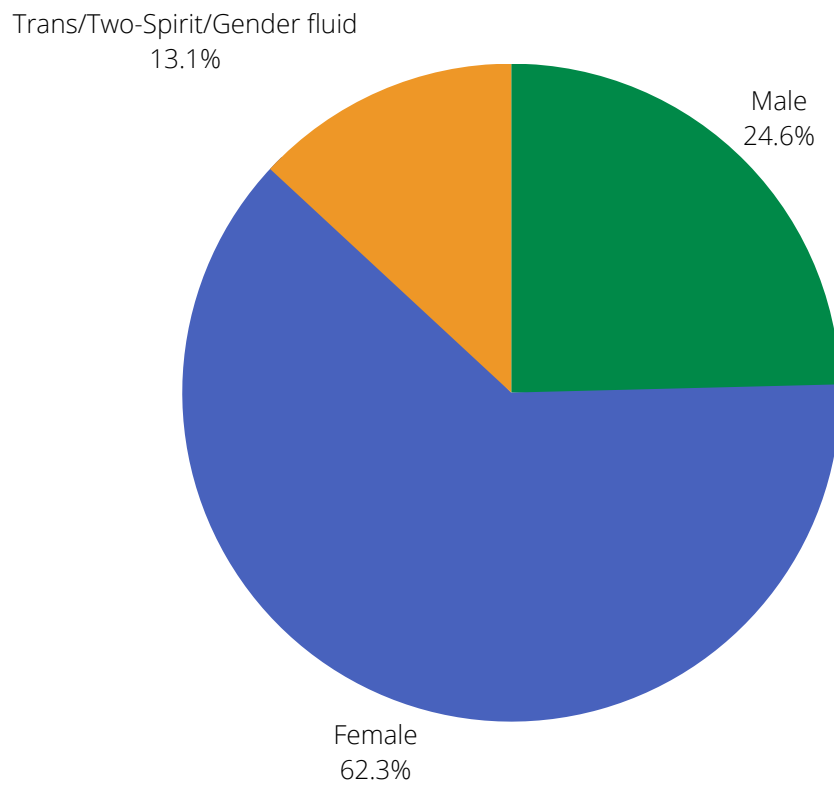
Despite the lack of available data to compare to these results, this research team values the many identity markers that make up the child and youth in care community in Manitoba. The demographics of the 114 respondents are included in the charts below.



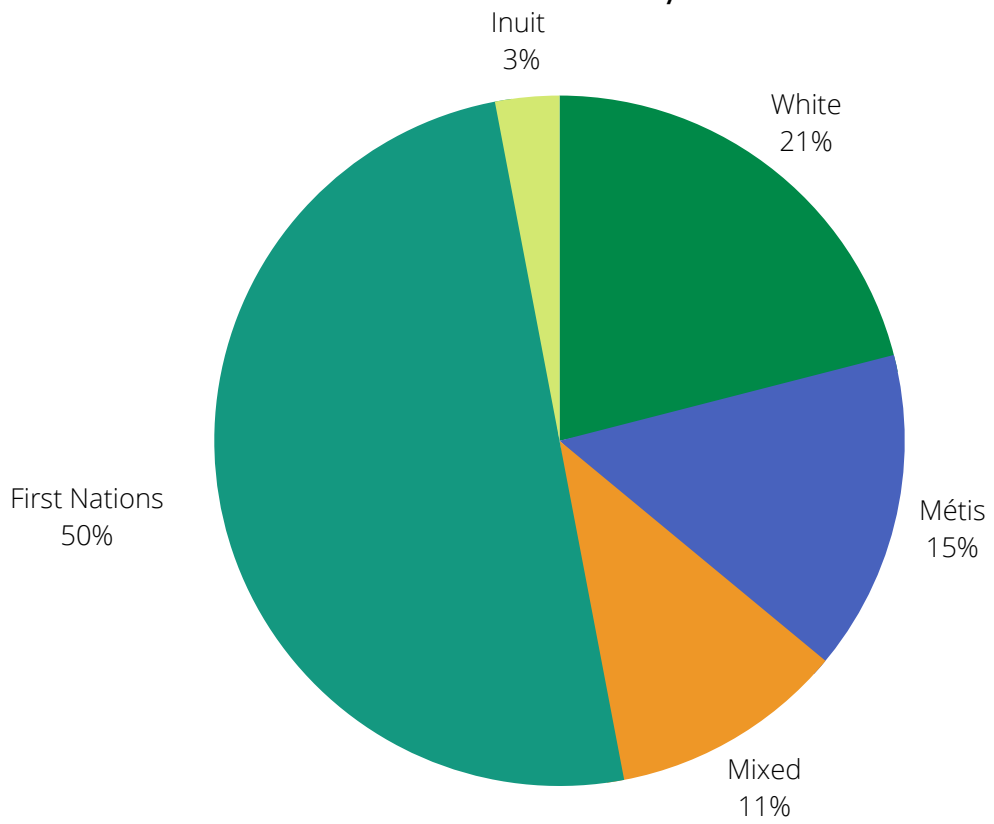
Ward Status



Gender



Racial Identity



RESULTS AND DISCUSSION

Positive and Supportive Relationships

The CFS Manual requires that caseworkers develop relationships with their clients, meet with their clients at least once a month, to begin the transition process at age 15, and regularly review the transition plan thereafter. The survey had two questions to establish whether the policies and standards of frequency of meetings and transition planning were met. Ideally, this framework of support could provide the relational and practical support necessary for a successful transition into adulthood; however, the survey results suggest that the standards and policies are not meeting the objectives they are designed for. For example, when asked how much notice they received before their AYA ended, one participant commented, "I'm not sure because I was always told I would stop getting paid on my 21 birthday but I received a new worker 6 months before aging out who I never met even once, so I don't think I was given notice really".

When examining the quantitative data, the results showed that meetings about transitioning planning are not satisfying the standards and policies in the CFS Service Manual. For example, 29% of participants reported meeting at least once with their worker to discuss transitioning out of care, an almost equal amount indicated they never met their worker to discuss transitioning out of care, and only 11% noted meeting with their worker more than three times to discuss transitioning out of care. Some participants explained that changes in workers interfered with their transition planning. As one explained:

I had 1 worker for most of my teenage years, and when I went onto extended care, she spoke to me about my plan was which was getting a job and going to college; which I never received help with. Once I was put on extended care, I received a new worker, who I never met, and we never spoke about transitioning into adulthood or making future plans.

When survey participants were asked how frequently they met with their worker (regardless of the topic discussed), youth met with their workers more often, but far below the requirement of meeting at least once a month.

- 31% met with their worker at least once a month
- 35% met with their worker at least once every three months
- 10.5% met with their worker at least twice a year
- 10.5% met with their worker once a year or less
- 6% Never met with their worker
- 4% were not sure
- <2% Chose not to answer

Survey respondent experiences with case workers varied greatly. What was clear was an inconsistency between case workers, including respondents who had a variety of case workers, and a diversity of experiences. For example, 21 respondents were informed of their exit from care six months prior, and 14 were told two to three months prior. 20 were not sure when they were informed or if they were at all. When asked if they have at least two supportive adults in their lives, 50% indicated that they did not have two supportive adults in their lives at the time of aging out of the system. Throughout the qualitative data analysis, youth repeatedly mentioned being lonely. One participant touched on this when describing some of the things they wished they'd known about as a youth in care:

I wish I knew what a healthy relationship was. I wish I knew what a healthy family was. I wish I knew what it felt like to actually be supported and not be told that I would fail at life. I wish I knew what it felt like to actually be loved. I wish I knew what good friends were.

Most children, youth and young adults have parents, aunts, uncles, grandparents, and other family and community members to draw on for support as they move through the early stages of adulthood and for a long time after. When a youth exits care, many of their supportive services end due to age and financial limitations of services. For example, their relationship with their caseworker, teachers, foster parents, and mental health support will reach a legal endpoint, usually on or near their aging out date. The process of learning how to develop and nurture a meaningful relationship will carry them through life experiences well after their CFS file is closed, which is why the standard requires them to have a support network upon exiting care.

For over 20 years, advocates have expressed the importance of secure, close, and long-term relationships for youth in care to support them when in care and upon aging out (Youth Employment Services Manitoba, 2022). These relationships cannot be limited to a specific type of support or be conditional with financial incentives for paid employees (Ahmann, 2017), but rather multidimensional relationships that include emotional and informational support, honesty, trust, authenticity, and shared values and interests (Best & Blakeslee, 2020). Youth transitioning out of care face hardship when they have not been adequately supported by foster families, group homes, and/or CFS workers throughout their infancy, childhood, youthhood, and/or adulthood (Youth Employment Services Manitoba, 2022).

Physical and relational stability is key for the overall success of youth and into adulthood (Seita, 2001). Stability becomes a greater risk of concern for youth in care due to issues such as housing instability and lack of social connections resulting from high turnover in social services (Seita, 2001).

Furthermore, relational accountability lies at the heart of Indigenous knowledge and practices.

This relationship connects individuals with the land, with family, with community, and especially with oneself: "trusting relationships take time to build, and often the length of the relationship will uncover different types of sharing and depths of knowledge... you must be committed to building and maintaining respectful and reciprocal relationships" (Rowe & Kirkpatrick, 2018, p. 12). Young people in and from care need time to connect and cultivate these deep, meaningful relationships, and standards must require that all youth have a support network upon aging out of care.

In addition to the evidence that shows the importance of healthy and stable relationships, there is an unspoken moral standard in Canada that parents support their children until they are self-sufficient, and even then, support such as holiday meals, celebrations, and an ear to listen continues throughout a child's life well into adulthood. This is not a privilege most youth exiting the child welfare system will experience. In fact, a 2013 report from the Vancouver Foundation states, "most parents who have 19- to 28-year-old children living at home provide support to their children in six areas: shopping and groceries (69 percent), free rent (69 percent), post-secondary education funding (60 percent), living supplies (56 percent), transportation (55 percent) and job advice (53 percent)" (Shaffer, M., Anderson, L., Nelson, A., 2016). While there is no research to show whether support has changed during or after the COVID pandemic, a 2022 report in the USA found that "nearly a third (32%) of Millennials and Gen Zers moved back home with their parents during the pandemic, and most still live there. Two-thirds of young adults who moved back home remain with their parents" (D. Ceizyk, Lending Tree, 2022). What this research demonstrates is that young people aging out of care in Manitoba are not treated equally or equitably to young adults who have the privilege of continued family support well into adulthood.

Advocacy and Rights

To determine if youth have self-advocacy skills and knowledge, the survey asked several questions related to their knowledge of a range of rights and advocacy supports. The results point to a significant lack of knowledge on this topic. When participants were asked if they knew what their rights were before they exited care, 88% of participants did not know what their rights were at that time and less than nine percent knew about the UNCRC. One might point the finger at the case worker, but the issue is largely systemic. On May 18, 2023, Minister of Families, Rochelle Squires was asked if she could state the legal rights for children in care, and in a written response said she could not (personal communication). When reviewing the websites of the four authorities and the subsequent agencies, most did not have the rights of children in care listed, nor any reference to them on their websites. The lack of transparency and availability of resources puts a burden on both the case worker and the youth when interpreting the gray areas of fairness and justice.

Participants were also asked about other crucial rights outside of CFS that they might need to assert in adulthood such as in housing, employment, and health care. While there is no specific CFS standard or policy that requires transition planning to include rights education, the standard requires that youth are aware of those resources, inferring that the youth would know when they need to access those services.

In the survey, participants were asked to identify a series of rights they learned before they exited care, or before their AYA ended. 40% of participants responded that they learned no rights information before exiting care. For those who did learn some rights information, 24% learned about employment rights, 20% learned about tenancy rights, and 11% learned about health rights. In the absence of rights knowledge, youth in care might seek an advocate for support, such as the Manitoba Advocate for Children and Youth (MACY).

However, 77% of participants stated that they did not know how to connect to an advocate, and 89% had not been taught about MACY before exiting care.

Understanding and defending rights is an important strategy against exploitation. When a child is born, the social norm is that their parent(s) will be their natural advocate and gradually teach those self-advocacy skills to the child until they are prepared to advocate for themselves. Even then, relatives can advocate for the child's best interest well into adulthood, as seen in crucial health care decisions. Children and youth in care lose their natural advocate upon apprehension, and that responsibility is given to the child welfare agency the child is placed in. The delegation of advocacy to a system designed to protect itself is paradoxical and can lead to severe harm. This is why MACY is vital to the protection of children and youth in care.

Learning about self-advocacy starts with understanding rights. Canada signed onto the United Nations Convention on the Rights of the Child (UNCRC) in 1991, agreeing to policies and practices that would benefit the advancement of children's rights to protection, development, and participation in decisions affecting their lives (UNCRC, 2023). Provinces are responsible for their child welfare systems, so while some provinces such as British Columbia and Ontario have incorporated specific rights for children and youth in care, Manitoba does not have legislated rights for children and youth in care. For this reason, the Manitoba Advocate for Children and Youth (MACY) and the Manitoba Government and governing bodies refer to the principles of the UNCRC for the design and delivery of services for children and youth (ACY Act, 2023). The CFS Act requires that children and youth in care know about their rights, and the CFS Manual instructs that youth are informed about their rights upon entering into care.

Without knowing one's rights, one cannot advocate for their own protection. The self-advocacy skills required by children in care reach far beyond rights and also include entitlements. Entitlement is an ambiguous term to describe the baseline socio-economic standards that most Canadians experience. This includes things like eating nutritious meals, access to education, access to water, clothing that fits, holiday celebrations, and seeing and knowing one's family and lineage. Children in care need to understand their rights, what support they can access like family visits or sports, and have identified a social network that includes advocates like parents of their friends, teachers, coaches, or elders.

Identity

To feel safe about exploring your identity and having the support to access pathways for identity exploration increases the well-being for children in care. Dr. Shawn Ginwright highlights this in his Healing-Centered Engagement approach, stating, "the pathway to restoring well-being among young people who experience trauma can be found in culture and identity" (2018). There was no significant correlation between the experiences youth shared and their agency or authority; the results show that knowledge, connection and support to explore identity is inconsistent and positive experiences are often tied to specific caregivers rather than agencies or authorities.

Culture

In the survey, participants were asked about their experiences connecting to their culture with the support of CFS while they were in care. The first question was a ranged question that went from feeling very supported to feeling ashamed. The results were spread out and inconsistent. 18% of the respondents felt ashamed about their culture, while 18% felt supported to learn and practice their culture. The other 67% were somewhere in-between and there was no trend amongst the different authorities.

The range of narrative responses from participants demonstrated the inconsistency of experiences, including youth having to seek cultural information out themselves and having a lack of information related to their biological parents, receiving their knowledge from supportive foster parents, and being shamed about their culture by their caregivers. One young person stated “[my] Metis culture was never acknowledged. Foster mom was [M]etis but told us that we were not “real” [Metis because] we were not French. Didn’t feel safe to acknowledge this culture”. Whereas another youth stated:

“My last foster mom was native and [although] she married white, we were so welcome to be who we were and matter of fact I never was near my culture till I moved in with them, they took me to pow wows Sundances etc I lived with them for 8 years. That was my last ever foster (family) home.”

The qualitative results sometimes described a system that mirrors the trauma of the Residential School System. The references to racism and religious trauma were not exclusive to one agency or authority and showed up frequently in the responses. An alarming number of participants, both Indigenous and Non-Indigenous, spoke to being shamed by caregivers, social workers and others about their identity or family in ways that range from bullying to violations of their rights and consistently did not know what to do or investigations were not completed.

In the words of some participants:

“Even though I was in care with [First Nations agency] for most of my life my long term foster home was not supportive of my indigenous culture. I was told dream catchers were demonic among other horrible statements. I feel white washed being raised in a home where my culture was perceived as demonic And was forced to

be a Christian and dragged to church. I don't understand why I wasn't placed in a culturally appropriate home and not allowed contact with my indigenous family with CFS until I was an adult."

"My foster parents are racist against everyone. They claim to be metis but use racial slurs and make fun of indigenous culture all the time, and always made a comment about native people drinking and being homeless. They made fun of my mom and always threatened I'd be like her if I didn't follow their way of life."

"[It] felt like [my group home] was like a residential school and we were forced go to their church, and weren't allowed outside unless we earned it. The school is located in the facility, and I felt stuck and I didn't have choices about where I went, how I practiced my culture and spirituality. The also had nuns there in the facility."

Kinships are known to protect cultural identity and heritage, as the ability to share traditions and practices occurs more frequently and naturally. When one can access cultural knowledge, one can build a greater sense of self and security, which is known to improve mental well-being and opportunities for success in adulthood (Brown et al., 2011). Often youth in care do not know what cultural knowledge is best to assist their needs or how to access cultural traditions and practices, if even available in their community (Doucet, 2020; Doucet, 2021). Many Indigenous and other racialized youth-from-care, who are placed with caregivers who have different ethnicities than their own, experience feelings of loss and isolation related to being disconnected from their cultural knowledge and teachings. Many Indigenous youth report experiences of racism and violence from their non-Indigenous caregivers upon expressing the desire to connect with their culture and identity (Youth Employment Services Manitoba, 2022).

For Indigenous youth aging out of care, the challenges of homelessness, financial stress, educational attainment, health and mental health supports, and other challenges that many youth aging out of care face are compounded by the colonial experience of being separated from their land, community, and family. Melanie Doucet (2020b, p. 146) outlines this disconnection:

“Most Indigenous youth...expressed a sense of grief and loss due to experiencing multiple layers of intergenerational displacement and trauma through the removal from their communities of origin and simultaneous separation from their siblings. The removal from their communities of origin also impacted their ability to form cultural connections to the land.”

Living in relation to the land is the foundation for much of Indigenous self-identity. Without intentional and meaningful restructuring of the child welfare system, Indigenous children and youth will continue to bear the burden of colonialism. The ongoing violation of their rights will continue to perpetuate harm and result in the loss of life (Fayant & Christmas, 2020, p. 17).

Gender

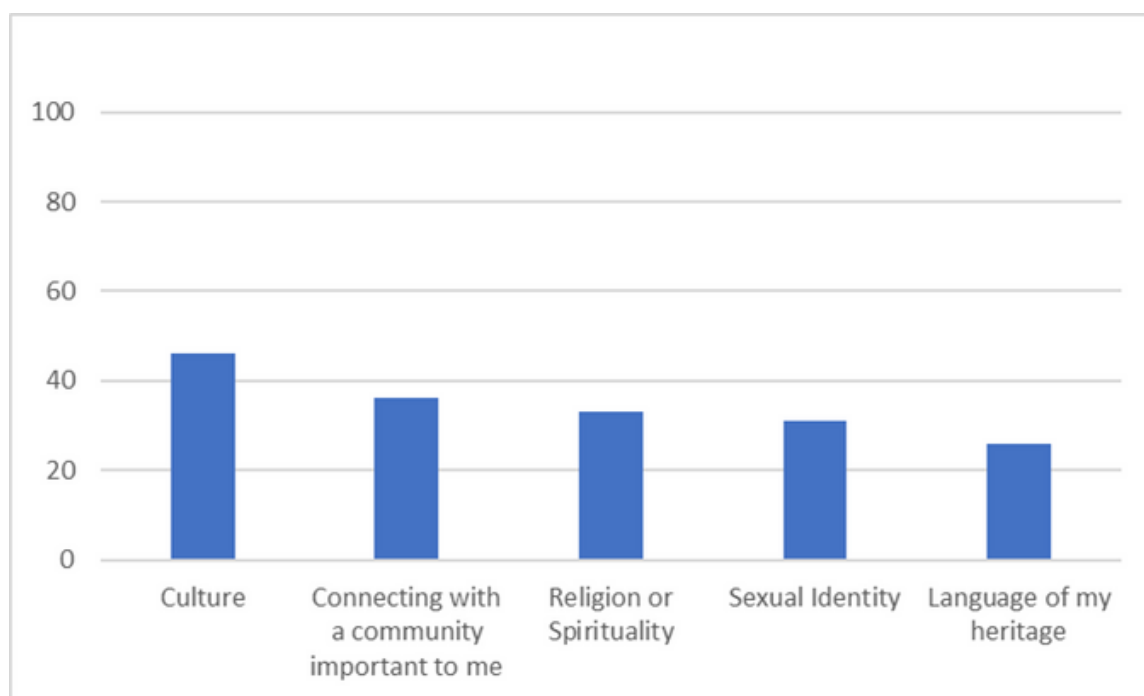
In the survey, participants were asked to provide their gender identity (woman, man, transgender, non-binary, two-spirit, another gender, and choose not to answer). On the topic of gender, 79% of all participants expressed that they did not feel safe to explore, learn and practice their gender identity while in care. The research team at the Centre for Social Science Research and Policy then looked at the results of transgender, non-binary, and two-spirited people on themes and participant outcomes such as education, housing, and employment. In total, 13% of the survey participants identified as gender diverse (transgender, two-spirited or non-binary – none identified as another gender).

Of those who identified that they are gender diverse, only one person (1%) has made above \$26,620 since exiting care compared to 13% for cisgender males and 19% for cisgender females. This is likely related to low numbers of gender-diverse youth having stable employment since exiting care. Of the gender-diverse youth, 53% have not been able to keep employment for longer than six months. This points to a disparity that government, non-profits, and post-secondary institutions need to examine further.

The concept that gender is dichotomous is rooted in a colonial belief and continues to impact children in care today. According to Margaret Robinson, "settler-dominated communities are undergoing a cultural shift toward challenging binary categories of sex and gender, causing some settler governments to adopt a multi-gender framework reminiscent of the Indigenous systems they aimed to erase through colonial systems and practices" (2019, p. 1678). In June 2017, the Canadian Government amended the Canadian Human Rights Act and the Criminal Code to add gender identity and gender expression to the list of prohibited grounds of discrimination (House of Commons, 2017). It is unclear how the Government of Manitoba, Department of Families, Authorities and Agencies have adapted training and services to ensure youth have their rights upheld by ensuring youth in care are safe to explore their gender by caregivers, case workers, or the CFS system.

Other Identity Outcomes

Below is a chart of other components of identity and whether youth felt safe to explore, learn and practice them while in care.



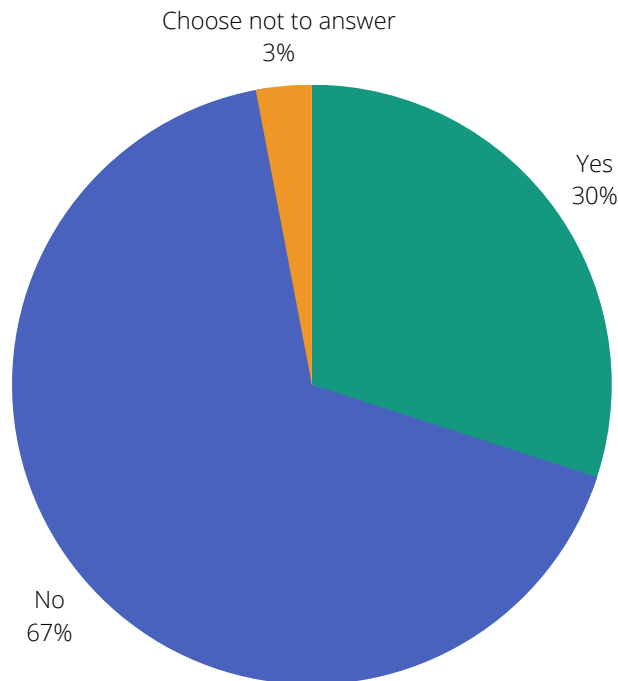
Education

Positive educational outcomes for youth in and from care are pivotal to ensuring youth transition into a successful adulthood. Graduating from secondary school increases the chances of one earning above the poverty line, decreases negative health outcomes, and improves housing security (Office of Disease Prevention and Health Promotion, nd.). The total number of survey participants who graduated from high school (65%) before exiting care was higher than the provincial average of 33% for youth exiting care. The last report on high school graduation rates of youth in care was conducted in 2015 (Manitoba Task Force on Educational Outcomes of Children in Care, 2016). At the time of this report, there was no recent data about the post-secondary graduation rates of former youth in care that could be compared to the survey results. In the survey, 17.5 % of participants stated they have graduated from post-secondary school, and 16% are currently attending post-secondary school. The lack of tracking and reporting on post-secondary outcomes of former youth in care in Manitoba makes it difficult to determine whether graduation rates have in fact increased for youth in care, or if it is a result of how the survey was disseminated, or a variation of the two.

As per the CFS Service Manual, youth transitioning out of care should be aware of adult services and explore future learning opportunities such as post-secondary school. In Manitoba, people in and from care can choose one of 10 post-secondary schools to apply to receive a tuition waiver. The Tuition Waiver program provides support through three entities: Futures Forward, each individual educational institution, and the Manitoba Government Workforce, Training and Employment program (WTE). Futures Forward supports potential students in applying for a waiver and throughout post-secondary school. Post-secondary institutions select which students will receive the award and on-campus support. The WTE program provides financial resources to support youth who are currently receiving a waiver. 100% of tuition waivers in Manitoba are funded by private donations to post-secondary schools.

Despite the tuition waiver being available to youth with lived care experience in Manitoba for the last eleven years, only 30% of survey participants stated that they had heard of the program. Those who did receive a tuition waiver found them helpful and were grateful to be made aware of the program. Results also showed that those who have secured secondary and post-secondary education are much less worried about homelessness and food insecurity than those who have not completed high school. Without the opportunity to complete school, many youth-from-care are unable to access other areas of the labor market, leading to low-paying positions (Silver, 2022). CFS systems need to work in collaboration with other social services and systems, like Adult Learning Centres, to ensure that children and youth's well-being and welfare is prioritized (Silver, 2022).

Proportion of Respondents told about Tuition Waivers/Bursaries



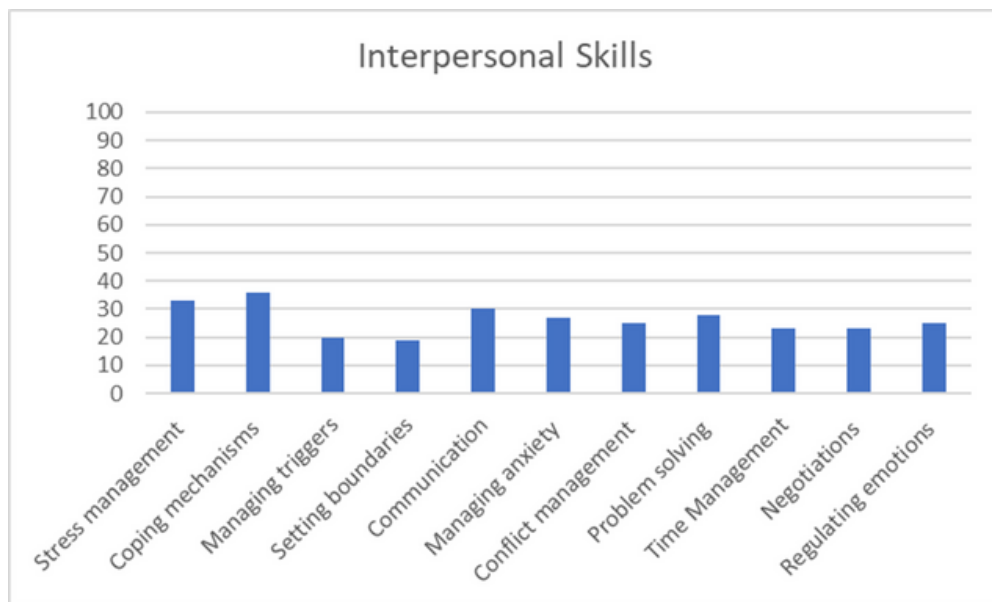
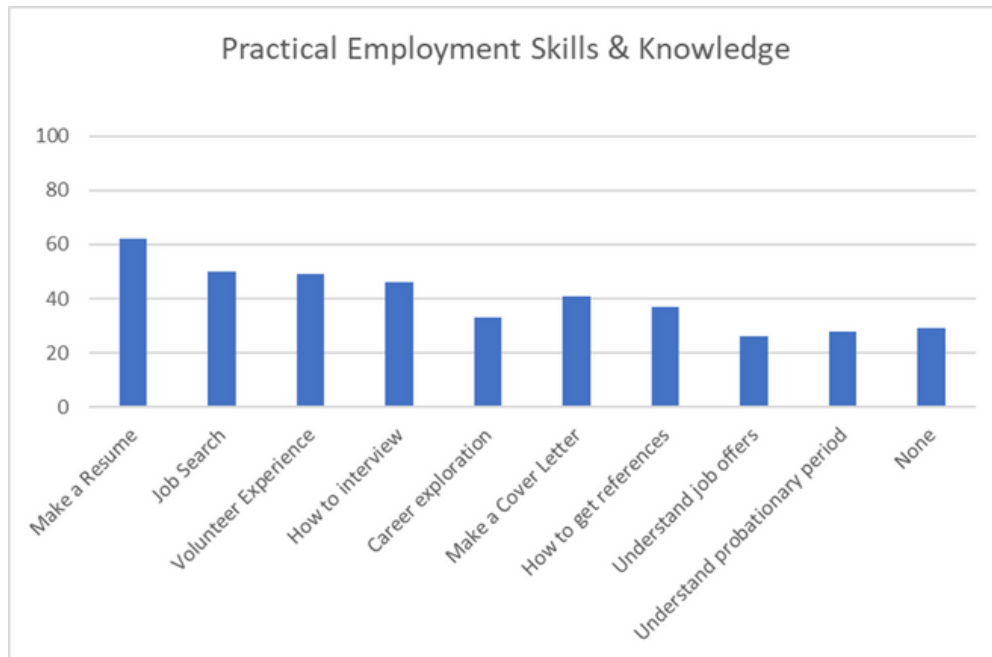
In Canada, the education system is the responsibility of federal, provincial, and municipal governments. It is widely agreed that education is a pathway to economic prosperity for Canadians (Morgan, 2011). Additionally, an educated population tend to earn more income, have fewer health issues, and experience reduced crime (Gahagan, Kirby, Ritchie, Anderson, 2022). The relationship between educational challenges and CFS is supported by a wealth of data, revealing that a large portion of foster children experience at least one of the following: special education, high rate of absenteeism, expulsion, suspension, low learning attainment, less likelihood of graduation, and/or higher likelihood to repeat a grade (Youth Employment Services Manitoba, 2022). People with lived care experience are half as likely to attend post-secondary education as other Canadians, but when adult supports and care-providers invest in the educational experiences of youth, and provide the necessary supports, young people are “likely to strive to achieve at school” (Mann-Feder, 2022, p.49).

Students require several skills to be successful in school including literacy, communication, problem-solving, and critical thinking to more practical skills such as taking notes, writing papers, creating education plans, and selecting courses. Canadian values place the development of education-based skills for children and youth on their households and in the primary and secondary school systems. When it comes to children and youth in care, statistics show that they have predominately worse education outcomes compared to their peers. There are many reasons for this such as 'placement bouncing' or frequent home and school moves while in care, a lack of belief that they can attend post-secondary school, the absence of support in the household, living in poverty, being a first-generation newcomer student or being a particular gender or race alone (Kovarikova, 2017, p. 9).

Employment

The research team wanted to know more about the employment experiences of participants since exiting care. Employment skills for youth extend beyond practical skills such as making a resume but also require cognitive, social, and emotional readiness. Further, "readiness is impacted by the nature in which a person is physically, socially, cognitively, and emotionally able to become ready" (Youth Employment Services Manitoba, 2022). It is well documented that children and youth in care have developmental impairments due to childhood trauma, inferring that children and youth in care need more cognitive, social, and emotional development time than the general population (Youth Employment Services Manitoba, 2022; Pecora et al, 2009; Rebbe et al, 2018; Fuchs et al, 2008; Ginwright, 2018; Doucet, 2020; Doucet 2022).

The survey asked participants about a variety of employment skills they had when exiting care and the results demonstrate a need for improvement if the goal is to ensure youth are ready to be independent, and not relying on government support.



The employment skills survey results show that more youth are exiting care with practical employment skills compared to interpersonal skills. For example, when participants were asked several questions related to interpersonal skills knowledge, the most reported skills were coping mechanisms at 32% and the lowest was recognizing triggers at 17.5%. The other skills (see the chart above) were a range in between. This suggests that youth who have exited care have skills to obtain employment but lack the skills necessary to maintain employment such as how to recognize one's triggers. Losing employment can lead to feelings of failure, embarrassment, and depression in addition to the fear of losing basic needs due to a lack of finances. As seen in this report, many youth do not leave care with adults who could provide financial support between jobs.

When survey participants were asked about their employment experiences, 71% indicated that they have been employed since exiting care, 60% have maintained employment for 6 months or more, and 35% have been fired or laid-off. Age seemed to be a contributing factor to stable employment, as one participant stated, "only in the last couple of years I have been able to [keep] a job for 9 months, but when I was younger, I could only keep a job for 3 months or less". The relationship between age and employment stability is also seen when comparing those who have been employed for six months or more and the age categories 18-21, 22-24 and 25-30 years old (inclusive). The results show that 36% of youth between 18-21 maintained employment longer than six months, with gradual increases for the next two categories, 42% and 54% respectively. By allowing youth more time to develop and practice their employment skills, they are more likely to maintain stable employment, have better health outcomes, and overall survival (Youth Employment Services Manitoba, 2022; Doucet, 2020a).

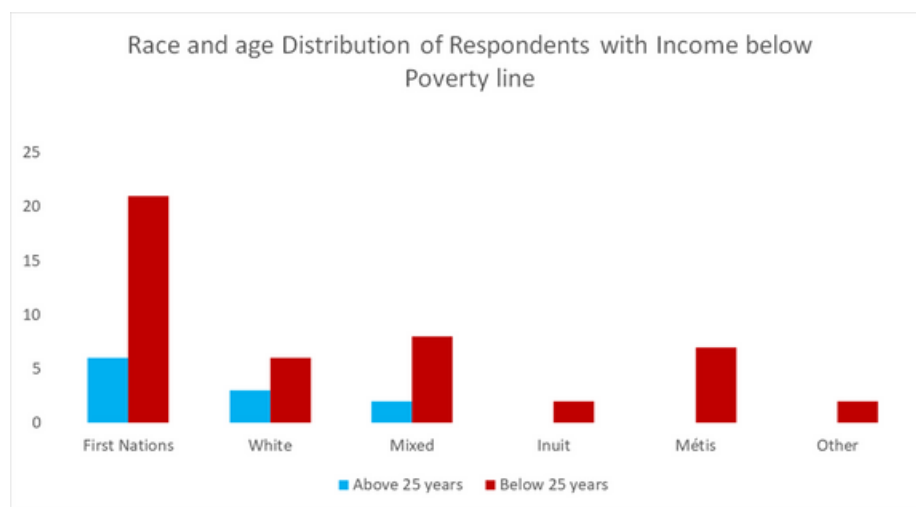
It is widely reported that youth entering the workforce are likely to earn low wages, be more vulnerable during economic and health crises, and lack the skills required by employers (Government of Canada, 2023). Much of what is reported in the literature shows a focus on educational and employment transitions. Few programs directly address the barriers that prevent youth from obtaining and maintaining employment, such as safe and affordable housing (Youth Employment Services Manitoba, 2022). CFS's transition planning standards refer to employment once, outlining the requirement for youth to have the skills to plan for employment readiness, but does not extend to define the skills for employment readiness or the support that will be provided.

In general, youth entering the workforce have a harder time securing employment because of the lack of skills and experience required that many employers are looking for. The issues around gaining employment for youth were compounded by the COVID-19 pandemic which saw a dramatic rise in unemployment, especially for youth (Young People Hit Hard, 2021).

To help support youth exiting care, a Moratorium on youth exiting care was enacted between March 20, 2020, to March 2022. The Moratorium allowed youth to extend their care services regardless of their age, care status and goals until the end of the Moratorium (Hobson, 2020, & Bains, 2021). Understanding the resources available to youth in care and the lack of jobs in Manitoba during the pandemic is important to the data collected as those who received support during the Moratorium will have different experiences than those who were not eligible or did not receive continued support from CFS during the pandemic.

Finances

Young people transitioning from care are at a high risk of experiencing poverty as adults, as they struggle to balance financial responsibilities with limited financial means (Campaign 2000, 2023). While most young people will agree that their ability to budget is limited, it is important to recognize that with the rising cost of living, many young people do not earn enough money to meet their basic needs (Office of the Children’s Advocate, 2013). The survey results showed that 93.5% of participants who received a high school diploma or post-secondary training have earned more than \$26,000 compared to 50% of youth without a high school diploma or greater. Gender may also play a factor in the participants’ income; of the 15 transgender, non-binary, or two-spirited participants, only one has made above \$26,000.



The potential financial responsibilities that youth transitioning into adulthood may face include how to open a bank account, saving and investing money, credit cards, credit rating, managing money, budgeting, and debt management.

The reported financial literacy levels of the survey participants upon exiting care were low, and less than 50% exited with a bank account. After opening a bank account, the most common skills that youth exited care with were budgeting and saving money (42%). Understanding debt and credit cards were the least common at 16% and 19%, respectively. While youth might understand how to budget and how to save money, they might not understand the negative impact that credit cards and loans could have on their financial stability or even the foundational understanding that credit cards and loans are not free money. As shown, youth exiting care are experiencing poverty, barriers to employment, and lack the financial literacy skills that could prevent creating an even larger financial hurdle to overcome.

Some ways the provincial government has addressed poverty and the inequity of youth exiting care face is through government programs such as AYA, Canada-Manitoba Housing Benefit, EIA, EAPD, Employment Insurance, Supports for Young Adults Grant, and Rent Assist. One program offered by Telus, called Telus Mobility for Good, also provides support for youth from care with a free cellphone and service. Food banks are another service that youth who have exited care often access, and they are funded both by the province and private donations. One participant remarked about their decreased anxiety about food, "I usually go to the food bank and free meals, so I haven't had to worry about hunger so much because of the support from organizations". While the goal for young people is not to rely on food banks, it is clear with increasing food insecurity having access to food has a positive effect on the health of youth who need it.

When survey participants were asked about what financial services, they were aware of upon exiting care, the top five services were: AYA, EIA, Financial Counseling, EI, and Telus Mobility for Good.

Of the survey participants who indicated they were permanent wards at the time they were emancipated from care (n 76), 75% received an AYA, which allows youth 18–21 years old to continue the services they received while in care either through continuing their placement, living in rental housing, or transition housing. Factors that determine how much youth might receive include dependents, disability accommodation, and travel expenses. Despite the efforts to provide continued support through the AYA program, some survey participants who received this service still worry about homelessness or food insecurity, and they are not in better health than their peers who did not receive an AYA.

Several qualitative responses described appreciation for AYAs and the goals they were able to achieve while receiving the service. One youth respondent stated, “I am very grateful to be on AYA. It helps relieve a lot of stress, because I have a few problems mentally and physically that make it difficult for me to find a decent job close to me that isn’t far away, or requires a diploma, car, special skill!”. Another respondent stated that without AYA, they are certain they would have been homeless. Yet, because of their AYA, they had stable housing, attended post-secondary school, and found work. Survey respondents repeatedly stated that they were more financially secure and were more able to pay their bills, eat, and access health care (better quality of life) when they were students, in part because of the financial support received while on an AYA, as well as tuition waivers and the accompanying living allowance, and bursaries.

There have been calls for action by advocates to change criteria for AYAs to mirror best practice standards and incorporate practices seen in other provinces such as expanding the eligibility age to 25 years old and increasing eligibility to all youth who have exited care in Manitoba, regardless of their ward status (McEwan–Morris, 2012; Doucet, 2022; Bergen, 2023). Equitable investment in youth in care into adulthood has shown to save the government millions of dollars. The Opportunities in Transition report includes a cost-benefit analysis showing that extending supports for youth in care until the age of 25,

in British Columbia, would decrease significant annual costs (estimated at \$268 million) that are associated with the adverse experiences many youth aging out of foster care, at a much lower level of investment (\$57 million per year) (Shaffer, Anderson, Nelson, 2016). Advocates in Manitoba have been calling for an extension of care since 2012 and the provincial government committed to this call for action, but little progress has been made (McEwan-Morris, 2012; Doucet, 2022; Bergen, 2023).

In April 2022, the Department of Families utilized the Emergencies Act to announce the Supports for Young Adults Grant (SYAG) in April 2022 and this grant could provide an extension of CFS support services to all former young people in care regardless of legal ward status who aged out of the system until 26 years old. However, eligible youth must have an open case file with CFS, and the worker will make the final decision about accessing the program and the amount of support they will receive. Because the funding is from the Emergencies Act, the CFS complaints process does not apply should a youth want to challenge the decision. Because of this integral difference, the government could not call it an AYA (CFS Act, 2023). Near the start of the survey, participants were asked if they received post-care support such as an AYA and the SYAG. When analyzing the results, 5% of respondents stated they received SYAG support, but when the answers were cross-referenced with the eligibility requirements (born April 1999 or later) the number was reduced to just under 2% or 2 people. Part of the issue is the dissemination of information from CFS to the authorities and then to the agencies. As previously mentioned, and in the case of the SYAG, the Department of Families creates policy and funds authorities to invent their own internal process for providing the information and funding to agencies. Agencies, in turn, will create their own internal policies on how to apply and what youth can receive, so with the grant becoming available the day after the moratorium ended, there was likely insufficient time for authorities and agencies to create processes to ensure youth did not fall between the cracks.

Furthermore, if a young person were to look for this grant using a search engine, there is no information from CFS, Authorities, or Agencies on how to apply, thereby creating more barriers for youth to access this fund.

Health and Wellness

To evaluate readiness related to health, participants were asked a series of questions about personal health information upon exiting care including diagnoses, disabilities, and access to programs and services like Non-Insured Health Benefits for First Nations and Inuit (NIHB). They were also asked to report if they had the following personal health information upon exiting care: personal health card; vaccination records; blood type; allergies; medications; contact information for their doctor, dentist and optometrist; and family medical history. Finally, participants were asked about their knowledge of health rights, access and knowledge about services, safe sex, reproduction rights and options, nutrition, disability support, and mental health skills.

The results highlight inequities and unjust transitions into adulthood for youth exiting care in Manitoba. Many survey participants exited care without basic knowledge of important medical history and without continued health, dental, and prescription benefits. To access healthcare services in Manitoba, youth require their personal healthcare number, yet less than 53% of the survey participants exited care knowing the number or having the card in their possession, and 35% exited care without knowing their healthcare number, medications, doctors' information, blood type, and vaccinations. Only 55% of respondents received information about mental health services and 41% received counselling prior to exiting care.

One aspect of health that people in Canada may take for granted is knowing their family health history and one's own personal health history such as blood type and vaccinations.

This information is important for accessing medical support and is often asked for by medical professionals as it can assist with diagnosis and treatment. Research shows that a lack of understanding of personal and familial health information can exasperate other health conditions and create barriers in transitioning from pediatric to adult services (Dexheimer JW, Greiner MV, Beal SJ, Johnson D, Kachelmeyer A, Vaughn LM., 2019). Only 2.6% of survey participants knew about their biological family's health history. To compound this issue, once their file has been closed, youth must apply to their last agency to receive the information and the agency can decide whether to provide the information or not with no legislation regarding a reasonable response time. Knowing one's personal and familial health history is one way to reduce the barriers that youth face when accessing health services as a young adult. Knowing this information will likely reduce some of the burden that healthcare staff face when trying to support a young adult who does not have identification, or know their healthcare number or their family medical history.

The CFS Service Manual Preparing Youth for Leaving Care section (1.17) refers to physical health and referrals to appropriate adult services. Specifically, the standard states "continued medical, dental, and prescription coverage." (2023). Ensuring continued medical, dental, and prescription coverage is an impossible task for caseworkers as continued dental and prescription coverage is not free in Manitoba. The Government of Manitoba does offer an income-based prescription drug benefit program, called Pharmacare, which covers the cost of prescription medications after a deductible is paid (Government of Manitoba, 2023). Even though all youth exiting care in Manitoba would be eligible for this program, only 11% of survey participants knew about this program before exiting care. While it might not be realistic for case workers to ensure youth exiting care to have the same or similar benefits, youth could be set up for success and continued support with Pharmacare.

It is well documented that children and youth in care grow up in environments (both home and the system) that cause adverse childhood experiences (ACE's). According to the Center on the Developing Child, there are "three specific kinds of adversity children faced in the home environment—various forms of physical and emotional abuse, neglect, and household dysfunction and people with high ACE's score have an increased risk of depression, substance abuse, smoking, suicide ideation, and early death (Centre on the Developing Child, 2023). While no government department is mandated to provide trauma therapy, the relationship between adverse childhood experiences, PTSD and developmental delays can interfere with adult readiness (Leal-Ferman et al, 2022). Continued mental health supports and better access to trauma therapists who are specifically trained in trauma-therapies like cognitive behavioural therapy (CBT), prolonged exposure therapy (PE), Eye Movement Desensitization, and Reprocessing Therapy (EMDR) is vital for the health, well-being, and life expectancy of children and youth in care (WebMD Editorial Contributors., & Bhandari, S. (Eds). 2022).

When young people age out of care, the health and mental health supports that they have come to rely on are immediately withdrawn. If young people do not have access to psychological services after-care, and if their mental health concerns are not addressed prior to exiting care, their ability to integrate into society is impeded (Leal-Ferman et al, 2022). Access to healthcare and mental health supports are rights that are greatly impacted by the long wait times in Manitoba's healthcare system, as well as the financial cost associated with getting appropriate care and diagnoses for specialized care and support in adult systems.

Far too often, youth with complex, multi-system needs and/or mental health and addictions are left to search for opportunities and support without assistance, leading to a lack of personalized support (Stein & Dumaret, 2011).

Studies show that youth with adverse childhood experiences have a “high risk of many health problems in young adulthood including hypertension, diabetes, being a smoker, heart disease, stroke, attention deficit hyperactivity disorder, and asthma compared with peers who have not resided in foster care” (Rebbe, Nurius, Courtney, Ahrens, 2018). On top of this, there is a lack of natural advocates to help youth and young adults navigate the complexity of the health system, and this becomes more problematic when youth are Indigenous and exited from foster care. Without the support of family or community resources, many young people transitioning out of care have trouble managing their mental, physical, and emotional abilities and barriers (Youth Employment Services Manitoba, 2022).

Housing

The Manitoba Homeless Strategy is part of the work that the Department of Families is responsible for. Yet, the pillars, strategies and announcements of new low-income housing lacks any commitment specifically for folks who exited care. When survey participants were asked about their housing situation upon aging out of care, one youth stated, “I was dropped off at a homeless shelter” and several females stated that they stayed in abusive relationships or engaged in sex work to remain housed. Most participants described having core housing needs at some point since aging out. The Canada Mortgage and Housing Corporation describes core housing need as when a household does not meet adequacy, suitability, or affordability standards, and when it costs the household 30% or more of their before-tax income to access housing that meets all three standards (2022). A total of 19% of survey participants indicated current core housing need, which includes homelessness, emergency shelter, transitional housing, couch surfing or more than two people living in a single-room occupancy situation.

Several participants attributed their housing stability when they were in school to the living allowance provided to tuition waiver students.

For example, one participant stated, "I have been on the brink of homelessness many times since I aged out. The only way I get help with money is when I go to school. I get funded an allowance and that gets me by".

The complexity of youth exiting care into the rental market is further compounded by the barriers to accessing housing that many of their peers would rely on their parents for support with, such as bad or no credit, references, guarantor, or damage deposit. Of respondents who have been denied housing, the top five reasons were:

1. Bad or no credit
2. No references
3. No guarantor
4. No money for damage deposit
5. Too young

Many youth not from care have continued support from their parents to learn, practice and master housing skills such as how to pay rent, find rental housing, pay a damage deposit, navigate housing services and support, how to live with roommates and how to get utilities in their name. Yet, youth exiting care are not provided with an equitable transition and support. 37% of survey participants indicated that they did not have any of these skills prior to exiting care, and less than 20% knew about housing advocates. The correlation between their age, credit history, lack of skills knowledge, and lack of a guarantor continues to compound the barriers, inequity, and exploitation that youth exiting care face when accessing a basic need such as housing.

In 2020, the provincial government announced the Canada-Manitoba Housing Benefit - youth stream.

Initially, this fund provided youth from care \$250 per month to help with additional costs, and recently this grant has grown to \$350 a month and can be accessed until one becomes 26 years old. When survey participants were asked if they knew about this program prior to exiting care, roughly 10% knew about the benefit. This grant is distributed by the government through Manitoba Housing, which falls under the Department of Families. It is unclear how many former youth in care have accessed this program, but this study shows that there is a need to engage youth and invest in the marketing of this grant.

Safe and affordable housing is a necessary component of success in educational, employment, and life skills development. Safe and affordable housing is a primary determinant of health (Dunsmore, 2019). Young people aging out of care are 200 times more likely to experience homelessness than young people who have never been in care (Campaign 2000, 2023). Young people who are homeless or precariously housed are at great risk of being vulnerable to exploitation or abuse in exchange for shelter. Without access to safe and affordable housing, young people will continue to experience persistent barriers to obtaining their education, employment, and other life goals (Dunsmore, 2019). More than a quarter (1,400 or 27%) of Winnipeg homeless people in 2017 were young people between the ages of 16 to 29 (Healthy Child Manitoba, 2017). Overall, Manitoba has varying levels of community wellness resulting from the fluctuations that occur from economic, social, cultural, and health interests and challenges (Youth Employment Services Manitoba, 2022).

The Manitoba government is developing a Homelessness Strategy. In the discussion paper shared on the Manitoba Families website (n.d.), Five pillars are proposed to address homelessness, the third being focusing on prevention:

Prevention is more effective and less expensive than intervening after an issue is entrenched," it reads, and goes on to acknowledge the need to address systems that discharge people into homelessness: "significant life transitions can increase the risk of homelessness, such as aging out of the child welfare system... Ensuring appropriate planning and supports are in place, closing gaps in service and providing service navigation are essential to reduce the chance of these transitions leading to homelessness." It is important to recognize the systemic and structural barriers that constrain the ability of young people to access safe and affordable housing. As Dunsmore (2019) explains, "efforts to address systemic failures leading to youth homelessness can include better alignment of government and community systems to ensure that nobody is discharged from [care] into homelessness" (p. 10).

CONCLUSION

The survey research was intended to provide information about the skills, knowledge and emotional readiness that youth transitioning into adulthood require to be successful. The results point to areas of focus that the Department of Families, CFS Authorities and CFS agencies must strive for in an equitable transition into adulthood for youth aging out of care in Manitoba. The concept of “adulthood readiness” is rooted in knowledge acquisition and learning as a process to ensure one can obtain the skills or information required for adulthood (Youth Employment Services Manitoba, 2022). In a general sense, to be ready means having the skills or knowledge to be able to complete, handle, or process a situation--whether one must navigate life’s challenges or personal goals and desires, we all wish to be ready to have a successful transition (Dunsmore, 2019; Silver, 2022).

In the absence of transparent, youth-friendly, and accessible information explaining what skills, knowledge, abilities, and relationships support a youth can expect and are entitled to in their transition out of the CFS system and into adulthood, former youth in care known as the Research Ambassadors (RA’s) created their own lists. The readiness-based lists led to the development of survey questions, that were disseminated to their peers through multiple channels. The results show that the system is not meeting its own standards and policies and the impact on youth exiting their care range from inequitable to traumatizing. While not all qualitative and quantitative responses were deficit-based, those who did have positive memories reflected that the experience is related to a positive relationship like a foster parent or case worker.

A troubling theme that emerged from the research results was the incidences of abuse, racism, and a lack of safety to explore identity while in care.

There were multiple reports from participants about caregivers and social workers who lack empathy, trauma-informed support, and use their power to punish noncompliance. It is unclear if youth know that racist and abusive treatment is against their rights, as only 12% of participants were told about their CFS rights before exiting care and 40% of participants were provided no rights information at all (housing, health, employment etc.). Furthermore, the CFS transition standards does not include self-advocacy skill development. With 50% of the youth aging out without at least two positive adults in their lives, the vulnerability for rights violations and exploitation increases.

Outside of the connection of development and safety as important factors that influence readiness for adulthood, the research demonstrated a significant deficit in the hard skills in employment, financial literacy, housing, and health. Preparation for adulthood includes financial literacy skills and practical tools such as a bank account. Yet, 50% of youth reported leaving care without a bank account and one participant remarked that how they obtained a bank account was being dropped off at a bank by their caregivers. Less than 20% of participants knew about credit and debt, which creates an increased risk of debt acquisition for folks exiting care into poverty. While most of the participants were able to obtain employment, a significant portion of participants have not been able to maintain stable employment. The lack of stable employment could be related to the low hard and soft skill acquisition youth had upon exiting care. Survey participants have various experiences related to housing, but the majority of barriers were related to credit scores, references, guarantors, ageism, or paying deposits. Increased debt, unstable or barriers to employment and housing can lead to decreased health outcomes and the concept of independence requires youth to navigate these systems by themselves. However, this research shows a significant amount of youth exited care not aware of their health care number and card, how to access to mental health supports, and extended health benefit programs, such as Pharmacare.

One program that had positive outcomes was access to the tuition waiver program. This program is only available to a small percentage of the former youth in care population in Manitoba, but if selected participants are guaranteed a basic income while attending school. Several participants remarked that the stability of these funds allowed participants to focus on their career goals and increased mental wellness. Furthermore, those who completed high school or post-secondary school are almost certain to make over \$26,000 in a year compared to those who have not completed grade 12. This demonstrates a strong correlation between basic income and access to education as pathways out of poverty and better mental health outcomes.

This research shows there is an immediate need to reexamine the knowledge and skills development transitional support youth receive before and after exiting care. While the participants are a small sample of the total population, the results illustrate a system that substantially contributes to the significant amount of harm to some of the most vulnerable Manitobans and the answer to why still needs to be examined. So let this report be a call to action for CFS, the four Authorities, CFS agencies, foster parent agencies, and advocates to create an equitable transition to adulthood with access to the knowledge and skills required to be self-efficient while being surrounded by multiple people who champion and support young people exiting care and emerging into adulthood.

APPENDIXES

1) Aging Out Survey

AGING OUT OF CARE IN MANITOBA SURVEY

Your safety and privacy are important to us. All the information collected in this survey is confidential; no one will be able to identify you based on the information you provide.

The Manitoba government will not have access to any reported data that might identify the survey participant. All the data collected in this survey is collected by the [Centre for Social Science Research and Policy](#). This organization will create a summary report for [YES Manitoba](#) ensuring that no identifiable information is included in the report.

What is the research about?

Youth Employment Services Manitoba (YES Manitoba) is conducting research with youth transitioning out of Manitoba Child and Family Services (CFS) into adulthood. There are two related things YES Manitoba wants to know: 1) did youth have the necessary skills to be ready for adulthood when they aged out of CFS services; and 2) how are these youth fairing now?

This survey was created with the support of the [Research Ambassador](#) team, a group of youth who aged out of Manitoba's child welfare system. The Research Ambassadors range from 20-29 years old and include representation from each of Manitoba's four Authorities (Northern, Southern, Métis and General).

Youth should have a successful transition out of government care. We are interested to learn if youth are exiting government care with the necessary skills for adulthood and identifying areas where the government can improve.

Survey eligibility:

- You are 18-29 years old
- You have exited care in Manitoba on your 18th birthday, or you currently or previously received Agreements with Young Adults (AYA or Extension of care) or the Supports for Young Adults grant.
- While in government care you were a permanent ward, temporary ward, or voluntary care agreement. If you aren't sure, you can find ward definitions here.

Comment boxes: If you would like to tell us more about your experience related to any of the questions, you can put this information in the comment boxes below each question or set of questions, but it is not a requirement.

There might be some **unfamiliar words and terms**. If you are not sure what the word means, try hovering your mouse over each word to get the definition or an example. **This feature may not be available if you are completing the survey on your phone.**

1. Are you 18-29 years old (up to and including your 30th birthday)?
 - a) Yes
 - b) No

2. Have you either exited care in Manitoba on your 18th birthday, or have you currently or previously received AYA or a Supports for Young Adults grant? Select all the experiences that apply to you.
 - a) I exited care on my 18th birthday
 - b) I received an Agreement with Young Adults (AYA/Extension of Care)
 - c) I received the Supports for Young Adults Grant
 - d) None of these apply to me

3. What month and year were you born in?

4. Approximately how many years were you in CFS care in total?
(Please enter a numeral below for the number of years you were in care. For example, 1 or 7 or 14.)

Number of years in care _____

Any additional information you would like to add? (optional)

5. What CFS Authorities do you have experience with while in care? (Select all that apply)
 - a) General
 - b) Métis
 - c) Northern
 - d) Southern
 - e) Another Authority (please specify):
 - f) Not sure (please explain):
 - g) Choose not to answer

6. What CFS agency or agencies provide you services while in care? (Select all that apply.)
 - a) General - Central Manitoba CFS
 - b) General - Rural and Northern CFS
 - c) General - Jewish CFS
 - d) General - Western Manitoba CFS
 - e) General - Winnipeg CFS
 - f) General - Unknown
 - g) Métis - Métis
 - h) Métis - Michif

*the online survey provides descriptions for several of the words that are not available in the printed copy

- i) Métis - Unknown
- j) Northern - Awasis
- k) Northern - Cree Nation
- l) Northern - Island Lake
- m) Northern - Kinosao Sips Minisowin
- n) Northern - Nikan Awasisak
- o) Northern - Nisichawayasihk Cree Nation
- p) Northern - Opaskwayak Cree Nation
- q) Northern - Unknown
- r) Southern - Anishinaabe
- s) Southern - Animikii Ozoson
- t) Southern - ANCR
- u) Southern - Dakota Ojibway
- v) Southern - Dakota Tiwahe
- w) Southern - Intertribal
- x) Southern - Kinonje Abinoonjiag Niigan
- y) Southern - Sagkeeng
- z) Southern - Sandy Bay
- aa) Southern - Southeast
- bb) Southern - West Region
- cc) Southern - Unknown
- dd) Unknown
- ee) Not sure (please explain):
- ff) Choose not to answer

Any additional information you would like to add? (optional)

- 7. What was your care status on your 18th birthday?
 - a) Permanent ward
 - b) Temporary ward
 - c) Voluntary placement
 - d) Not sure (please explain):
 - e) Choose not to answer

- 8. What month and year did you receive your last payment from CFS?

- 9. How much notice did you receive before your AYA ended?
 - a) 6 months or more
 - b) 4-5 months
 - c) 2-3 months
 - d) 1 month
 - e) Less than 1 month

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- f) I wasn't informed
- g) Not sure (please explain):
- h) Choose not to answer

Any additional information you would like to add? (optional)

10. What country were you born in?

- a) Canada
- b) Another country (please specify):
- c) Choose not to answer

10a) Do you have Canadian Citizenship¹?

- a) Yes
- b) No
- c) Not sure (please explain):
- d) Choose not to answer

10b) Do you have permanent residency²?

- a) Yes
- b) No
- c) Not sure (please explain):
- d) Choose not to answer

Any additional information you would like to add? (optional)

11. What city or town do you live in?

12. We recognize this list of racial or ethnic identifiers may not exactly match how you describe yourself. Keeping that in mind, which of the following best describes the racial or ethnic community that you belong to? (Select all that apply.)

- a) African
- b) Black

¹ Only visible to people who were not born in Canada
² Only visible to people who do not have a Canadian Citizenship

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- c) East and North East Asian
- d) North and Central Asian
- e) Pacific Asian
- f) South East Asian
- g) South and South West Asian
- h) South American Indigenous
- i) First Nations - Status
- j) First Nations - Non-status
- k) Métis
- l) Inuit
- m) Latin American (Central American, Caribbean and South American)
- n) White
- o) Another racial or ethnic community (please specify):
- p) Choose not to answer

13. What gender are you? (Select all that apply.)

- a) Woman
- b) Man
- c) Transgender
- d) Non-binary
- e) Two-Spirit
- f) Another gender (please specify):
- g) Choose not to answer

Any additional information you would like to add?
(optional)

14. Do you have any children (under 18 years old) or are you a caregiver/guardian of other children? (Select all that apply.)

- a) No
- b) Yes, and they live with me
- c) Yes, but they live with a different caregiver voluntarily (not in care)
- d) Yes, but they are currently in the CFS system
- e) Yes, I am a caregiver of siblings
- f) Yes, I am a caregiver of non-sibling family members
- g) Yes, I have step-children
- h) Choose not to answer

14a) Do you receive money from CFS to care for your family members³?
a) Yes

³ Only visible to people who indicated they have children

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- b) No
- c) Choose not to answer

Any additional information you would like to add?
(optional)

15. Do you have any visible or invisible disabilities?

- a) Yes - diagnosed while in care
- b) Yes - diagnosed after I exited care
- c) Yes - undiagnosed
- d) No
- e) Not sure (please explain):
- f) Choose not to answer

16. What is your current housing situation? (Select all that apply.)

- a) Couch surfing
- b) Emergency housing
- c) Homeless shelter
- d) Manitoba Housing (low-income/social housing)
- e) Rental - with a roommate or partner
- f) Rental - live alone (includes single parents with children)
- g) I own my own property
- h) Single room occupancy
- i) Transition housing (including independent living)
- j) With a family member
- k) With my foster parents
- l) Another response (please specify):
- m) None of the above
- n) Choose not to answer

Any additional information you would like to add?
(optional)

EXPERIENCES WHILE IN CFS CARE

For the purpose of this study, "before exiting care" is either when you exited care on your 18th birthday or when your Agreements with Young Adults (AYA/extension of care) ended, whatever

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happened last.

Important to note that the current CFS policy does not state that the CFS worker has to be the one who teaches you most of the transition skills, but rather make sure you had them upon exiting care. The following questions may not specifically say who provided you with the various skills; this is because we are looking to see if, upon exiting care, you had the skills, regardless of who taught you those skills. If you want to tell us who taught you those skills, please leave them in the comment box below the question.

17. Before I exited care, my worker and I identified at least 2 supportive adults in my life whom I can count on for help or advice.
 - a) Yes
 - b) No
 - c) Not sure
 - d) Choose not to answer

18. Before I exited care, I met with my worker(s) on average...
 - a) ...at least once a month
 - b) ...at least once every 3 months
 - c) ...at least twice a year
 - d) ...at least once a year
 - e) I never met with my worker
 - f) Not sure
 - g) Choose not to answer

19. Before I exited care, I was provided and understand information about my rights in the following areas in a way I understood: (Select all that apply.)
 - a) CFS rights
 - b) Employment / worker's rights
 - c) Tenancy / residential rights
 - d) Legal rights (e.g., search and arrest rights)
 - e) Canadian Charter of Rights and Freedoms
 - f) Reasonable accommodations
 - g) Voting rights
 - h) How to contact a youth advocate
 - i) UN Convention on the Rights of the Child
 - j) Health rights
 - k) Who to talk to if I feel my rights are being violated
 - l) Other areas (please specify):
 - m) None
 - n) Choose not to answer

20. Before I exited care, my CFS worker and I met to hear my views about transitioning into adulthood and make a plan that reflected the things that are important to me.
 - a) Never
 - b) At least once
 - c) 2-3 times
 - d) More than 3 times
 - e) Not sure how many times my CFS worker and I met but I had a transition plan
 - f) Not sure (please explain):
 - g) Choose not to answer

*the online survey provides descriptions for several of the words that are not available in the printed copy

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Any additional information you would like to add? (optional)

21. Before I exited care, I felt safe to explore, learn and practice the following in a home I lived in: (Select all that apply.)

- a) Culture
- b) Religion and/or spirituality
- c) Connecting with the community that is important to me
- d) Language of your heritage
- e) Gender identity
- f) Sexual identity
- g) Career planning
- h) Educational planning
- i) Other (please specify): _____
- j) None of these were safe to explore, learn or practice
- k) Choose not to answer

22. We are interested in seeing to what extent youth are taught about, and feel supported in, practicing their culture(s) in the home(s) they lived in while in CFS care. Which statement best describes your experience in learning, embracing and practicing the culture(s) in the home(s) you live in:

- a) I felt shamed by the people I lived with about my race and/or culture
- b) I never lived in a home that embraced and taught me my culture, but my caregivers never shamed me
- c) I learned about where my people are from, but nothing else
- d) I learned about my ethnicity, family lineage, religion and cultural traditions, but I didn't feel connected
- e) I learned about my ethnicity, traditional teachings and practices, had a safe place to practice what I learned, and I feel connected to my culture and spiritual practices
- f) Choose not to answer

Any additional information you would like to add?
(optional)

23. Before I exited care, I had the following IDs in my possession: (Select all that apply.)

- a) Birth certificate
- b) SIN (social insurance number)

*the online survey provides descriptions for several of the words that are not available in the printed copy

- c) Manitoba ID
- d) Driver's license
- e) Manitoba Health card
- f) Bank card
- g) Passport
- h) Status Card
- i) Métis Citizenship
- j) Confirmation of Registration document (Indian Act)
- k) Territorial health care card
- l) Inuit Beneficiary Card
- m) NTI card
- n) Other (please specify):
- o) None
- p) Choose not to answer

Any additional information you would like to add? (optional)

24. Before I exited care, someone taught me the following education skills: (Select all that apply.)

- a) How to find programs that interest me
- b) How to apply for post-secondary school
- c) How to study
- d) How to take notes
- e) How to write papers
- f) How to write formal letters
- g) How to select and register for courses
- h) How to apply for bursaries and scholarships
- i) How to apply for the Tuition-Waiver program
- j) How to purchase textbooks
- k) How to find support while in school (high school, college, university)
- l) Other (please specify):
- m) None
- n) Choose not to answer

25. Before I exited care, I received my high school diploma

- a) Yes
- b) No
- c) Choose not to answer

26. Before I exited care, I was taught the following employment skills and why they are important: (Select all that apply.)

- a) How to find a career I might be interested in
- b) How to get volunteer experience
- c) How to make a resume
- d) How to make a cover letter

*the online survey provides descriptions for several of the words that are not available in the printed copy

- e) How to do interviews
- f) How to get references
- g) How to job search
- h) How to understand job offers
- i) What a probationary period is
- j) Other (please specify):
- k) None
- l) Choose not to answer

Any additional information you would like to add? (optional)

27. Before I exited care, I was taught the following financial skills and why they are important: (Select all that apply.)

- a) Open a bank account
- b) Save money
- c) Invest money
- d) Build credit
- e) Make a budget
- f) Manage my finances (like impulsive spending)
- g) Manage debt
- h) Credit cards
- i) Financial contracts (like leases or cell phones)
- j) Get my taxes done
- k) Other (please specify):
- l) None
- m) Choose not to answer

28. Before I exited care, I was told about the following programs and services available to me when I age out of care, and how to apply: (Select all that apply.)

- a) Agreements with Young Adults (extension of care)
- b) Canada Manitoba Housing Benefit - Youth Stream
- c) CFS Complaints process
- d) My CFS Authority
- e) My CFS Agency
- f) Childcare options
- g) Employment and Income Assistance (EIA)
- h) Employment Insurance (EI)
- i) Employment services
- j) Free or low-cost therapy or mental support
- k) Free or low-cost legal aid services
- l) Financial counsellors
- m) Food banks
- n) Futures Forward program
- o) Harm reduction (information, materials or support)

*the online survey provides descriptions for several of the words that are not available in the printed copy

- p) Homeless services
- q) Low-income grants
- r) Manitoba Advocate for Children and Youth (MACY)
- s) Manitoba Human Rights Commission
- t) Manitoba Justice Victim Services
- u) Manitoba Ombudsmen
- v) Rental Assistance Program
- w) Residential Tenancies Branch
- x) Supports to Young Adults Grant
- y) Telus Mobility for Good
- z) Tuition-Waiver program
- aa) VOICES - Manitoba's Youth in Care Network
- bb) Other (please specify):
- cc) None
- dd) Choose not to answer

Any additional information you would like to add?
(optional)

29. Before I exited care, my worker made sure I had the following Personal Health Information. (Select all that apply.)

- a) Manitoba Health Card and associated numbers
- b) My vaccination records
- c) Blood type
- d) Allergies
- e) My medications
- f) My doctor's contact information
- g) My dentist's contact information
- h) My optometrist's (eye doctor) contact information
- i) My biological family's medical history
- j) Other (please specify):
- k) None
- l) Choose not to answer

30. Before I exited care, my worker made sure I had the following information, knowledge or skills about how to live in a healthy way and access the following healthcare services: (Select all that apply.)

- a) Changes to health insurance once the CFS benefits end
- b) Pharmacare
- c) Mental health support information (e.g., about substance (ab)use, counselling, and crisis response centres)
- d) What different health services offer
- e) How often I should go for health check-ups
- f) What to do in a crisis
- g) Informed consent

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- h) Safe sex practices
- i) Reproductive options (e.g., birth control, abortion, adoption)
- j) The impacts of trauma
- k) How to find a doctor, dentist or optometrist (eye doctor) if you don't have one
- l) Other (please specify):
- m) None
- n) Choose not to answer

31. Before I exited care, I was registered for Non-Insured Health Benefits (NIHB) and was taught how to navigate the system⁴.
- a) Yes
 - b) No
 - c) Doesn't apply to me
 - d) Not sure (please explain):
 - e) Choose not to answer

Would you like to tell us more about the questions you just answered on the last page or two? (optional)

32. Before I exited care, I was supported to participate or taught the importance of the following self-care (select all that apply.)
- a) Stress management
 - b) Coping skills
 - c) Recognizing triggers
 - d) Meditation and/or prayer
 - e) Smudging
 - f) Natural remedies
 - g) Connecting to the environment
 - h) Art
 - i) Sports / recreation
 - j) Music
 - k) Healthy eating
 - l) Exercise
 - m) Stretching
 - n) Raising your self-esteem / self-worth
 - o) Managing anxiety
 - p) Managing depression
 - q) How to ask for help
 - r) Consistent sleep schedule
 - s) Setting boundaries / saying no
 - t) Other (please specify): -----
 - u) None

⁴ Only visible to people who indicated they are Indigenous with Status

v) Choose not to answer

33. Before I exited care, I was taught the following relationship skills: (Select all that apply.)

- a) What healthy relationships are
- b) How to identify unhealthy relationships
- c) How to set boundaries
- d) How to leave an unhealthy relationship
- e) How to create a safety plan
- f) How to build friendships
- g) Communication
- h) Conflict resolution
- i) Cognitive distortions (such as jumping to conclusions, overgeneralization, polarized thinking)
- j) Other (please specify):
- k) None
- l) Choose not to answer

Any additional information you would like to add? (optional)

34. Before I exited care, I was taught the following housing skills: (Select all that apply.)

- a) How to pay rent
- b) How to find rental housing
- c) How to pay a damage deposit
- d) How to find and apply for low-income housing
- e) How to find a housing advocate
- f) How to find safe and affordable housing
- g) How to live with roommates
- h) How to get utilities in your name
- i) Other (please specify): -----
- j) None
- k) Choose not to answer

35. Before I exited care, I was taught how to do the following physical responsibilities: (Select all that apply.)

- a) Cooking
- b) Doing laundry
- c) Paying bills
- d) Grocery shopping
- e) Maintaining proper hygiene
- f) Making a bed
- g) Cleaning your living space
- h) Dressing for different occasions
- i) How to drive a vehicle
- j) How to do basic maintenance on a vehicle

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- k) Computer skills
- l) Trapping / hunting
- m) Berry picking
- n) Basic first aid (e.g., helping someone who is choking)
- o) Other (please specify):
- p) None
- q) Choose not to answer

36. Before I exited care, I was taught how to do the following key skills and information:
(Select all that apply.)

- a) Self-advocacy
- b) Nutrition / healthy eating
- c) Making goals
- d) Protecting important documents
- e) Problem-solving difficult situations
- f) Time management
- g) Regulating my emotions
- h) Negotiating skills
- i) How to vote
- j) Other (please specify):
- k) None
- l) Choose not to answer

Any additional information you would like to add? (optional)

37. When I first exited care, I had the following essential bedroom items in the place I lived:
(Select all that apply.)

- a) A bed
- b) Sheets
- c) Blanket(s)
- d) Pillows
- e) Bedframe
- f) Lamp
- g) None
- h) Choose not to answer

38. When I first exited care, I had the following essential kitchen items in the place I lived:
(Select all that apply.)

- a) Dishes
- b) Pots and pans
- c) Cutlery
- d) Mugs / cups

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- e) Cooking utensils (e.g., cutting knives, stirring spoons, can opener)
- f) Fire extinguisher
- g) Microwave
- h) Toaster
- i) Coffee maker
- j) Cutting board
- k) Mixing bowls
- l) Food storage
- m) Measuring cups
- n) Condiments (e.g., ketchup, mayonnaise, mustard)
- o) Garbage can
- p) Drying rack
- q) Oven mitts
- r) None
- s) Choose not to answer

39. When I first exited care, I had the following essential bathroom items in the place I lived: (Select all that apply.)

- a) Bathing towels
- b) Bath mat
- c) Toilet cleaner
- d) Toilet plunger
- e) Hygiene products
- f) Shower curtain
- g) None
- h) Choose not to answer

40. When I first exited care, I had some or all the following essential living room items in the place I lived: (Select all that apply.)

- a) TV
- b) Coffee table
- c) Seating (couch, chairs)
- d) Lamp
- e) None
- f) Choose not to answer

41. When I first exited care, I had some or all the following essential items in the place I lived: (Select all that apply.)

- a) First aid kit
- b) Laundry hamper
- c) Basic tools (e.g., screwdriver, hammer, tape measure)
- d) Sewing kit
- e) Broom
- f) Mop
- g) Vacuum
- h) Full-length mirror
- i) Hangers
- j) Thermometer
- k) None
- l) Choose not to answer

*the online survey provides descriptions for several of the words that are not available in the printed copy

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42. I was provided with the following amount of money from CFS to purchase the essential items listed above: (Enter dollar amount in numerals, such as 1000 or 350. If you did not receive any money from CFS, you can enter 0 or "zero.")

Any additional information you would like to add? (optional)

43. Before I exited care, how many homes did you live in?
(This could include group homes, foster homes, shelters, or hotels/motels.)

EXPERIENCES AFTER YOUR CFS SERVICES AND SUPPORT STOPPED

44. Since exiting care, I have made more than \$26,620 in one year.
a) Yes
b) No
c) Not sure (please explain):
d) Choose not to answer
45. Since exiting care, I have had enough money to consistently make all my monthly payments (this includes bills, food, rent, childcare, insurance, etc.).
a) Yes
b) No
c) Sort of (please explain):
d) Choose not to answer
46. In the last 6 months, have you had enough money to make all of your monthly payments?
a) Yes
b) No
c) Sort of (please explain):
d) Choose not to answer

Any additional information you would like to add? (optional)

47. Since exiting care, I have completed the following: (Select all that apply.)
a) High school diploma
b) College or Trade certificate

- c) Associate degree
- d) Bachelor's degree
- e) Master's degree
- f) Doctorate
- g) Other (please specify):
- h) None
- i) Choose not to answer

48. Since exiting care, the following education experiences are true for me: (Select all that apply.)

- a) I have applied for trade school
- b) I have applied to college
- c) I have applied to university
- d) I am attending trade school
- e) I am attending college
- f) I am attending university
- g) I have graduated from a post-secondary school
- h) None are true for me
- i) Choose not to answer

49. I have had to pay for some or all of the following without government or band support. (Select all that apply.)

- a) School application fees
- b) Student fees
- c) Textbooks
- d) Supplies
- e) Computer
- f) Internet access
- g) Tuition
- h) Mandatory health fees
- i) Travel expenses (such as a bus pass or gas)
- j) Phone
- k) Rent
- l) Utilities
- m) Childcare
- n) Other (please specify):
- o) All my expenses are covered by the government or band support
- p) Choose not to answer

Any additional information you would like to add? (optional)

50. Since exiting care, I have been denied housing because of the following reasons: (Select all that apply.)

- a) Bad or no credit score

*the online survey provides descriptions for several of the words that are not available in the printed copy

- b) No references
- c) Because I have children
- d) No damage deposit
- e) No guarantor
- f) Failed background check
- g) Because I have pets
- h) How I earn my money
- i) No money for rent
- j) Too young
- k) Denied but not sure why
- l) Other (please specify):
- m) I've never been denied housing
- n) Choose not to answer

51. Since exiting care, I have experienced or accessed the following: (Select all that apply.)
- a) Accessed substance (ab)uses services (e.g., detox, rehab, family support groups like Al-Anon, attended Alcoholics or Narcotics Anonymous)
 - b) Been employed
 - c) Experienced homelessness
 - d) Been arrested
 - e) Been incarcerated (i.e., went to jail/prison)
 - f) Stayed overnight in a psychiatric ward
 - g) Engaged in sex work
 - h) Accessed emergency housing (such as shelters or overnight domestic abuse centres)
 - i) Accessed mental health counselling
 - j) Accessed crisis support
 - k) Accessed food banks
 - l) Been in contact with CFS regarding my own children and/or siblings
 - m) Accessed employment services
 - n) Accessed financial counselling
 - o) Accessed education services
 - p) Accessed housing services
 - q) Volunteered at an organization or within my community
 - r) Experienced suicidal ideation
 - s) Other (please specify):
 - t) None
 - u) Choose not to answer

52. Since exiting care, I have experienced the following employment experiences: (Select all that apply.)
- a) I have been employed
 - b) I have been fired
 - c) I have been laid off
 - d) I have been unemployed
 - e) I have applied for Employment Income Assistance (EIA)
 - f) I have applied for Employment Insurance (EI)
 - g) I have received money from Workforce, Training and Employment (WTE)
 - h) I have lost my job, but I'm not sure what happened
 - i) I have maintained employment at the same place for 6 months or more
 - j) Other (please specify):
 - k) None

*the online survey provides descriptions for several of the words that are not available in the printed copy

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- l) Choose not to answer

Any additional information you would like to add? (optional)

53. Please rate your current overall health (this includes physical and mental):

- a) Really bad
- b) Somewhat bad
- c) I'm okay
- d) I'm doing well but not the best
- e) Everything is great
- f) Not sure
- g) Choose not to answer

54. In the last 6 months, how often have you worried about homelessness?

- a) Every day or almost every day
- b) At least once a week
- c) At least once a month
- d) Once or twice in the last 6 months
- e) I haven't worried about this
- f) Choose not to answer

55. In the last 6 months, how often have you worried about hunger?

- a) Every day or almost every day
- b) At least once a week
- c) At least once a month
- d) Once or twice in the last 6 months
- e) I haven't worried about this
- f) Choose not to answer

Any additional information you would like to add? (optional)

*the online survey provides descriptions for several of the words that are not available in the printed copy

What do you wish you had known before you exited care into adulthood?

Is there anything else you would like to tell us?

On behalf of YES Manitoba and the Research Ambassador team, we thank you for providing valuable information about your experience transitioning out of CFS care and into adulthood.

As an acknowledgement for your contribution YES Manitoba would like to send you a \$20 gift card. **Would you like to receive a gift card?**

- No
- Yes
 - o Email_____

If you chose yes, a code will be emailed to you within 7 days. You will be required to send a reply email in order to receive your gift card. If you haven't received an email, check your junk mail. If you have any questions or concerns you can contact Sam Pothier, Youth Engagement Specialist at spothier@yesmb.ca or (204) 294-8661 extension 676.

To stay up to date on the final report and other news about youth in CFS care in Manitoba including events for youth with lived care experience, please sign up at www.bethesystemchange.com

*the online survey provides descriptions for several of the words that are not available in the printed copy

APPENDIX 2 - LIST OF SKILLS AND KNOWLEDGE REQUIRED FOR ADULTHOOD

Advocate - housing	Community - creating	Financial contracts
Advocate - MACY	Conflict resolution skills	Financial support
Advocate - how to contact one	Cooking - at least 3	Food banks
Allergies	Healthy meals	FF program
Arts	Coping skills	Finances - manage
AYA	Cover letter	Financial contracts
Background checks	Create a safety plan	Financial support
Bank account	Credit - build	Food banks
Bank card	Credit cards	Goals
Birth certificate	Credit score	Grocery shop
Blood type	Crisis -what to do	Guarantor
Budgeting	Culture	Health card
Build friendships	Damage Deposit	Health check ups - how often
Canadian Charter of Rights and Freedoms	Debt	Health number
Career - how to choose, supported to explore	Dentist	Health plan - changes
CFS Agency	Doctor	Health system - navigation
CFS Authority	Dress for different occasions	Healthy eating
CFS complaints process	Drivers License	High school graduation
CFS rights	EIA	Homeless services
Citizenship card	Environment - connecting	Hygiene
Clean your living space	Ethnicity	Impulsive spending
Cognitive distortions	Exercise	Interviews
Communication skills	Family medical history	Invest
	FF program	Job offers
	Finances - manage	Job search

Laundry – how to	Pharmacare	Taxes
Legal Aid	Picture ID	Telus Mobility for Good
Legal rights (such as unlawful search and arrest rights)	Post-secondary school (apply, pay, attend, graduate)	Tenancy/ residential rights
Low-income grants	Prayer	Therapy – free or low cost
Low-income housing	Problem solve in difficult situations	Time management
Make a bed	Protect important documents	Traditional language
Make a bed	Reasonable accommodations	Triggers
Medications	Recreations	Tuition-waivers
Meditation	References – job	UNCRC Rights of the Child
Mental health support – contact information	References – home	Unhealthy relationships – what to do & how to leave
Mental health support – free or low cost	Regulate emotions	Vaccinations list
Metis citizenship	Religion	VOICES
Music	Rental housing – find	Volunteer experience
Natural remedies	Resume	Worker's Rights
Ombudsman	Return to school	
Optometrists	Save money	
Passport	Set boundaries	
Pay bills – how to pay rent	SIN	
Paying for school – student fees, transportation , tuition, internet, health fees, phone, utilities, child care, rent	Smudging	
Permanent residency card	Spirituality	
Pets	Sports	
	Status card	
	Stress management	
	Stretching	
	Supportive living environment	

CATEGORIES OF SKILLS AND KNOWLEDGE REQUIREMENTS

Education: adult education, education planning, paying for school, applying for school, selecting courses, program, requirements, how to study, support services, Manitoba Student Aid, and how to apply for scholarships, bursaries, grants and band funding.

Employment: career planning, resumes, cover letters, interviews, job search, job offers, and references.

Financial Skills: bank accounts, credit, debit, contracts, budgeting, managing money, impulsive spending, investments, taxes and how to save.

Hobbies and self-care: benefits of hobbies such as drawing, sports, dancing, puzzles, games and music, cultural specific activities, reading, and information free community events

Housing : finding housing, damage deposits, guarantors, homeless services, Manitoba Housing, rent payment, expectations, pet rights and responsibilities,

Identification: Manitoba ID, Personal Health Card, birth certificate, Status card, Citizenship card, Metis Citizenship card, passport, permanent residency, and Social Insurance Number.

Identity: connection to culture, language and land, access to and understanding how wear clothes based on style and body type, understanding ethnicity, spiritual or religious beliefs, and knowledge and skills in traditional ethnical practices including ceremonies.

Interpersonal skills: communication, conflict resolution, coping mechanisms, goal setting, time management, meditation, critical thinking, prayer/ spiritual practices, problem solving, emotional regulation, and boundary settings.

Personal health information: blood type, vaccinations, medication list, health care number, contact information for all health care providers, allergies list, and family medical history.

Physical and Mental Health: cognitive distortions, safety plans, managing crises, how to exercise, when to see a doctor, registered for Fair Pharmacare or NIHB, systems navigation, healthy eating, adult mental health services, natural remedies, and support pets.

Post-care supports: AYA, CMHB, SAG, Fair Pharmacare, EIA, EAPD, Futures Forward Program, Tuition waiver program, food banks, legal aid, low-income grants, Jordan's Principle, low-income transportation grants, and Telus Mobility for Good.

Practical skills: how to drive, grocery shopping, hygiene norms, protecting important documents, cleaning, laundry, cooking, making a bed, registering and paying bills.

Relationships: building friendships, creating community, healing intergenerational trauma, how to safely reconnect with family and community, understanding healthy and unhealthy relationships.

Rights and Advocacy Knowledge: self-advocacy skills, background checks, CFS, housing, employment, health care, education, Canadian Charter of Rights and Freedoms, legal rights, reasonable accommodations, UNCRC, parental, housing, employment, MACY, Ombudsperson, legal aid, access to CFS file and how to file a complaint.



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