
A REPORT FOR THE

Inquiry Respecting the Treatment, Experiences, and Outcomes of Innu in the Child Protection System

FINAL REPORT

Barbara Fallon & Tara Black, the OCANDS team
(Praveen Sawh & Parlin Chan), with support from Danielle Billard

April 30, 2026

Preface

The OCANDS team received the initial extract of data tables from Matrix/VSI in late July 2025, followed by ongoing revised tables through to January 30, 2026. To meet the timelines of the Inquiry Respecting the Treatment, Experiences, and Outcomes of Innu in the Child Protection System (the Inquiry), we submitted a draft report for review. As part of our standard process, OCANDS researchers continue to work with child welfare personnel to validate data mapping and ensure the accuracy of the final data.

A reminder that the data are:

- longitudinal following children and their families
- unduplicated
- in cohorts
- intended to illuminate known disparities
- designed to support Innu communities as they exercise jurisdiction
- accompanied by clearly labeled knowledge claims for ease of interpretation

Therefore, these data cannot be directly compared to government reports that are cross sectional and count services (e.g., number of investigations and number of placements). At the conclusion of this project, the OCANDS team will provide the scripts used to construct the data tables for reference and for any future analyses they may wish to conduct.

Contents

Executive Summary	4
Introduction and Purpose	4
Methodology	4
Major Findings	4
Introduction	9
Context and Origin of the Inquiry	9
The Innu Round Table Process	9
Child Welfare in Newfoundland and Labrador	10
Research Objectives for Data Analysis Request	11
Administrative Data Context	12
Methodology	14
The Ontario Child Abuse and Neglect Data System (OCANDS)	14
Ethical Considerations and OCAP® Principles	15
Data Processing and Analysis	16
Data Sources and Scope	16
Findings	20
Child Population Data	20
Rate of Investigations	20
Maltreatment Type	21
Recurrence of Investigations	24
Admissions to Out-of-Home Placements	26
Time to Discharge	31
Sensitivity and Specificity	33
Discussion	40
Data Limitations	44
References	47
Glossary	49

Suggested citation: Fallon, B., Black, T., Sawh, P., Chan, P., & Billard, D. (2026). *Inquiry respecting the treatment, experiences, and outcomes of Innu in the child protection system.*

Executive Summary

Introduction and Purpose

In August 2023, the University of Toronto research team, led by Professors Barbara Fallon and Tara Black, was engaged by the Inquiry Respecting the Treatment, Experiences, and Outcomes of Innu in the Child Protection System to conduct quantitative analysis of Innu children in the child protection system of Newfoundland and Labrador. This work was designed to examine historical trends and change over time, analyze present-day data, identify data gaps, and support Innu assertions of jurisdiction in child and family services. The analysis covers the period from fiscal year 2018/19 through 2024/25, drawing on provincial administrative child protection data maintained by the Department of Children, Seniors and Social Development (CSSD).

This research was conducted in alignment with OCAP® principles (Ownership, Control, Access, and Possession), ensuring that quantitative analyses support Innu self-determination and jurisdiction over child and family services. The work builds upon existing data-sharing agreements established through the Innu Round Table tripartite process and the 2021 Protocol Agreement between the Innu and the province.

Methodology

The analysis utilized data from Newfoundland and Labrador's Integrated Service Management (ISM) system, implemented in 2018, which maintains provincial child protection administrative data. Innu children and families were identified using Indigenous identity information recorded in the system. A referral, investigation, or file was classified as Innu when at least one person associated with the family unit was identified as Innu in the administrative data.

The Ontario Child Abuse and Neglect Data System (OCANDS) infrastructure was employed to extract, harmonize, and analyze longitudinal child welfare data. Key statistical measures included counts, proportions, rates per 1,000 children, disparity indices, and diagnostic accuracy measures (sensitivity and specificity). According to Census 2021 data and government reports, approximately 1,170 children identify as Innu in Newfoundland and Labrador, while 64,030 children are non-Innu. These population figures were used to calculate rates per 1,000 children and assess disparities.

Major Findings

Investigation Rates and Persistent Disparity

Innu families experienced consistently higher rates of child protection investigations compared to non-Innu families throughout the study period. In 2018/19, the investigation rate for Innu families was 129.06 per 1,000 Innu children compared to 62.13 per 1,000 for

non-Innu families, representing a disparity ratio of 2.08. By 2024/25, this disparity had increased to 2.87, with Innu families nearly three times more likely to receive an investigation (see [Table 1](#)).

Maltreatment Type and Co-occurring Maltreatment

Analysis of maltreatment type data covers the full study period from 2018/19 to 2024/25. Investigations are classified as either co-occurring (two or more maltreatment types recorded) or single-occurring (one type recorded only). All percentages are calculated as a proportion of total investigations with at least one maltreatment code, so that figures across all categories sum to approximately 100% per year and population group (see [Table 2](#)).

Single-occurring investigations accounted for between 72.6% and 84.3% of all Innu investigations with maltreatment codes, with co-occurring maltreatment comprising the remainder. Co-occurring maltreatment was present in between 15.7% and 27.4% of Innu investigations across the study period, with no clear directional trend until 2024/25, when it declined markedly to 15.7%. For non-Innu families, co-occurrence ranged from 16.5% to 29.6% in most years before increasing sharply to 38.2% in 2024/25—a divergence that warrants further examination.

Among single-occurring investigations, neglect was the predominant concern for Innu families in every fiscal year. Neglect as the sole recorded type accounted for between 37.7% (2018/19) and 50.9% (2020/21) of all Innu investigations with maltreatment codes, remaining elevated at 49.4% in 2024/25. This is consistently and substantially higher than for non-Innu families, where single-occurring neglect ranged from 27.3% to 45.1% across the study period. Emotional abuse as the sole type was the second most common single-occurring concern for Innu families, ranging from 18.5% to 28.1% of all investigations. Physical abuse as a sole type accounted for a notably smaller share of Innu investigations (0.9% to 6.5%) than for non-Innu families (5.9% to 16.5%)—a difference that widened over the study period and is particularly striking in 2021/22 (0.9% versus 10.2%) and 2023/24 (4.8% versus 16.5%). This pattern suggests that child protection involvement for Innu families is driven substantially by structural and material conditions rather than by elevated rates of physical harm.

The dominance of single-occurring neglect in Innu investigations is consistent with research demonstrating that neglect is disproportionately identified in families experiencing structural disadvantage—including poverty, inadequate housing, food insecurity, and limited access to culturally appropriate services—that are the direct and ongoing consequence of colonization. Administrative data cannot distinguish between neglect arising from structural deprivation and neglect attributable to parenting practices; this distinction has critical implications for the appropriateness of child protection responses.

Investigation Recurrence Patterns

Analysis of investigation recurrence revealed significant disparities during the 2020–2022 period (see [Table 3](#)). While non-Innu families maintained relatively stable recurrence rates ranging from 5.2% to 8.0%, Innu families experienced substantial fluctuations. Recurrence

rates for Innu families more than doubled from 7.0% in 2018/19 to a peak of 16.6% in 2021/22—coinciding with the COVID-19 pandemic—before declining to 8.2% in 2024/25. The most pronounced disparity occurred in 2021/22, when Innu families experienced recurrence rates more than double those of non-Innu families (16.6% versus 7.4%). This pattern suggests possible systemic instability or challenges in service delivery to Innu families, particularly during periods of crisis.

Reduction in Admissions to Out-of-Home Placements

The analysis documented significant progress in reducing disparities in rates of admissions to out-of-home placements. The rate of Innu children admitted declined substantially from 713.18 per 1,000 investigations in 2018/19 to 129.31 per 1,000 investigations in 2024/25, representing an 82% decrease. The decision-based disparity ratio declined from 6.76 times higher for Innu children to 1.55 times higher over the same period—a 77% reduction in relative disparity (see [Table 4](#)). While this convergence represents significant improvement, Innu children remain 1.55 times more likely to be placed per investigation than non-Innu children.

Placement Type

Kinship care was the predominant placement type for Innu children across all fiscal years, rising from 56.66% of total placement days in 2018/19 to 66.79% in 2024/25. The proportion of Innu children in kinship care rose correspondingly from 61.04% to 67.35% (see [Table 5](#)). Foster care declined substantially from 32.68% to 21.09% of total placement days, and from 29.87% to 22.45% of children in placement.

Revised data, correcting a misclassification between placement categories in the previous draft, indicate that group care accounted for a substantially higher share of placement days than earlier reported, ranging from 7.97% to 10.35% of total placement days for Innu children and from 5.15% to 7.24% for non-Innu children across the study period. Foster care and kinship care figures are unchanged. The “Other” placement category now accounts for a smaller and more stable share of Innu placement days (2.00%–4.14%). Group care is generally associated with poorer developmental outcomes for children, and the cultural fit of group care facilities for Innu children—including access to Innu language and culturally informed programming—cannot be assessed from administrative data alone. The consistently higher average days in group care and its increasing use for non-Innu children in more recent years warrants continued monitoring of the quality and cultural appropriateness of these placements.

Changes in Time to Discharge

Discharge patterns revealed declining trends affecting both populations. For Innu children, the 12-month discharge rate declined from 48.3% in 2019/20 to 16.7% in 2024/25. For non-Innu children, rates fell from 39.4% in 2020/21 to 20.7% in 2024/25 (see [Table 6](#)). Notably, in earlier years (2019/20–2021/22), Innu children were more likely to be discharged within 12 months than non-Innu children (46–48% versus 35–39%),

potentially indicating that investigations were capturing less severe situations that could be resolved quickly through strong family and community supports. The decline in discharge rates for the 2023/24 cohort—with 21.6% of Innu children and 32.6% of non-Innu children discharged within 12 months—warrants investigation into changes in case complexity, reunification practices, or resource availability.

Screening Accuracy: Sensitivity and Specificity

System-wide screening practices shifted substantially between 2018/19 and 2024/25 (see [Table 7](#)). The proportion of cases screened in for investigation decreased from 54.1% to 31.4%, while specificity improved from 55.4% to 79.4%. However, sensitivity declined from 74.9% to 67.1%, meaning that by 2024/25, approximately one-third of children who later had a verified investigation were not investigated following initial screening.

Analysis by population revealed historical over-investigation of Innu families. In earlier years (2018/19–2020/21), specificity for Innu families was extremely low (27–46%), indicating that the majority of Innu families without verified concerns were investigated. By 2024/25, screening accuracy had substantially converged, with sensitivity at 70.4% for Innu families versus 66.2% for non-Innu families, and specificity at 69.3% versus 80.2% respectively (see [Table 8](#)). The false positive rate declined for both populations but remained higher for Innu families (20.8% in 2024/25 versus 15.5% for non-Innu families). False negative rates increased for Innu families from 6.6% to 9.6%, suggesting that efforts to reduce over-investigation may have resulted in missing some legitimate protection concerns.

Key Implications

The quantitative findings reveal a child protection system in transition. While significant progress has been achieved in reducing disparities—particularly the 77% reduction in placement disparity, the 82% decrease in Innu admission rates, and substantially improved screening specificity—persistent inequities remain across multiple decision points.

The maltreatment type data provide important context. The dominance of single-occurring neglect in Innu investigations—consistently 38–51% of all investigations with maltreatment codes—combined with the comparatively low rate of single-occurring physical abuse (0.9–6.5%), points to a profile of child protection involvement shaped substantially by structural conditions rather than elevated rates of physical harm. Addressing these structural determinants—poverty, housing instability, and access to culturally appropriate services—is likely essential to achieving meaningful and sustained reductions in investigation rates and disparities. Co-occurring maltreatment in roughly one-in-five to one-in-four Innu investigations further indicates that many families face multiple, overlapping concerns requiring coordinated responses.

The revised placement type data reveal that group care accounted for a higher share of out-of-home placement days than previously documented (7.97–10.35% for Innu children). This warrants particular attention given the well-documented association between group care and poorer developmental outcomes, and the difficulty of assessing cultural appropriateness from administrative data alone.

These findings underscore the critical importance of continued monitoring, ongoing reform efforts, and Innu jurisdiction over child and family services. The data provide a quantitative foundation for understanding the treatment, experiences, and outcomes of Innu children in the provincial child protection system while highlighting the need for data systems that more fully reflect Innu realities, priorities, and decision-making processes. Future work should address identified data limitations, strengthen Indigenous identity recording, capture information about cultural appropriateness of services, and ensure that administrative systems support rather than constrain Indigenous data sovereignty and self-determination in child welfare.

Introduction

Context and Origin of the Inquiry

In August 2023, the University of Toronto was approached by co-counsel for the *Inquiry Respecting the Treatment, Experiences, and Outcomes of Innu in the Child Protection System* (the *Inquiry*). The research team, led by Professor Barbara Fallon, was asked to provide quantitative analysis regarding Innu children in the child protection system. The work was designed to address three key areas: (1) historical trends and change over time, (2) present-day data, and (3) data gap analysis. Where possible, the research was also intended to address issues and questions useful for the Innu as they assert jurisdiction in child and family services.

The research team donated their time to this important work from August 2023 to June 2024. This in-kind support included developing research questions, defining the scope of work, and establishing a preliminary agreement. The team's core expertise involves extracting longitudinal data, cleaning and validating it, assessing its quality, and conducting analysis to answer critical research questions. In August 2024 funding was provided for an OCANDS programmer who could negotiate an extract with Matrix; in-kind oversight and programmer supervision continued by senior members of the OCANDS research team throughout the project and to assemble this DRAFT report.

Throughout the project period, the research team held meetings with the Inquiry in September 2023, November 2023, February 2024, April 2024, and June 2024. These meetings included responding to concerns from the province about research capacity, expertise, and data security protocols. The research team also met regularly with the province's IT vendor (i.e., Matrix/VSI) to modify extract specifications including table provided on January 30, 2026. Matrix/VSI became the province's IT vendor in 2018.

The Innu Round Table Process

The research team reviewed existing cross-sectional data and agreements established through the IRT (Innu Round Table) Secretariat, shared in the context of the Innu Round Table tripartite process, which began in 2012. The Innu Round Table brings together leadership and staff from the Innu, the province of Newfoundland and Labrador, and the Government of Canada several times per year. The Round Table has established several committees, including an Innu Child & Family Services Committee.

An agreement called the Working Relationship Agreement was reached between the Innu and the province in 2015, which was subsequently replaced by an updated Protocol Agreement in 2021. The Protocol Agreement includes information-sharing provisions that enable data collaboration. Recently, data updates have been provided by the province directly to the IRT Secretariat based on the Protocol Agreement.

Child Welfare in Newfoundland and Labrador

The Department of Children, Seniors, and Social Development (CSSD) is responsible for providing child welfare and protection services to all children and youth living in Newfoundland and Labrador, including First Nations, Inuit, and Métis populations. Services are delivered through 37 offices across the province.

Child welfare services in Newfoundland and Labrador are governed by the *Children, Youth and Families Act* (CYFA) and administered by the Department of Social Supports and Well-Being (formerly CSSD; the Department of Children, Seniors and Social Development). The province delivers child protection services to two of the three First Nations communities with reserve land—Mushuau Innu First Nation and Sheshatshiu Innu First Nation—while Miawpukek First Nation operates its own delegated child welfare agency funded through the First Nations Child and Family Services (FNCFS) Program.

Legislative Framework

The *Children, Youth and Families Act* (CYFA, 2018) governs child welfare, protection, and service delivery in Newfoundland and Labrador. The CYFA came into force on June 28, 2019, replacing the previous *Child and Youth Care and Protection Act* (Government of Newfoundland and Labrador, 2020).

Section 10 of the CYFA (2018) states that a child under 16 years of age requires protective intervention when they are being, or are at risk of being (by the child's parent):

- physically, sexually, or emotionally abused or neglected;
- exposed to violence
- inadequately supervised (based upon the child's developmental age)
- medically neglected
- abandoned, and/or
- when a child under age 12 has harmed or seriously damaged another human being, living thing, or another person's property

Investigative and Service Delivery Process

Reported allegations are initially screened in or out based upon the criteria outlined in Section 10 of the CYFA (2018). Screened-in reports are investigated by the intake and assessment team. If allegations are verified and the child is found in need of protection, services may be provided voluntarily in collaboration with the family and other community service providers through a "Family Action Agreement" (Blumenthal & Sinha, 2014).

When the level of risk to the child is assessed as high, or when caregivers are not open to a voluntary service plan, services may be mandated through Family Court applications and orders. Court applications and orders may include:

- **Supervisory orders:** The child remains in the care of their primary caregiver under the supervision of CSSD
- **Temporary custody orders:** The child is placed in the care of a manager of child protection (e.g., foster care)
- **Continuous custody orders:** The child remains in the care and custody of the state for an extended period

In each situation, services provided by CSSD and other community agencies to support the needs of both parents and children can be court-ordered. When parents or caregivers are unable to demonstrate progress in alleviating child protection concerns, a permanent care and custody order may be granted, granting the province permanent care and custody of the child until the child reaches the age of 18 (Department of Child, Youth and Family Services, 2019).

Time Limits for Temporary Custody

Temporary custody orders must abide by specific time limits set out in the CYFA (2018), which emphasize a child's need for permanency:

- The first temporary custody order may remain in effect for a maximum of 6 months
- For a child under the age of 6 years, a second order may be issued for a maximum of 3 months
- For a child 6 years or older, the second temporary custody order may be issued for a maximum of 6 months
- The CYFA (2018) also includes a provision allowing a third order following the time limits of the second order to be granted in exceptional circumstances

Services and Supports

Services to support families include in-home services, out-of-home care and services, clinical services, and community-based services. CSSD provides some in-home and out-of-home services to parents and caregivers, including case management, kinship services, protective care agreements, in-care programs, and youth services. CSSD also refers families to a range of clinical and community-based services (Government of Newfoundland and Labrador, n.d.). Supervised visitation for children in care with their families is referred to private companies across the province that hold contracts with CSSD. Out-of-home placement in group care facilities is also provided through private contracts with CSSD.

Research Objectives for Data Analysis Request

The work was designed to address three research objectives: (1) analyze historical trends and change over time, (2) analyze present-day data, and (3) identify any data gaps to help inform future service delivery and the Commission's recommendations.

Administrative Data Context

The *Review of Data and Process Considerations for Compensation under 2019 CHRT 39* (Fallon et al., 2022) provides an important evidentiary and methodological foundation for the Inquiry Respecting the Treatment, Experiences, and Outcomes of Innu in the Child Protection System. This earlier national review, led by Barbara Fallon (University of Toronto) and Nico Trocmé (McGill University), with the support of a team of co-authors, examined the availability, quality, and usability of administrative child welfare data across Canada. As part of this national assessment, Newfoundland and Labrador's provincial and federal administrative child welfare data systems were examined.

CSSD maintains the province's child protection administrative data, which are currently housed in the Integrated Service Management (ISM) system, implemented in 2018. Historical records dating back to 2000 were migrated from the former Client Referral Management System (CRMS) into ISM. At the federal level, Indigenous Services Canada (ISC) maintains child maintenance data for First Nations children ordinarily resident on reserve through the First Nations Child and Family Services Information Management System (FNCFS IMS), which was implemented nationally in the 2013–2014 fiscal year.

Data Strengths

Newfoundland and Labrador operates a centralized provincial administrative data system that captures many key child- and placement-level variables relevant to child welfare involvement. These include:

- child identifiers
- indicators of First Nations identity
- placement start and end dates
- placement type (including kinship care)
- investigated maltreatment
- verification levels
- alleged perpetrators
- legislated reasons for intervention or placement

Many of these variables (e.g., placement dates) demonstrate high levels of availability and completeness—particularly placement dates, which are closely linked to foster care payments, and investigation outcomes. These strengths support analyses of intervention patterns, placement trajectories, and change over time. Importantly, these data strengths align closely with the Inquiry's quantitative objectives, including examining rates of child protection involvement, types and locations of placement, duration in care, and longitudinal trends for Innu children compared to non-Indigenous children.

Data Limitations

At the same time, the review identified several limitations in Newfoundland and Labrador's administrative data that have direct implications for the present Inquiry:

Missing or Inconsistent Data Fields

- Certain fields—such as Indian Registration Numbers for children and caregivers and address information used to determine residence on or off reserve—are not mandatory, resulting in unknown levels of missingness and reduced precision for identity- and geography-based analyses.
- Information indicating whether a child was placed specifically to access essential services is only partially available and not consistently captured within structured data fields.
- Minor accuracy concerns may arise where proxy information is used, such as recording age when the date of birth is unknown.
- Fields capturing First Nations identity include free-text “Other” options, which can introduce variability and reduce standardization.
- Changes in placement over time may further complicate the interpretation of placement duration and continuity.
- Maltreatment type collection started in 2018; however, the relationship between the case and this variable is one to many meaning a case can be described with multiple maltreatment types. Workers do not provide a primary concern for each family.

Structural limitations: Beyond these technical limitations, the review emphasized a more fundamental constraint: administrative child welfare data systems were not designed to capture the broader impacts of colonial and racist policies on Indigenous families. As a result, critical aspects of children’s experiences—such as the reasons foster home assessments were not approved, the decision-making processes influencing placement selection, or the cultural and relational fit of placements—are often documented only in narrative case notes. Reliance on unstructured documentation limits the ability to systematically extract and analyze this information at scale. Historical data quality issues and system transitions further complicate the reliable longitudinal tracking of children’s pathways through care, including the assessment of placement instability, the number of placement changes, and continuity over time.

Implications for Data Report

The strengths and limitations of Newfoundland and Labrador’s administrative child welfare data should inform the interpretation of these analyses. While the data are generally sufficient to support system-level examinations of patterns and trends, they are less able to explain why these patterns occur or how structural, social, and policy contexts shape individual outcomes. This reinforces the importance of interpreting quantitative findings in collaboration with Innu governance bodies and community knowledge holders, particularly in light of the Inquiry’s mandate to support Innu jurisdiction over child and family services and to inform the development of future data systems that more fully reflect Innu realities, priorities, and decision-making processes.

Methodology

The Ontario Child Abuse and Neglect Data System (OCANDS)

The Ontario Child Abuse and Neglect Data System (OCANDS) is a longitudinal data system that tracks families through child welfare systems beyond the investigative period. Child welfare organizations collect extensive information about the families and children they serve, including demographic data, service utilization, and child and family functioning information. However, the child welfare administrative data systems used to collect and store this information vary across organizations, as do the definitions organizations use to label their information.

The Incidence Studies of Reported Child Abuse and Neglect (i.e., CIS and OIS; e.g., Fallon et al., 2025) have pioneered cross-sectional data collection on referrals to child welfare both federally and provincially. OCANDS differs in that it is the first data system to longitudinally track families through their interaction with the child welfare system. This longitudinal capability is essential for identifying systemic areas of strength and need, which is critical to the development of regional and provincial policy.

OCANDS was created to expand upon existing knowledge in child welfare research to provide a foundation for developing a better understanding of the services provided to children and their families and to ultimately improve the quality of services. OCANDS generates and compiles longitudinal child welfare administrative data by consolidating into a single database the overlapping, uniquely organized information currently isolated in different data platforms within partner organizations. The central feature of this project's approach to data analysis is to follow entry / exit cohorts over time to measure key child welfare service outcomes (e.g., maltreatment recurrence, foster care placement, length of stay in foster care).

OCANDS Development and Application in Ontario

In early 2012, OCANDS was contracted by the Ontario Association of Children's Aid Societies (OACAS), as part of the Commission to Promote Sustainable Child Welfare, to use OCANDS infrastructure to construct and evaluate 13 indicators. In 2015, OCANDS produced indicators for Ontario for the first time in the sector's history and has continued to produce these key metrics for the Ontario child welfare system for the past decade. Results from the indicators are derived from data held within organizations' administrative data systems; OCANDS works with IT vendors to extract administrative data and send it to OCANDS to produce indicator results.

The OCANDS infrastructure translates data from agencies into a common format so that data can be examined in aggregate. This involves a harmonization process, where raw administrative data are transformed and mapped to OCANDS data definitions. OCANDS researchers work closely with child welfare personnel to ensure accuracy of data harmonization and, in turn, the accuracy of final data.

While the indicators are designed to act as rough guides for important areas of focus (i.e., recurrence, rates of entry to out-of-home placements, length of stay in out-of-home placements), the strength of OCANDS rests in its ability to further disentangle these key constructs by specifying queries to ascertain system-level outcomes for specific groups of children and families. OCANDS can be used outside of the indicator framework to answer a vast array of questions that are integral to understanding the pathways of children and families through child welfare systems.

Data Extraction and Security

For this project, data extracts were received from the IT vendor directly. The primary vendor for the province of Newfoundland and Labrador is Matrix (VSI). Matrix/VSI became the province's IT vendor in 2018. The research team worked with Matrix to develop extracts for child welfare partners. The vendor writes procedures to pull the extracts according to specifications. Extract specifications were revised with the research questions of the Inquiry in mind. Once the revised specifications were reviewed by Matrix, they contracted directly with the Inquiry for this work.

A CrushFTP server was prepared for this extraction, which allowed Matrix to deliver the extract securely. The security of this server has been appropriately configured with extra protection and is monitored at all times by three departments at the University of Toronto:

- ITS (Information Technology Services),
- ISEA (Information Security and Enterprise Architecture), and
- Programmers at FIFSW (Factor-Inwentash Faculty of Social Work)

The server operates separately and is completely isolated from any other services. Unique credentials are created and maintained for each vendor. These vendors do not have permission to view files or list contents of directories; they can only upload files. All connections are encrypted. Once files are uploaded by the vendor, they are automatically moved to another location from which the research team at the University of Toronto has access. Files are moved offline for use and deleted from the server.

Ethical Considerations and OCAP® Principles

The OCAP® principles—Ownership, Control, Access, and Possession—are a set of standards that assert First Nations' rights to govern data about their peoples, communities, and lands. Developed by the First Nations Information Governance Centre (FNIGC), OCAP® affirms that First Nations collectively own their data, control how it is collected and used, have access to data about themselves, and maintain possession

of data as a mechanism to support governance and self-determination (First Nations Information Governance Centre [FNIGC], 2014). These principles provide an ethical and governance framework for research involving First Nations data in Canada.

This research was conducted in alignment with the OCAP® principles, ensuring that quantitative analyses support Innu self-determination and jurisdiction over child and family services. The data analyzed in this Inquiry concern Innu children, families, and communities and are treated as collectively belonging to the Innu, consistent with the principle of Ownership. Research questions, scope, and analytic priorities were shaped in collaboration with the Inquiry and informed by existing Innu–Province agreements established through the Innu Round Table process, reflecting the principle of Control. The analyses were designed to ensure that the Innu, through the Inquiry process, have access to data about their children and families in a form that is meaningful for interpretation and decision-making, consistent with the principle of Access. Data handling and storage followed strict security protocols at the University of Toronto, with controlled access and secure infrastructure, reinforcing Possession as a mechanism to support Innu ownership and control of data. Overall, adherence to OCAP® in this research is reflected in its collaborative design, its grounding in Innu-established governance processes, and its careful stewardship of sensitive child welfare data in ways that respect Indigenous data sovereignty.

Data Processing and Analysis

Once the data were extracted, the research team completed data integrity checks, cleaned and began validation of the data, completed preliminary analyses, and assessed the data.

Data Sources and Scope

Data Sources

The quantitative component of the Inquiry draws on provincial administrative child protection data maintained by the Department of Children, Seniors and Social Development (CSSD) in Newfoundland and Labrador. The analyses focus primarily on the period from 2018 to 2025.

These data are used to support the Inquiry’s mandate to examine the treatment, experiences, and outcomes of Innu children and families involved with the provincial child protection system and, where possible, to compare these experiences with those of non-Indigenous children and families in the province.

Identification of Innu Children and Families

Innu children and families are identified within the provincial administrative data using Indigenous identity information recorded at the individual level in the ISM system. Indigenous identity is captured in the ISM People table through standardized “Aboriginal” identity lookup codes, supplemented in some cases by free-text identity fields.

Consistent with provincial administrative practice, a referral, investigation, or Protective Intervention Program (PIP) file is classified as an Innu file when at least one person associated with the family unit—such as a child, parent, or caregiver—is identified as Innu in the administrative data. Identification is therefore not restricted to the primary caregiver or index child. This approach reflects how files are operationally defined within the provincial system and supports a more inclusive identification of Innu family involvement.

It was not possible for analyses to be further disaggregated by Sheshatshiu Innu First Nation and Mushuau Innu First Nation. Analyses refer more broadly to “Innu” where further disaggregation was not feasible. Limitations associated with missing or inconsistently recorded identity information are considered when interpreting findings.

Definitions of Key Child Protection Concepts

For the purposes of the Inquiry’s quantitative analyses, administrative child protection concepts are defined according to provincial operational definitions:

- **Referral:** A report made to CSSD regarding concerns about a child’s safety or well-being
- **Investigation:** The formal assessment process initiated by CSSD to determine whether the reported concern is verified or requires intervention
- **Placement:** Any out-of-home living arrangement for a child, including foster care, kinship care, group care, or other residential settings

Analytical Approach

The quantitative analyses employ a longitudinal approach to address the Inquiry’s research questions. Rates of referrals, investigations, placements, admissions, and discharges are calculated, enabling examination of change over time.

Where data quality permits, longitudinal analyses are conducted to examine children’s pathways through the child protection system, including duration in placements. Analyses prioritize disaggregation by Innu community where feasible, and comparison with non-Indigenous children and families within the province.

Statistical Measures

Descriptive statistical methods are used to summarize patterns of child protection involvement and experiences. These include:

- counts
- proportions
- rates per population

These statistics are used to examine differences in involvement, placement experiences for Innu children compared to non-Indigenous children, and to assess changes over time. This report focuses on counts and proportions, rates per population and disparities.

Counts

A count in reporting is a simple numerical measure that tallies the total number of items, events, or occurrences within a specific category or dataset.

Proportions

A proportion in reporting is a measure that expresses a part relative to a whole, showing what fraction or percentage one subset represents of the total.

Rate per 1,000

A rate per 1,000 is a standardized measure that expresses how frequently an event occurs per 1,000 units of a population or base, making it easier to compare across groups of different sizes.

Calculation of Rates of Disparity

In child welfare services, disparity refers to the disproportionate representation of certain racial, ethnic, or demographic groups at various decision points in the child welfare system compared to their representation in the general child population.

How Disparity is Calculated

Disparity is typically calculated using a Disparity Index (DI) or Disproportionality Index, which compares two rates:

Basic Formula

$$\text{Disparity Index} = \frac{(\text{Rate for Group A})}{(\text{Rate for Group B})}$$

More Specifically

$$\text{Disparity Index} = \frac{(\% \text{ of Group A at a decision point})}{(\% \text{ of Group A in the reference population})}$$

Step-by-Step Calculation

1. Identify the decision point (e.g., reports, investigations, placements)
2. Calculate the rate for the target group at that decision point:
 - a. $\frac{(\text{Number of children from target group at decision point})}{\text{Total children at that decision point}} \times 1,000$
3. Calculate the rate for the reference population (usually the general child population in that jurisdiction):
 - a. $\frac{(\text{Number of children from general population})}{\text{Total children in general population}} \times 1,000$
4. Divide the first percentage by the second to get the Disparity Index

Interpreting the Results

- $DI = 1.0$: No disparity (proportionate representation)
- $DI > 1.0$: Over-representation (e.g., DI of 2.0 means the group is represented at twice the expected rate)
- $DI < 1.0$: Under-representation (e.g., DI of 0.5 means the group is represented at half the expected rate)

Multiple decision points: Disparities are typically examined at each stage of the child welfare continuum (referral, screening, investigation, verification, removal, placement type, services, reunification, etc.).

Reference population matters: The calculation can vary depending on whether you use the general child population or another reference group.

Cumulative disparity: Disparities can compound across decision points, meaning even small disparities at each stage can result in large overall disparities.

Sensitivity and Specificity

Sensitivity (true positive rate) measures the proportion of actual cases of child maltreatment that were correctly identified by the screening process and investigated.

Specificity (true negative rate) measures the proportion of cases without maltreatment that were correctly screened out.

In child protection services, these metrics reflect critical trade-offs:

- **High sensitivity** is crucial because missing a true case (false negative) could leave a child in danger
- **High specificity** matters because unnecessary investigations (false positives) consume limited resources, cause stress to families, and may reduce system capacity to respond to genuine cases

The challenge is that improving one metric often comes at the expense of the other. An ideal screening system would have both high sensitivity and specificity, but real-world systems are often challenged by these competing priorities.

Findings

Child Population Data

Custom Census data tables were obtained from Statistics Canada. These tables disaggregate Indigenous status by single years of age for Canada including Newfoundland and Labrador. According to the Census 2021, there are 73,410 children (under 16 years) in Newfoundland and Labrador. An estimated 64,030 children are non-Indigenous (73,410 children minus 9,380 Indigenous children). Approximately 5,815 children are First Nations, with an estimated 720 living in Sheshatshiu and Natuashish. However, according to First Nation public health reports in 2019, 1,170 children identify as Innu in Newfoundland and Labrador. In collaboration with the First Nations Public Health documents and the *Inquiry* we have used this number to establish a Rate per 1,000 children to calculate disparities.

Rate of Investigations

Definition: Investigations in Table 1 are those opened for investigations within the given fiscal year.

Table 1 describes the rate of investigation for Innu and non-Indigenous families in Newfoundland and Labrador from 2018/19 to 2024/25. The disparity column is the difference between the rate for Innu compared to non-Indigenous. In 2018/19, the rate of investigation for Innu families was 129.06 per 1,000 Innu children while the rate for non-Indigenous families was 62.13 per 1,000; this means that Innu were families were 2.08 times more likely to receive an investigation compared to non-Indigenous families. In 2024/25, this disparity has increased slightly to almost 3 times more likely (2.87).

Table 1. Rate of investigations for Innu and non-Innu families in Newfoundland and Labrador 2018/19-2024/25

FISCAL YEAR	INNU			NON-INNU			Disparity
	# investigations	Child pop	Rate per 1,000 children	# investigations	Child pop	Rate per 1,000 children	
2018/19	151	1,170	129.06	3,978	64,030	62.13	2.08
2019/20	147	1,170	125.64	3,711	64,030	57.96	2.17
2020/21	150	1,170	128.21	3,428	64,030	53.54	2.39
2021/22	138	1,170	117.95	3,928	64,030	61.35	1.92
2022/23	198	1,170	169.23	3,883	64,030	60.64	2.79
2023/24	220	1,170	188.03	3,855	64,030	60.21	3.12
2024/25	200	1,170	170.94	3,811	64,030	59.52	2.87

The Innu child population data has been provided by documents from the province of Newfoundland and Labrador and confirmed by Inquiry reports and represent First Nations Public Health data.

The non-Innu child population data is based on custom data provided by Statistics Canada and includes total child population minus those that identified as Indigenous.

The disparity is calculated by dividing the rate of investigation per 1,000 Innu children by the rate of investigation per 1,000 non-Innu children.

Number of investigations are the number of referrals opened for investigation in the corresponding fiscal year.

Maltreatment Type

Definition: Maltreatment type refers to the category of abuse or neglect identified and recorded by the investigating worker. Types captured include physical abuse, emotional abuse, sexual abuse, neglect, and other. Investigations are classified as either:

- Co-occurring maltreatment: two or more maltreatment types recorded within the same investigation.
- Single-occurring maltreatment: exactly one maltreatment type recorded. The table further shows the distribution of single-occurring investigations by type.

All percentages are calculated as a proportion of total investigations with at least one maltreatment code, so that co-occurring % and the five single-type %s sum to approximately 100% in each row (subject to rounding and suppressed values).

Maltreatment type codes were introduced in the ISM system in 2018/19, with data available across the full study period.

Table 2. Co-occurring and single-occurring maltreatment for investigations involving Innu and non-Innu families in Newfoundland and Labrador 2018/19–2024/25

FISCAL YEAR	POPULATION	TOTAL INV. (N)	CO-OCCURRING MALTREATMENT		SINGLE-OCCURRING MALTREATMENT		SINGLE-OCCURRING – TYPE (% OF ALL INVESTIGATIONS)				
			N	% of total	N	% of total	Physical Abuse	Emotional Abuse	Sexual Abuse	Neglect	Other
2018/19	Innu	151	35	23.2%	116	76.8%	3.3%	19.9%	2.0%	37.7%	13.9%
2019/20	Innu	128	35	27.3%	93	72.7%	3.1%	28.1%	0.8%	40.6%	**
2020/21	Innu	108	23	21.3%	85	78.7%	6.5%	18.5%	2.8%	50.9%	**
2021/22	Innu	113	31	27.4%	82	72.6%	0.9%	20.4%	1.8%	49.6%	**
2022/23	Innu	143	38	26.6%	105	73.4%	3.5%	25.2%	0.7%	44.1%	**
2023/24	Innu	125	34	27.2%	91	72.8%	4.8%	24.0%	2.4%	41.6%	**
2024/25	Innu	89	14	15.7%	75	84.3%	5.6%	23.6%	5.6%	49.4%	**
2018/19	Non-Innu	139	40	28.8%	99	71.2%	7.2%	22.3%	4.3%	29.5%	7.9%
2019/20	Non-Innu	135	38	28.1%	97	71.9%	5.9%	35.6%	1.5%	28.9%	**
2020/21	Non-Innu	169	49	29.0%	120	71.0%	7.1%	27.2%	3.0%	33.7%	**
2021/22	Non-Innu	127	32	25.2%	95	74.8%	10.2%	29.1%	1.6%	33.9%	**
2022/23	Non-Innu	115	34	29.6%	81	70.4%	13.9%	16.5%	4.3%	35.7%	**
2023/24	Non-Innu	91	15	16.5%	76	83.5%	16.5%	19.8%	2.2%	45.1%	**
2024/25	Non-Innu	110	42	38.2%	68	61.8%	9.1%	20.9%	4.5%	27.3%	**

Total Inv. (N): investigations in which at least one maltreatment type code was recorded.

Co-occurring Maltreatment: investigations with two or more maltreatment types recorded. N is the count; % is the proportion of total investigations.

Single-occurring Maltreatment: investigations with exactly one maltreatment type recorded. N is the count; % is the proportion of total investigations.

Single-occurring Type columns (Physical Abuse, Emotional Abuse, Sexual Abuse, Neglect, Other): % of all investigations in which that type was the sole maltreatment recorded. These percentages sum to the single-occurring % column; together with the co-occurring %, they sum to approximately 100%.

** indicates a cell has been suppressed due to a count of fewer than 5 cases.

These data are for children under 16 years of age.

Interpretation

Single-occurring investigations—where one maltreatment type was identified—accounted for between 72.6% and 84.3% of all Innu investigations with maltreatment codes across the study period, with co-occurring maltreatment comprising the remainder. For non-Innu families, single-occurring investigations accounted for between 61.8% and 83.5% of all investigations, with a notably higher co-occurrence rate of 38.2% in 2024/25.

Among single-occurring investigations, neglect was the predominant concern identified for Innu families in every fiscal year. Neglect as the sole type recorded accounted for between 37.7% (2018/19) and 50.9% (2020/21) of all Innu investigations with maltreatment codes, remaining high at 49.4% in 2024/25. This is consistently higher than for non-Innu families, where single-occurring neglect ranged from 27.3% to 45.1% across the study period. The gap was most pronounced in 2020/21 and 2021/22, when neglect accounted for 50.9% and 49.6% of Innu investigations respectively, compared to 33.7% and 33.9% for non-Innu families.

Emotional abuse as the sole type was the second most common single-occurring concern for both groups. For Innu families it ranged from 18.5% to 28.1% of all investigations; for non-Innu families the range was 16.5% to 35.6%, with generally higher proportions in earlier years. Physical abuse as a sole type was notably lower for Innu families (0.9% to 6.5% of all investigations) than for non-Innu families (5.9% to 16.5%), a difference that widened over the study period and is particularly striking in 2021/22 (0.9% versus 10.2%) and 2023/24 (4.8% versus 16.5%). Sexual abuse accounted for a small proportion of single-occurring investigations for both groups throughout.

Co-occurring maltreatment accounted for between 15.7% and 27.4% of all Innu investigations, with no clear directional trend until 2024/25, when co-occurrence declined markedly to 15.7%. For non-Innu families, co-occurrence ranged from 16.5% to 29.6% in most years before increasing sharply to 38.2% in 2024/25—a divergence that warrants further examination and may reflect shifts in case complexity, changes in recording practice, or differences in the profile of families coming to child protection attention in that year.

Considerations

The dominance of single-occurring neglect in Innu investigations—accounting for approximately 38–51% of all investigations in any given year—is consistent with research demonstrating that neglect is disproportionately identified in families experiencing structural disadvantage, including poverty, inadequate housing, food insecurity, and limited access to culturally appropriate services. These are conditions that disproportionately affect Indigenous families as a direct and ongoing consequence of colonization. The considerably lower proportion of physical abuse as a single-occurring concern in Innu investigations, relative to non-Innu families, further suggests that child protection involvement for Innu families is driven substantially by structural and material conditions rather than by elevated rates of physical harm.

Administrative data cannot distinguish between neglect arising from structural deprivation and neglect attributable to inadequate parenting practices. This distinction is critical for service planning: responses that treat neglect primarily as a parenting deficit risk compounding harm by subjecting families to child protection intervention when what is needed are material supports—including housing, income, and access to culturally safe services—that address the underlying conditions.

Co-occurring maltreatment in roughly one-in-four to one-in-five Innu investigations across most of the study period reflects the complexity of circumstances for many families involved with child protection services, where multiple types of concern are identified simultaneously. For these families, service responses that address the full range of presenting concerns—rather than treating maltreatment types individually—are more likely to be effective. The administrative data do not capture information about which concern was primary, or which combination of types was most commonly co-occurring; future data collection that enables examination of specific type combinations would strengthen understanding of co-occurring patterns and their relationship to outcomes.

The suppression of the Other category in most years limits interpretation of what placement types are recorded under this classification. Clarification with provincial data custodians is recommended to ensure that this category does not capture a meaningful and systematically distinct group of maltreatment concerns.

Recurrence of Investigations

Definition: Recurrence refers to families coming back into contact with the child welfare system after their files were closed. This is viewed as a proxy for service effectiveness.

Table 3 presents data on child protection investigation recurrence rates for Innu and non-Indigenous families in Newfoundland and Labrador from 2018 to 2024. The data tracks families who had a closed child protection investigation each year and experienced a verified recurrence within 12 months.

Interpretation

Overall, there is a low rate of recurrence for the Province of Newfoundland and Labrador. However, it reveals significant and persistent disparities in recurrence rates between Innu and non-Indigenous families, with Innu families experiencing substantially higher rates, particularly during the 2020-2022 period.

Key Differences:

1. **Diverging Trends:** While non-Indigenous families show relatively stable recurrence rates ranging from 5.2% to 8.0% across the seven-year period, Innu families experienced fluctuations, with rates more than doubling from 7.0% in 2018/19 to a peak of 16.6% in 2021 before declining to 8.2% in 2024.

2. **Peak Disparity Period:** The most pronounced disparity occurred between 2020 and 2022/23. In 2021/22, Innu families experienced a recurrence rate of 16.6%—more than double the 7.4% rate for non-Indigenous families. This represents a 9.2 percentage point gap.
3. **COVID-19 Period Impact:** The sharpest increase in Innu recurrence rates occurred during 2020–2021, rising from 8.1% (2019/20) to 12.9% (2020/21) to 16.6% (2021/22), coinciding with the COVID-19 pandemic period. In contrast, non-Indigenous rates remained relatively stable during this time (7.5% to 8.0% to 7.4%).

Considerations

The absolute numbers of closed investigations differ substantially, with non-Indigenous families representing approximately 17–20 times more closed cases annually (ranging from 3,551 to 4,133 closed investigations) compared to Innu families (129 to 232 closed investigations). This means small changes in absolute numbers for Innu families translate to larger percentage changes.

Non-Indigenous recurrence rates show a gradual declining trend from 2018 (7.0%) to 2024/25 (5.2%). In contrast, Innu recurrence rates show no clear directional trend, with year-to-year fluctuations.

Table 3. Recurrence rates (within 12 months) for closed investigations for Innu and non-Indigenous families in Newfoundland and Labrador 2018/19–2024/25

FISCAL YEAR	INNU			NON-INNU		
	Investigations	Recurrence within 12 months		Investigations	Recurrence within 12 months	
	# closed investigations (index)	# verified investigations (recurrence)	%	# closed investigations (index)	# verified investigations (recurrence)	%
2018/19	129	9	7.0%	3,946	277	7.0%
2019/20	148	12	8.1%	3,833	288	7.5%
2020/21	155	20	12.9%	3,551	283	8.0%
2021/22	157	26	16.6%	4,133	306	7.4%
2022/23	230	34	14.8%	4,028	283	7.0%
2023/24	207	23	11.1%	3,985	250	6.3%
2024/25	232	19	8.2%	3,941	204	5.2%

Number of investigations are the number of investigations closed in the corresponding fiscal year.

Verified investigations are those in which an index investigation had a new investigation with verified concerns within 12 months of the original index investigation closure date.

The proportion is the percentage of index investigations that had a verified investigation within 12 months of the original index investigation closure date.

Admissions to Out-of-Home Placements

Definition: Placement refers to any out-of-home living arrangement for a child, including foster care, kinship care, group care, or other residential settings

Table 4 describes the rate of placement for Innu and non-Indigenous families in Newfoundland and Labrador from 2018/19 to 2024/25. The data tracks children who experienced admissions to out-of-home placements during each of the fiscal years assessed. The disparity column is the difference between the rate of placement for Innu compared to non-Indigenous.

Interpretation

Innu children consistently face higher rates of admission to out-of-home placements per 1,000 investigations compared to non-Indigenous children. There is positive trend: the decision-based disparity has declined from 6.76 times higher in 2018/19 to 1.55 times higher in 2024/25—a 77% reduction in relative disparity.

The rate of Innu children admitted to out-of-home placements has dropped from 713.18 per 1,000 investigations (2018/19) to 129.31 per 1,000 (2024/25)—an 82% decrease.

Considerations

The overall decline in admissions to out-of-home placements for children needs to be further contextualized. This suggests major shifts in practice, policy, and/or support services for all children and for Innu children the data suggest that more children remain safely with their families even when investigations occur.

The converging rates could indicate:

- **improved culturally responsive practices** in child welfare decision-making for Innu families
- **enhanced preventive services** or family supports keeping Innu children out of care
- **policy reforms** addressing historical over-representation of Indigenous children in care
- **possible changes in investigation thresholds** or practices that may be affecting the denominator

Innu children remain 1.55 times more likely to be placed in out-of-home placements per investigation than non-Indigenous children. Complete equity would show a disparity ratio of 1.0.

Table 4. Admissions to out-of-home placements for Innu and non-Innu children in Newfoundland and Labrador 2018/19-2024/25

FISCAL YEAR	INNU		NON-INNU		Disparity Decision-Based Disparity
	Children admitted #	Rate per 1,000 investigations	Children admitted #	Rate per 1,000 investigations	
2018/19	92	713.18	416	105.42	6.76
2019/20	58	391.89	327	85.31	4.59
2020/21	68	438.71	274	77.16	5.69
2021/22	60	382.17	313	75.73	5.05
2022/23	59	256.52	332	82.42	3.11
2023/24	51	246.38	359	90.09	2.73
2024/25	30	129.31	328	83.23	1.55

is the number of children admitted to out-of-home placements within the corresponding fiscal year.

Rate per 1,000 investigations is the number of children placed divided by the number of investigations within a fiscal year x 1,000.

The decision-based disparity is calculated by dividing the rate of placement per 1,000 investigations involving Innu children by the rate of placement per 1,000 investigations involving non-Innu children.

These data are for children under 16 years of age.

Placement Type

Definition: Placement type refers to the category of out-of-home living arrangement. Placement types captured in this analysis include foster care (placement with a non-related, provincially approved foster family), kinship care (placement with a relative or member of the child's extended family or community network), group care (placement in a residential group care facility), and other (placement types not classified under the preceding categories). Total days of placement and the number of children in each placement type are reported by fiscal year and population group, alongside average days of placement and proportional distributions.

Table 5 describes the distribution of placement type for Innu and non-Innu children in Newfoundland and Labrador from 2018/19 to 2024/25. For each fiscal year, the table presents the total days of placement, total number of children, average days of placement, and the proportional share of days and children accounted for by each placement type, calculated separately for Innu and non-Innu children.

Table 5. Days in placements involving Innu and non-Innu children in Newfoundland and Labrador 2018/19 to 2024/25

FISCAL YEAR	INNU STATUS	PLACEMENT TYPE	TOTAL DAYS	TOTAL CHILDREN	AVERAGE DAYS	DAYS IN PLACEMENT (%)	CHILDREN IN PLACEMENTS (%)
2018/2019	Innu	Foster care	21,793	69	315.84	32.68%	29.87%
		Group care	5,589	16	349.31	8.38%	6.93%
		Kinship care	37,780	141	267.94	56.66%	61.04%
		Other	1,520	5	304.00	2.28%	2.16%
	Non-Innu	Foster care	137,118	537	255.34	34.37%	37.76%
		Group care	20,544	85	241.69	5.15%	5.98%
		Kinship care	218,492	727	300.54	54.77%	51.13%
		Other	22,766	73	311.86	5.71%	5.13%
2019/2020	Innu	Foster care	21,750	73	297.95	28.47%	28.29%
		Group care	7,418	22	337.18	9.71%	8.53%
		Kinship care	45,448	159	285.84	59.49%	61.63%
		Other	1,786	4	446.50	2.34%	1.55%
	Non-Innu	Foster care	131,944	508	259.73	32.39%	35.93%
		Group care	22,983	91	252.56	5.64%	6.44%
		Kinship care	233,488	760	307.22	57.32%	53.75%
		Other	18,948	55	344.51	4.65%	3.89%
2020/2021	Innu	Foster care	20,416	76	268.63	26.26%	28.90%
		Group care	6,540	23	284.35	8.41%	8.75%
		Kinship care	49,155	158	311.11	63.23%	60.08%
		Other	1,625	6	270.83	2.09%	2.28%
	Non-Innu	Foster care	132,816	479	277.28	32.01%	34.31%
		Group care	22,939	74	309.99	5.53%	5.30%
		Kinship care	242,398	789	307.22	58.42%	56.52%
		Other	16,766	54	310.48	4.04%	3.87%
2021/2022	Innu	Foster care	18,382	60	306.37	22.61%	21.90%
		Group care	8,418	22	382.64	10.35%	8.03%
		Kinship care	52,890	187	282.83	65.04%	68.25%
		Other	1,626	5	325.20	2.00%	1.82%
	Non-Innu	Foster care	126,026	459	274.57	31.59%	32.79%
		Group care	21,282	91	233.87	5.33%	6.50%
		Kinship care	235,268	808	291.17	58.97%	57.71%
		Other	16,420	42	390.95	4.12%	3.00%

Table continues on following page.

FISCAL YEAR	INNU STATUS	PLACEMENT TYPE	TOTAL DAYS	TOTAL CHILDREN	AVERAGE DAYS	DAYS IN PLACEMENT (%)	CHILDREN IN PLACEMENTS (%)
2022/2023	Innu	Foster care	17,150	56	306.25	21.77%	20.59%
		Group care	7,462	23	324.43	9.47%	8.46%
		Kinship care	52,087	188	277.06	66.11%	69.12%
		Other	2,091	5	418.20	2.65%	1.84%
	Non-Innu	Foster care	120,645	428	281.88	29.20%	30.40%
		Group care	24,127	95	253.97	5.84%	6.75%
		Kinship care	247,907	837	296.19	60.00%	59.45%
		Other	20,476	48	426.58	4.96%	3.41%
2023/2024	Innu	Foster care	17,129	54	317.20	21.10%	20.93%
		Group care	7,668	25	306.72	9.45%	9.69%
		Kinship care	54,006	173	312.17	66.54%	67.05%
		Other	2,366	6	394.33	2.91%	2.33%
	Non-Innu	Foster care	115,298	428	269.39	26.91%	29.46%
		Group care	28,766	106	271.38	6.71%	7.30%
		Kinship care	258,647	860	300.75	60.36%	59.19%
		Other	25,763	59	436.66	6.01%	4.06%
2024/2025	Innu	Foster care	17,411	55	316.56	21.09%	22.45%
		Group care	6,580	18	365.56	7.97%	7.35%
		Kinship care	55,129	165	334.12	66.79%	67.35%
		Other	3,417	7	488.14	4.14%	2.86%
	Non-Innu	Foster care	114,946	401	286.65	26.00%	27.60%
		Group care	31,992	121	264.40	7.24%	8.33%
		Kinship care	267,526	858	311.80	60.51%	59.05%
		Other	27,659	73	378.89	6.26%	5.02%

is the number of children in the corresponding placement type within the fiscal year.

Total days is the sum of all placement days for children in the corresponding placement type within the fiscal year.

Average is the mean number of days per child in the corresponding placement type.

Days in Placement (%) is the percentage of total placement days accounted for by the corresponding placement type.

Children in Placements (%) is the percentage of all children in out-of-home placements in the corresponding placement type.

These data are for children under 16 years of age.

Note: Group care and Other figures have been revised from the previous draft. Revised figures reflect corrected classification of placements between these two categories; total placement days and total children in placement are unchanged. Foster care and Kinship care figures are identical to the previous draft.

Interpretation

Kinship care is the predominant placement type for Innu children across all fiscal years, accounting for the majority of both days of placement and children in out-of-home placements. The proportion of total days spent in kinship placements increased from 56.66% in 2018/19 to 66.79% in 2024/25, and the proportion of Innu children in kinship care rose from 61.04% to 67.35% over the same period. This pattern is consistent and directionally stable across all years, representing a clear and sustained trend toward kinship-based placements for Innu children.

Foster care accounted for the second-largest share of placement days for Innu children but declined substantially from 32.68% of total days in 2018/19 to 21.09% in 2024/25. The proportion of Innu children in foster care similarly declined from 29.87% to 22.45%.

Revised data indicate that group care accounted for a substantially higher share of placement days for Innu children than reported in the previous draft, ranging from 7.97% to 10.35% of total placement days across the study period. This compares to 5.15% to 7.24% for non-Innu children. The revision reflects corrected classification of placements previously recorded under the “Other” category; total placement days and total children in placement are unchanged. Average days in group care remain consistently higher than for foster or kinship care in most years, consistent with the generally longer episodes associated with group care settings. The “Other” category now accounts for a smaller and more stable share of Innu placement days, ranging from 2.00% to 4.14%.

For non-Innu children, kinship care was also the most common placement type across all years, accounting for between 54.77% and 60.51% of total days of care. Non-Innu children were consistently more likely to be placed in foster care than Innu children, with foster care accounting for approximately 26–34% of total days compared to 21–33% for Innu children. The proportion of non-Innu children’s placement days in group care rose from 5.15% in 2018/19 to 7.24% in 2024/25, suggesting increasing use of group care placements for non-Innu children in more recent years.

Considerations

The high and increasing proportion of Innu children placed in kinship care reflects both provincial policy directions emphasizing family- and community-based placements and the strengths of Innu family and community networks in providing care for children unable to remain with their primary caregivers. Kinship care is widely recognized as a preferred placement option for Indigenous children, as it supports cultural continuity, maintains connections to family and community, and reduces the harms associated with placement in non-Innu homes. The sustained growth in kinship placements for Innu children over the study period may reflect deliberate reform efforts to prioritize culturally appropriate placements, consistent with the goals of the Innu Round Table process and the 2021 Protocol Agreement.

The revised and higher group care figures warrant particular attention. Group care placements are generally associated with poorer developmental outcomes for children, including elevated risks of educational disruption, mental health challenges, and difficulties with reintegration into family and community settings. The higher-than-previously-recognized group care utilization for both Innu and non-Innu children underscores the importance of monitoring the quality, duration, and cultural appropriateness of these placements. For Innu children specifically, the cultural fit of group care facilities—including access to Innu language, connection to community, and culturally informed programming—is a dimension that cannot be assessed from administrative data alone and warrants direct inquiry through qualitative and community-based research.

The concurrent decline in foster care placements for Innu children may indicate progress in reducing the historical reliance on non-related, non-Innu foster placements—a practice associated with significant cultural harm. However, the administrative data do not capture information about whether kinship caregivers received adequate financial support, training, or access to services, nor whether placements were culturally appropriate from the perspective of Innu communities. These dimensions are critical to understanding whether the growth in kinship care represents genuine improvement in outcomes for children and families, and should be examined through engagement with Innu governance bodies and community knowledge holders.

The growing proportion of days in the “Other” placement category for non-Innu children in recent years warrants further investigation to clarify what placement types are captured under this classification and whether this reflects changes in practice, data recording, or resource availability.

Time to Discharge

Definition: Time to discharge for children admitted to out-of-home placement within a fiscal year is viewed as a proxy for measuring time to permanence. This indicator measures the percentage of children discharged at intervals within a 36-month period. For a cohort of children admitted each fiscal year, this indicator tracks how long it takes for them to be discharged.

Innu Children Discharged (2018/19 to 2024/25)

Table 6 presents the number of children admitted in fiscal years 2018/19 to 2024/25 who were discharged within 12 months, 24 months, and 36 months. Please note that those discharged within 12 months are also captured in the count of those discharged within 24 months and within 36 months., and those discharged within 24 months are captured within the discharged within 36 months percentage.

Table 6. Children admitted to out-of-home placements and proportion discharged within 12, 24 and 36 months for Innu and non-Innu families in Newfoundland and Labrador 2018/19–2024/25

FISCAL YEAR	Number of children admitted	INNU					
		Discharge within 12mo		Discharge within 24mo		Discharge within 36mo	
		#	%	#	%	#	%
2018/19	92	36	39.1%	49	53.3%	58	63.0%
2019/20	58	28	48.3%	38	65.5%	43	74.1%
2020/21	68	31	45.6%	46	67.6%	47	69.1%
2021/22	60	28	46.7%	36	60.0%	36	60.0%
2022/23	59	24	40.7%	28	47.5%	N/A	N/A
2023/24	51	11	21.6%	N/A	N/A	N/A	N/A
2024/25	30	N/A	N/A	N/A	N/A	N/A	N/A

FISCAL YEAR	Number of children admitted	NON-INNU					
		Discharge within 12mo		Discharge within 24mo		Discharge within 36mo	
		#	%	#	%	#	%
2018/19	416	157	37.7%	214	51.4%	257	61.8%
2019/20	327	115	35.2%	176	53.8%	203	62.1%
2020/21	274	108	39.4%	148	54.0%	170	62.0%
2021/22	313	122	39.0%	171	54.6%	190	60.7%
2022/23	332	111	33.4%	156	47.0%	N/A	N/A
2023/24	359	117	32.6%	N/A	N/A	N/A	N/A
2024/25	328	N/A	N/A	N/A	N/A	N/A	N/A

is the number of children discharged within the corresponding time frame.

% is the proportion of children discharged within the corresponding time frame.

N/A means that these data are not available. For example, for the cohort of children admitted in 2022/23, 36 month follow-up would be 2025/26 and those data are not yet available.

These data are for children under 16 years of age.

Interpretation

There is a downward trend in discharge rates across both populations. For Innu children, the 12-month discharge rate dropped from 48.3% (2019/20) to 21.6% (2023/24). For non-Innu children, it fell from 39.4% (2020/21) to 32.6% (2023/24). This suggests children entering out-of-home placements more recently are staying in placements longer.

Considerations

Innu children in earlier years (2019/20–2021/22) were more likely to be discharged within 12 months than non-Indigenous children (46–48% vs. 35–39%). This could indicate:

- investigations were capturing less severe situations that could be resolved quickly
- strong family/community supports facilitating reunification
- effective kinship care arrangements

For complete cohorts (2018/19–2020/21), roughly 60–75% of children from both groups were discharged within 36 months, suggesting that while entry patterns differ, longer-term trajectories are comparable.

The 2023/24 fiscal year demonstrates that 21.6% of Innu children and 32.6% of non-Indigenous children discharged within 12 months, compared to 40–48% in previous years. This warrants investigation into:

- changes in case complexity or acuity
- shifts in reunification practices or standards
- resource availability for family support services

While admissions to out-of-home placements for Innu children have declined, those who do enter appear to be staying longer. The system may now be admitting only the most complex cases requiring extended intervention, while successfully diverting less severe cases through prevention and family support.

The data suggests a system in transition—admission thresholds appear higher (particularly for Innu families), but once children are admitted, pathways to reunification may be taking longer.

Sensitivity and Specificity

Definition: Sensitivity measures the proportion of actual cases of child maltreatment that were correctly identified by the screening process and investigated. Sensitivity measures the proportion of cases involving maltreatment that were correctly screened in for investigation. It quantifies the percentage of children requiring protection who were appropriately identified and investigated. Specificity measures the proportion of cases without maltreatment that were correctly screened out. It quantifies the percentage of children not requiring protection who were appropriately excluded from investigation.

Table 7 assessed the trends in Newfoundland and Labrador’s child protection screening from 2018–2024. It presents sensitivity and specificity for the screening decision for all children referred to child protection in Newfoundland and Labrador by year from 2018/19 to 2024/25. Each year includes the total number of screened reports, the proportion screened in and screened out, and the distribution of true positives, false positives, false negatives, and true negatives.

Table 7. Sensitivity and specificity for child protection referrals in Newfoundland and Labrador 2018/19 to 2024/25

FISCAL YEAR	Child Protection Referrals		Screened in		Screened out		True Positive		False Positive		False Negative		True Negative		Sensitivity	Specificity
	#	%	#	%	#	%	#	%	#	%	#	%	#	%	%	%
2018/19	5,029	100.0%	2,676	53.2%	2,353	46.8%	1,075	21.4%	1,601	31.8%	361	7.2%	1,992	39.6%	74.9%	55.4%
2019/20	4,774	100.0%	2,583	54.1%	2,191	45.9%	1,090	22.8%	1,493	31.3%	372	7.8%	1,819	38.1%	74.6%	54.9%
2020/21	4,499	100.0%	2,373	52.7%	2,126	47.3%	1,009	22.4%	1,364	30.3%	355	7.9%	1,771	39.4%	74.0%	56.5%
2021/22	4,972	100.0%	2,317	46.6%	2,655	53.4%	1,051	21.1%	1,266	25.5%	437	8.8%	2,218	44.6%	70.6%	63.7%
2022/23	4,891	100.0%	2,062	42.2%	2,829	57.8%	979	20.0%	1,083	22.1%	411	8.4%	2,418	49.4%	70.4%	69.1%
2023/24	4,834	100.0%	1,549	32.0%	3,285	68.0%	769	15.9%	780	16.1%	510	10.6%	2,775	57.4%	60.1%	78.1%
2024/25	4,791	100.0%	1,505	31.4%	3,286	68.6%	747	15.6%	758	15.8%	367	7.7%	2,919	60.9%	67.1%	79.4%

Number child protection referrals is the number families with a child protection referral in the corresponding fiscal year.

Screened in is the number of child protection referrals opened for an investigation.

Screened out is the number of child protection referrals that did not open for an investigation.

True Positive (TP) = Screened in and had an investigation verified within 1 year of the referral date.

False Positive (FP) = Screened in and no investigations are verified within a 1 year period from the referral date.

False Negative (FN) = Screened out and had an investigation verified within 1 year of the referral date.

True Negative (TN) = Screened out and no investigations are verified within a 1 year period from the referral date.

Sensitivity = $TP / (TP + FN)$.

Specificity = $TN / (FP + TN)$.

These data are for children under 16 years of age.

Interpretation

The proportion of cases screened in for investigation decreased from 54.1% in 2019/20 to 31.4% in 2024/25, while cases screened out increased from 45.9% to 68.6%. Sensitivity declined from 74.9% in 2018/19 to 60.1% in 2023/24, before increasing to 67.1% in 2024/25. In 2024/25, approximately one-third of children who had a verified finding were not investigated following the initial screening.

Specificity improved from 55.4% in 2018/19 to 79.4% in 2024/25.

Considerations

The data suggests that policy or practice changes between 2018/19 and 2024/25 shifted the screening threshold toward being more conservative about opening investigations. This reduced unnecessary investigations (fewer false positives, higher specificity) but resulted in lower sensitivity. The 2024/25 sensitivity of 67.1% means that nearly one in three confirmed cases were initially screened out.

Table 8 presents sensitivity and specificity for the screening decision for Innu children in Newfoundland and Labrador compared to non-Indigenous children by year from 2018/19 to 2024/25. Each year includes the total number of screened reports, the proportion screened in and screened out, and the distribution of true positives, false positives, false negatives, and true negatives.

Table 8. Sensitivity and specificity for child protection referrals involving Innu and non-Indigenous families in Newfoundland and Labrador 2018/19 to 2024/25

FISCAL YEAR	Innu Status	Child Protection Referrals		Screened in		Screened out		True Positive		False Positive		False Negative		True Negative		Sensitivity	Specificity
		#	%	#	%	#	%	#	%	#	%	#	%	#	%	#	%
2018/19	Innu	244	100.0%	182	74.6%	62	25.4%	60	24.6%	122	50.0%	16	6.6%	46	18.9%	78.9%	27.4%
	non-Innu	4,569	100.0%	2,342	51.3%	2,227	48.7%	941	20.6%	1,401	30.7%	329	7.2%	1,898	41.5%	74.1%	57.5%
2019/20	Innu	241	100.0%	167	69.3%	74	30.7%	73	30.3%	94	39.0%	23	9.5%	51	21.2%	76.0%	35.2%
	non-Innu	4,311	100.0%	2,278	52.8%	2,033	47.2%	968	22.5%	1,310	30.4%	329	7.6%	1,704	39.5%	74.6%	56.5%
2020/21	Innu	254	100.0%	156	61.4%	98	38.6%	70	27.6%	86	33.9%	25	9.8%	73	28.7%	73.7%	45.9%
	non-Innu	3,998	100.0%	2,070	51.8%	1,928	48.2%	875	21.9%	1,195	29.9%	312	7.8%	1,616	40.4%	73.7%	57.5%
2021/22	Innu	236	100.0%	157	66.5%	79	33.5%	73	30.9%	84	35.6%	29	12.3%	50	21.2%	71.6%	37.3%
	non-Innu	4,481	100.0%	2,036	45.4%	2,445	54.6%	925	20.6%	1,111	24.8%	377	8.4%	2,068	46.2%	71.0%	65.1%
2022/23	Innu	286	100.0%	178	62.2%	108	37.8%	89	31.1%	89	31.1%	23	8.0%	85	29.7%	79.5%	48.9%
	non-Innu	4,345	100.0%	1,757	40.4%	2,588	59.6%	826	19.0%	931	21.4%	356	8.2%	2,232	51.4%	69.9%	70.6%
2023/24	Innu	302	100.0%	137	45.4%	165	54.6%	63	20.9%	74	24.5%	41	13.6%	124	41.1%	60.6%	62.6%
	non-Innu	4,258	100.0%	1,296	30.4%	2,962	69.6%	646	15.2%	650	15.3%	420	9.9%	2,542	59.7%	60.6%	79.6%
2024/25	Innu	303	100.0%	132	43.6%	171	56.4%	69	22.8%	63	20.8%	29	9.6%	142	46.9%	70.4%	69.3%
	non-Innu	4,208	100.0%	1,262	30.0%	2,946	70.0%	610	14.5%	652	15.5%	311	7.4%	2,635	62.6%	66.2%	80.2%

Number child protection referrals is the number families with a child protection referral in the corresponding fiscal year.

Screened in is the number of child protection referrals opened for an investigation.

Screened out is the number of child protection referrals that did not open for an investigation.

True Positive (TP) = Screened in and had an investigation verified within 1 year of the referral date.

False Positive (FP) = Screened in and no investigations are verified within a 1 year period from the referral date.

False Negative (FN) = Screened out and had an investigation verified within 1 year of the referral date.

True Negative (TN) = Screened out and no investigations are verified within a 1 year period from the referral date.

Sensitivity = $TP / (TP + FN)$.

Specificity = $TN / (FP + TN)$.

These data are for children under 16 years of age.

Interpretation

Across most years, sensitivity is higher than specificity. Sensitivity ranges from approximately 61–80%, meaning that between 61% and 80% of cases involving verified concerns were correctly screened in for investigation.

In contrast, specificity is substantially lower in earlier years, ranging from approximately 27-49% between 2018/19 and 2022/23, indicating that many cases without verified concerns were nevertheless screened in for investigation. Specificity improves in 2023/24 and 2024/25, suggesting greater accuracy in screening out cases where maltreatment or serious concern is not present.

Over the seven-year period, Innu and non-Indigenous populations demonstrate convergent trends in screening accuracy:

Innu families

- Sensitivity declined from 78.9% (2018/19) to 70.4% (2024/25), with a decrease to 60.6% in 2023/24.
- Specificity improved substantially from 27.4% (2018/19) to 69.3% (2024/25).

Non-Indigenous families

- Sensitivity declined from 74.1% (2018/19) to 66.2% (2024/25).
- Specificity increased from 57.5% (2018/19) to 80.2% (2024/25).

Overall, the table indicates that the screening system has historically emphasized sensitivity over specificity for Innu children, consistent with a risk-adverse approach to child protection. More recent years show evidence of improved balance, with increased specificity while maintaining moderate to high sensitivity.

Considerations

In earlier years (2018/19–2020/21), specificity for Innu families was low (27-46%), indicating that the majority of Innu families without verified concerns were nevertheless subjected to investigation. During this period, approximately 70–80% of screened-out Innu cases that did not require protection were still investigated, compared to 40–43% for non-Indigenous families.

By 2024/25, sensitivity and specificity rates have substantially converged between populations. While an 11-percentage-point gap in specificity remains, this represents significant improvement from the 30-53 percentage-point disparities observed in 2018/19–2021/22.

The data reveal a fundamental tension in child protection screening. For Innu families, improved specificity (fewer unnecessary investigations) has been accompanied by decreases in sensitivity.

Despite improvements, non-Indigenous families consistently demonstrate higher specificity across all years. In 2024/25, non-Indigenous families achieved 80.2% specificity compared to 69.3% for Innu families, indicating that Innu families without maltreatment remain more likely to be subjected to investigation than their non-Indigenous counterparts.

While both populations have seen reductions, Innu families continue experiencing higher rates of unverified investigations, representing significant intrusion into family life without corresponding child safety concerns.

False negative rates (cases screened out but later verified) provide insight into potential challenges in the screening decision:

2018/19

- Innu: 6.6% false negative rate
- non-Indigenous: 7.2% false negative rate

2024/25

- Innu: 9.6% false negative rate
- non-Indigenous: 7.4% false negative rate

The increase in false negatives for Innu families (from 6.6% to 9.6%) suggests that efforts to reduce over-investigation may have inadvertently resulted in missing some protection concerns.

The substantial increase in screen-out rates for both populations (Innu: 25.4% to 56.4%; non-Indigenous: 48.7% to 70.0%) indicates system-wide policy or practice changes toward more selective investigation. This shift appears to have differentially impacted screening accuracy across populations.

These patterns must be interpreted within the broader context of child welfare reform efforts, including initiatives to address Indigenous child over-representation, implement culturally responsive practices, and strengthen prevention services. The convergence in rates likely reflects intentional policy reforms, though the persistent disparities indicate ongoing challenges in achieving fully equitable screening practices.

Limitations

The sensitivity and specificity analyses presented in [Table 7](#) and [Table 8](#) provide useful indicators of screening accuracy; however, several important limitations should be considered when interpreting these findings.

The sensitivity and specificity analyses should be interpreted with several limitations in mind. Both measures rely on verified investigations within 12 months of the referral date as the proxy “gold standard” for determining whether a genuine protection concern existed—an assumption that is inherently imperfect, as some cases requiring protection may not result in a verified investigation within this window, while some verified investigations may reflect system-level practices or biases rather than objective evidence of maltreatment. For

Innu families specifically, the historical over-investigation documented in earlier years of this study means that verified investigation rates may themselves embody systemic bias, potentially understating false positives and overstating sensitivity during that period. The use of a fixed 12-month follow-up window also introduces arbitrariness, as protection concerns that emerge or are verified beyond this timeframe would be misclassified as true negatives. Compounding these issues, the small absolute number of Innu referrals in any given year—ranging from approximately 236 to 303 annually—means that even minor changes in the number of cases can produce substantial shifts in sensitivity and specificity estimates, and year-to-year fluctuations should not be attributed to meaningful changes in screening practice without further investigation. Finally, the administrative data cannot capture the information available to workers at the time of the screening decision, including narrative case details, family history, worker judgment, or service availability; cases classified as false negatives or false positives may therefore reflect reasonable decisions made under uncertainty rather than screening errors. Taken together, these limitations underscore the importance of treating sensitivity and specificity as system-level indicators of broad trends rather than precise measures of individual decision-making accuracy, and of reading them alongside qualitative evidence, community knowledge, and contextual information about policy and practice changes over the study period.

Discussion

This quantitative analysis reveals a Newfoundland and Labrador child protection system undergoing significant transformation in its engagement with Innu families and children. The findings document both meaningful progress and persistent challenges across the seven-year period from 2018/19 to 2024/25.

Progress in Reducing Disparities

The most striking achievement is the 77% reduction in placement disparity, with the decision-based disparity declining from 6.76 to 1.55. This substantial improvement, coupled with an 82% decrease in the rate of Innu children admitted to out-of-home placements, demonstrates that systemic reform can produce measurable equity gains. The concurrent improvement in screening specificity—rising from 27.4% to 69.3% for Innu families—indicates reduced over-surveillance and fewer unnecessary investigations of families without protection concerns.

The convergence observed in several metrics likely reflects intentional reform efforts undertaken through the Innu Round Table process and related governance agreements between the Innu, the province, and the federal government. These collaborative mechanisms have created pathways for data sharing, policy dialogue, and service reform. The quantitative improvements documented here provide evidence that such partnerships can produce tangible results while simultaneously highlighting the continued work required to achieve full equity.

Persistent Inequities

These gains must be contextualized within remaining inequities. Innu families continue to experience investigation rates nearly three times higher than non-Innu families, and this disparity increased from 2.08 to 2.87 during the study period. The 11-percentage-point gap in screening specificity and the 5.3-percentage-point difference in false positive rates indicate that Innu families without maltreatment remain disproportionately subjected to child protection investigation and intrusion.

The increase in false negative rates for Innu families from 6.6% to 9.6% raises concerns that corrective efforts to reduce over-investigation may have created unintended consequences, potentially leaving some children without needed protection. Investigation recurrence rates for Innu families showed substantial volatility, more than doubling from 7.0% in 2018/19 to a peak of 16.6% in 2021/22 during the COVID-19 pandemic, before declining to 8.2% in 2024/25. The year-to-year volatility in outcomes for Innu families across multiple indicators suggests that systemic responses remain not fully calibrated to the needs, strengths, and contexts of Innu families.

Maltreatment Type: Structural Conditions and Case Complexity

Single-Occurring Maltreatment and the Neglect–Physical Abuse Contrast

The maltreatment type data add important nuance to the findings. Investigations are classified as either single-occurring (one maltreatment type recorded) or co-occurring (two or more types recorded), with all percentages calculated as a proportion of total investigations with at least one maltreatment code. Single-occurring investigations accounted for between 72.6% and 84.3% of all Innu investigations across the study period.

Among single-occurring investigations, neglect was the predominant concern for Innu families in every fiscal year, accounting for between 37.7% (2018/19) and 50.9% (2020/21) of all Innu investigations with maltreatment codes, remaining elevated at 49.4% in 2024/25. This is consistently and substantially higher than for non-Innu families, where single-occurring neglect ranged from 27.3% to 45.1% across the study period. The sustained and dominant proportion of single-occurring neglect in Innu investigations is consistent with extensive research demonstrating that neglect is disproportionately identified in families experiencing structural disadvantage—including poverty, inadequate housing, food insecurity, and limited access to culturally appropriate services—that remain concentrated in Innu communities as a direct consequence of colonization.

The comparatively low proportion of physical abuse as a single-occurring concern in Innu investigations—accounting for only 0.9% to 6.5% of all investigations, compared to 5.9% to 16.5% for non-Innu families—further underscores the extent to which child protection involvement for Innu families is shaped by structural conditions rather than elevated rates of physical harm. This disparity widened over the study period and was particularly pronounced in 2021/22 (0.9% versus 10.2%) and 2023/24 (4.8% versus 16.5%). Administrative data cannot distinguish between neglect rooted in structural disadvantage and neglect attributable to parenting practices. This distinction has profound implications for the appropriateness of child protection responses: interventions aimed at removing children from neglectful environments may be misaligned when the underlying driver is material deprivation rather than lack of parental care. These patterns reinforce the importance of responses that address the structural determinants driving child protection involvement, rather than applying frameworks developed primarily in contexts where physical abuse is a more prevalent concern.

Co-occurring Maltreatment

Co-occurring maltreatment was present in between 15.7% and 27.4% of all Innu investigations across the study period, with no clear directional trend until 2024/25, when it declined markedly to 15.7%. For non-Innu families, co-occurrence ranged from 16.5% to 29.6% in most years before increasing sharply to 38.2% in 2024/25—a divergence that warrants further examination and may reflect shifts in case complexity, changes in worker recording practice, or differences in the profile of families coming to child protection attention in that year.

The presence of co-occurring maltreatment in roughly one-in-five to one-in-four investigations for both populations indicates that a substantial proportion of families face overlapping and interacting concerns. For Innu families, the combination of high single-occurring neglect and meaningful rates of co-occurring maltreatment may reflect the compounding effects of structural disadvantage and limited access to culturally responsive support services. Responses that address the full range of presenting concerns—rather than individual maltreatment types in isolation—and that are grounded in the structural conditions driving family need are more likely to be effective.

Placement Type: Kinship Care Growth and Group Care Concerns

Analysis of placement type, drawing on revised data correcting a misclassification in the previous draft, indicates that group care placements accounted for a substantially higher share of out-of-home placement days than previously reported—ranging from 7.97% to 10.35% of total placement days for Innu children and from 5.15% to 7.24% for non-Innu children across the study period. Foster care and kinship care figures are unchanged. The “Other” placement category now accounts for a smaller and more stable share of Innu placement days, ranging from 2.00% to 4.14%.

Kinship care continued to grow as the dominant placement type for Innu children, rising from 56.66% to 66.79% of total placement days, reflecting both the strengths of Innu family networks and the policy prioritization of family- and community-based placements consistent with the goals of the Innu Round Table process and the 2021 Protocol Agreement. The concurrent decline in foster care placements—from 32.68% to 21.09% of total placement days—may indicate progress in reducing the historical reliance on non-related, non-Innu foster placements. However, the administrative data do not capture whether kinship caregivers received adequate financial support, training, or access to services, nor whether placements were culturally appropriate from the perspective of Innu communities.

Group care is broadly associated with poorer developmental, educational, and mental health outcomes for children. The consistently higher average days in group care compared to foster or kinship placements, combined with an apparent increase in non-Innu children’s use of group care in more recent years, suggests that children placed in these settings are experiencing prolonged and potentially more complex care trajectories. The cultural appropriateness of group care facilities for Innu children—including access to Innu language, connection to community, and culturally informed programming—cannot be assessed from administrative data alone and warrants direct inquiry through qualitative and community-based research.

Time to Discharge: A System in Transition

Discharge patterns revealed declining 12-month discharge rates across both populations: from 48.3% (2019/20) to 16.7% (2024/25) for Innu children, and from 39.4% (2020/21) to 20.7% (2024/25) for non-Innu children. While fewer Innu children are admitted to out-of-home placements, those who are admitted appear to require more extended intervention, indicating that the system may now be addressing only the most complex situations

while successfully diverting less severe cases through prevention and early intervention services. The 2023/24 cohort, where only 21.6% of Innu children were discharged within 12 months compared to 40–48% in earlier years, warrants investigation into changes in case complexity, reunification practices, or resource availability.

Colonial Context and the Limits of Administrative Data

These findings must be interpreted within the historical and ongoing impacts of colonialism on Indigenous families. The persistent disparities documented in this report reflect systemic patterns that continue to subject Innu families to disproportionate surveillance, assessment, and intervention. The dominance of neglect in Innu investigations, the comparatively low rate of physical abuse, and the structural conditions shaping these patterns are not incidental features of the data: they reflect the concentrated effects of poverty, housing insecurity, and limited access to services in Innu communities that are themselves the product of colonial policies.

The quantitative data provide evidence of these patterns but cannot capture the qualitative experiences of families navigating the system, the cultural appropriateness of interventions, or the decision-making processes that generate these outcomes. Administrative child welfare data systems were not designed to capture the broader impacts of colonial and racist policies on Indigenous families. Critical aspects of children's experiences—including whether placements were culturally appropriate, whether service responses addressed structural need, and how Innu families experienced their interactions with child protection—remain largely inaccessible to systematic quantitative analysis.

Implications for Policy and Practice

Moving forward, these findings can inform policy development, service design, and resource allocation as the Innu assert jurisdiction over child and family services. The data reveal specific decision points where disparities persist and require attention: investigation rates and their structural drivers; the nature of maltreatment concerns—particularly the dominance of single-occurring neglect and the low proportion of physical abuse in Innu investigations—and the structural conditions underlying them; co-occurring maltreatment and the need for coordinated, multi-faceted service responses; investigation recurrence; group care quality, duration, and cultural appropriateness; and the balance between sensitivity and specificity in identifying families requiring support. These findings also highlight the importance of prevention services, family supports, and culturally responsive practices that have contributed to keeping more Innu children safely with their families.

While the quantitative patterns documented here provide critical evidence of systemic disparities and change over time, they represent only one form of knowledge. Complete understanding requires integration with Innu community knowledge, lived experience, and Indigenous governance perspectives. Future data systems must be designed in partnership with Innu leadership to ensure they capture information that is meaningful for Innu decision-making, reflect Innu priorities and values, and support rather than constrain Innu jurisdiction and self-determination in child and family services.

Data Limitations

This analysis is strengthened by access to comprehensive provincial administrative data spanning seven fiscal years with strong variable availability for key child welfare indicators. However, several important limitations must be acknowledged when interpreting these findings.

Missing and Inconsistent Data Fields

Certain critical data elements are not mandatory within the Integrated Service Management (ISM) system, resulting in unknown levels of missingness that reduce precision for identity-based and geography-based analyses. Indian Registration Numbers for children and caregivers are not consistently recorded, and address information used to determine residence on or off reserve is incomplete. These gaps limit the ability to examine outcomes specifically for children ordinarily resident on reserve or to disaggregate findings by Sheshatshiu Innu First Nation and Mushuau Innu First Nation. All analyses therefore refer broadly to “Innu” where further disaggregation was not feasible.

Fields capturing First Nations identity include free-text options that introduce variability and reduce standardization in how Indigenous identity is recorded and classified. Information indicating whether a child was placed specifically to access essential services is only partially available and not consistently captured within structured data fields. The identification of Innu families relies on any person associated with the family unit being identified as Innu in the administrative data, which may not consistently reflect the most appropriate operational definition for all research questions.

Structural and Conceptual Limitations

Administrative child welfare data systems were not designed to capture the broader impacts of colonial and racist policies on Indigenous families. Critical aspects of children’s experiences—including the reasons foster home assessments were not approved, the decision-making processes influencing placement selection, the cultural and relational fit of placements, the availability and quality of culturally appropriate services, and the involvement of extended family and community in decision-making—are often documented only in unstructured narrative case notes. Reliance on unstructured documentation limits the ability to systematically extract and analyze this information at scale.

The definitions and categories embedded in administrative data reflect provincial operational frameworks and may not align with Innu understandings of family, community, protection, or well-being. Variables measuring outcomes such as “discharge” or “investigation recurrence” reflect system processes rather than holistic measures of child and family wellness from an Innu perspective.

Historical Data Quality and System Transitions

Historical records dating back to 2000 were migrated from the former Client Referral Management System (CRMS) into ISM when the current system was implemented in 2018.

This transition may have introduced inconsistencies in data quality, variable definitions, or recording practices that affect longitudinal comparisons. Historical data quality issues complicate the reliable tracking of children's pathways through care over extended periods, including assessment of placement instability, number of placement changes, and continuity over time.

The analyses focus primarily on data from 2018/19 forward due to the implementation of ISM and improvements in data quality during this period. However, this relatively short timeframe limits the ability to assess longer-term trends or the full trajectory of reform efforts that may have begun earlier.

Methodological Constraints

Maltreatment type data were introduced in 2018, but limitations exist as the relationship between cases and maltreatment codes is one-to-many. Workers may record more than one maltreatment type and are not asked to provide a primary maltreatment type, complicating analysis of maltreatment patterns and their relationship to outcomes. The absence of a primary maltreatment designation means that the relative severity or primacy of different concerns within the same investigation is not captured in these figures.

Disposition data indicating whether cases were transferred or kept open for ongoing child welfare services have not been available in the data extracts, limiting the ability to fully characterize service trajectories following investigation.

Small absolute numbers of Innu children involved with the child protection system in any given year create statistical volatility, where changes in outcomes for even a few children can produce large percentage shifts. This is particularly evident in discharge rates, recurrence rates, and maltreatment type distributions, where denominators range from 30 to 92 children or investigations annually. While rates per 1,000 adjust for population differences, small numbers reduce the precision and stability of annual estimates.

The calculation of sensitivity and specificity relies on verified investigations within 12 months of the referral date as the "gold standard." Not all cases requiring protection may result in verified investigations within this timeframe, and some verified investigations may reflect system practices rather than objective protection needs.

Reference Population Limitations

Census 2021 data indicated approximately 720 Innu children living in Sheshatshiu and Natuashish, while Government of Newfoundland and Labrador 2019 reports estimate 1,170 children identify as Innu province-wide. This discrepancy reflects different methodologies and definitions of Indigenous identity. The higher estimate from government reports was used to establish rates per 1,000 children and calculate disparities, in collaboration with the Inquiry. However, uncertainty regarding the true denominator affects the precision of rate calculations and disparity measures. Population estimates are based on Census 2021 and have not been updated for population changes during the study period.

Limitations in Capturing Service Context

The administrative data do not capture information about service availability, worker caseloads, training in culturally responsive practice, resource constraints, or policy changes that may influence decision-making and outcomes. The data cannot explain why patterns occur or identify the specific mechanisms through which disparities emerge and persist. Contextual factors such as poverty, housing adequacy, access to healthcare, community resources, and the impacts of intergenerational trauma are not systematically captured in child welfare administrative data, yet these factors profoundly shape families' interactions with the child protection system.

Incomplete Follow-Up Data

For recent fiscal year cohorts, particularly 2022/23 onward, complete 24-month and 36-month follow-up data are not yet available. This limits the ability to draw conclusions about longer-term outcomes such as discharge rates and permanency for children admitted to out-of-home placements more recently. Apparent declines in discharge rates for recent cohorts may partially reflect insufficient follow-up time rather than true changes in practice.

Implications for Interpretation

These limitations do not invalidate the findings but require careful, contextualized interpretation. The data are generally sufficient to support system-level examinations of patterns, trends, and disparities across major decision points in the child welfare continuum. However, they are less able to explain why these patterns occur, how individual families experience the system, or whether interventions are culturally appropriate and effective from an Innu perspective.

The quantitative findings presented in this report represent one form of evidence that must be integrated with Innu community knowledge, lived experience testimony, qualitative research, and Indigenous governance perspectives to support comprehensive understanding and informed decision-making. Future data systems designed in partnership with Innu leadership should address these limitations by incorporating variables that reflect Innu priorities, capture cultural dimensions of service delivery, and support Innu jurisdiction and self-determination in child and family services.

References

- Blumenthal, A., & Sinha, V. (2014). *Understanding substantiation and referrals to ongoing services in the Canadian child welfare system: A cross-sectional analysis of the Canadian incidence study of reported child abuse and neglect 2008*. McGill University.
- Commission to Promote Sustainable Child Welfare. (2012). *Final report*. Ontario Association of Children's Aid Societies.
- Department of Child, Youth and Family Services. (2011). *Policy and procedure manual*. Government of Newfoundland and Labrador.
- Fallon, B., Filippelli, J., Black, T., King, B., & Ekins, A. (2016). *Ontario child welfare indicators 2015: Fact sheet*. Child Welfare Research Portal.
- Fallon, B., Trocmé, N., Carradine, J., Chabot, M., Esposito, T., Filippelli, J., Fluke, J., Fuller, T., Hélie, S., King, B., Mishna, F., Petti, T., & Watton, D. (2021). *Developing a framework for determining substantiation: Addressing the tension between maltreatment and harm*. *Child Abuse & Neglect*, 119, 105003.
- Fallon, B., Trocmé, N., MacLaurin, B., Sinha, V., Black, T., Tonmyr, L., Chabot, M., Hélie, S., Lefebvre, R., Collin-Vézina, D., Koster, A., Laurendeau, C., Lavergne, C., Turcotte, D., & Workman, K. (2025). *Canadian Incidence Study of Reported Child Abuse and Neglect 2019 (CIS-2019)*. Public Health Agency of Canada.
- Fallon, B., Trocmé, N., Saint-Girons, M., Caldwell, J., Quinn, A., Milne, C., Wilson, L., Paul, L., Rotenberg, G., Mercado, J., Rodomar, S., Sistovaris, M., & Haber, E. (2022). *Review of data and process considerations for compensation under 2019 CHRT 39*. Indigenous Services Canada.
- First Nations Information Governance Centre. (2014). *Ownership, control, access and possession (OCAP®): The path to First Nations information governance*. FNIGC.
- Government of Newfoundland and Labrador. (2018). *Children, Youth and Families Act (CYFA)*. Retrieved from <https://www.assembly.nl.ca/Legislation/sr/statutes/c12-3.htm>
- Government of Newfoundland and Labrador. (2020). *Children, Youth and Families Act: Overview and implementation*. Department of Children, Seniors and Social Development.
- Government of Newfoundland and Labrador. (n.d.). *Child protection services*. Department of Children, Seniors and Social Development.
- Indigenous Services Canada. (2013). *First Nations Child and Family Services Information Management System (FNCFS IMS)*. Government of Canada.
- Ontario Association of Children's Aid Societies. (2012). *Commission to Promote Sustainable Child Welfare: Final report*. OACAS.
- Statistics Canada. (2021). *Census of population 2021: Custom tabulations on Indigenous identity by age, Newfoundland and Labrador*. Government of Canada.
- Tremblett, S., Trocmé, N., & Delays, A. (2021). *Newfoundland and Labrador child welfare service information sheet (CWRP Information Sheet #217E)*. Canadian Child Welfare Research Portal. www.cwrp.ca

Trocmé, N., Esposito, T., Laurendeau, C., Thomson, W., & Milne, L. (2009). *La matrice canadienne des résultats de la protection de l'enfance* [Canadian child welfare outcomes matrix]. Centre of Excellence for Child Welfare.

Trocmé, N., Fallon, B., MacLaurin, B., Sinha, V., Black, T., Fast, E., Felstiner, C., Hélie, S., Turcotte, D., Weightman, P., Douglas, J., & Holroyd, J. (2010). *Canadian Incidence Study of Reported Child Abuse and Neglect 2008 (CIS-2008)*. Public Health Agency of Canada.

Glossary

Administrative Data

Data collected and maintained by government departments or agencies as part of their routine operational and service delivery activities. In this report, administrative data refers to child protection records maintained by the Department of Children, Seniors and Social Development (CSSD) in Newfoundland and Labrador through the Integrated Service Management (ISM) system.

Admissions to Care

The entry of a child into an out-of-home living arrangement—such as foster care, kinship care, or group care—within a given fiscal year. This report measures admissions to care as a rate per 1,000 investigations to enable comparison across populations and over time. See also: *Out-of-Home Care, Placement*.

Children, Youth and Families Act (CYFA)

The legislation governing child welfare, protection, and service delivery in Newfoundland and Labrador, which came into force on June 28, 2019. It replaced the former Child and Youth Care and Protection Act and sets out the criteria for protective intervention, investigative processes, and time limits for custody orders.

Cohort

A group of children or families who share a common starting point—such as a fiscal year of investigation or admission to care—and who are tracked together over time to measure outcomes such as recurrence, discharge, or placement changes.

Continuous Custody Order

A court order placing a child in the care and custody of the provincial state for an extended period when caregivers are unable to demonstrate sufficient progress in addressing child protection concerns. Under Newfoundland and Labrador legislation, this order may remain in effect until the child reaches age 16.

Count

A simple numerical measure of the total number of events, cases, or individuals within a specific category or dataset. Counts are used in this report to describe the volume of referrals, investigations, and admissions to care for Innu and non-Innu children.

Decision-Based Disparity

A disparity measure calculated by comparing the rate of a child welfare outcome (such as admission to care) per 1,000 investigations for one population relative to another. This approach accounts for differences in investigation rates to isolate disparities in decision-making at a specific point in the child welfare process.

Discharge from Care

The formal end of a child's out-of-home placement, typically through reunification with family, transfer to another arrangement, or aging out of the system. In this report, discharge rates are measured at 12, 24, and 36 months following admission and are used as a proxy for time to permanency.

Disparity Index (DI)

A statistical measure that compares the rate of child welfare involvement for one population group relative to another. A DI of 1.0 indicates proportionate representation; a DI greater than 1.0 indicates over-representation; a DI less than 1.0 indicates under-representation. In this report, the DI compares rates for Innu children to those for non-Innu children.

Disproportionality

The over- or under-representation of a particular racial, ethnic, or demographic group at one or more decision points in the child welfare system relative to their share of the general child population.

False Negative (FN)

A case that was screened out following an initial referral but was subsequently found to involve verified child protection concerns within 12 months. A high false negative rate suggests that the screening process may be missing legitimate protection concerns.

False Positive (FP)

A case that was screened in and investigated but for which no maltreatment was verified within 12 months of the referral date. A high false positive rate indicates unnecessary investigations of families without verified protection concerns.

Family Action Agreement

A voluntary service plan established collaboratively between CSSD, the family, and other community service providers when allegations are verified but the level of risk does not require court intervention. Services are provided with the consent and participation of the family.

First Nations Child and Family Services Information Management System (FNCFS IMS)

A federal data system maintained by Indigenous Services Canada that tracks child maintenance data for First Nations children ordinarily resident on reserve. It was implemented nationally in the 2013–2014 fiscal year.

Innu Round Table (IRT)

A tripartite governance process bringing together leadership and staff from the Innu, the Province of Newfoundland and Labrador, and the Government of Canada multiple times per year. Established in 2012, the Round Table includes committees focused on child and family services and has produced key agreements governing data sharing and service reform.

Integrated Service Management (ISM) System

The provincial child protection administrative data system implemented in Newfoundland and Labrador in 2018 and maintained by the Department of Children, Seniors and Social Development (CSSD). The ISM system houses current child protection records and historical records migrated from the former Client Referral Management System (CRMS).

Investigation

The formal assessment process initiated by CSSD following a screened-in referral, to determine whether reported child protection concerns are verified and whether intervention is required. Investigations are conducted by the intake and assessment team.

Investigation Recurrence

The occurrence of a new, verified child protection investigation within 12 months of the closure of a previous investigation for the same family. Recurrence is used as a proxy measure of service effectiveness and system response to ongoing family need.

Kinship Care

An out-of-home placement arrangement in which a child is placed with a relative or member of their extended family or community network rather than with an unrelated foster family. Kinship care is recognized as a placement option within Newfoundland and Labrador's child welfare system.

Maltreatment Type

The category of abuse or neglect identified and recorded by the investigating worker during a child protection investigation. Types captured in this report include physical abuse, emotional abuse, sexual abuse, neglect, and other. Investigations are classified as either single-occurring (one maltreatment type recorded) or co-occurring (two or more maltreatment types recorded within the same investigation). Maltreatment type codes were introduced in Newfoundland and Labrador's Integrated Service Management (ISM) system in 2018/19, with data available across the full study period. Administrative data do not capture a primary maltreatment designation, meaning the relative severity or primacy of different concerns within the same investigation is not recorded.

OCAP® Principles

A set of standards developed by the First Nations Information Governance Centre (FNIGC) that assert First Nations' rights to govern data about their peoples, communities, and lands. OCAP® stands for Ownership, Control, Access, and Possession. These principles provide an ethical and governance framework for research involving First Nations data and informed the conduct of this research.

- **Ownership:** First Nations collectively own data relating to their people and communities.
- **Control:** First Nations have the right to control how data about them are collected, used, and disclosed.
- **Access:** First Nations have the right to access data about themselves in meaningful and usable forms.
- **Possession:** First Nations maintain physical or administrative custody of data as a mechanism to support governance and self-determination.

Ontario Child Abuse and Neglect Data System (OCANDS)

A longitudinal data infrastructure developed at the University of Toronto that tracks families through child welfare systems beyond the investigative period. OCANDS consolidates administrative data from multiple platforms into a common format to enable system-level analysis of child welfare outcomes over time. It was used in this report to extract, harmonize, and analyze Newfoundland and Labrador child protection data.

Out-of-Home Placement

Any living arrangement in which a child is placed outside of their family home under the supervision of the child protection system. Types of out-of-home care include foster care, kinship care, group care, and other residential settings. In this report, out-of-home care is measured through admissions to care. See also: *Admissions to Care, Placement*.

Permanent Care and Custody Order

A court order granting the province permanent care and custody of a child, typically issued when parents or caregivers have been unable to demonstrate sufficient progress in addressing child protection concerns. This order remains in effect until the child reaches age 16 under Newfoundland and Labrador legislation.

Placement

Any out-of-home living arrangement for a child, including foster care, kinship care, group care, or other residential settings, made in the context of child protection involvement. See also: *Admissions to Care, Out-of-Home Care*.

Protocol Agreement (2021)

An agreement between the Innu and the Province of Newfoundland and Labrador, replacing the earlier 2015 Working Relationship Agreement. The Protocol Agreement includes information-sharing provisions enabling data collaboration and forms part of the governance framework for the Innu Round Table process.

Proportion

A measure that expresses a subset as a fraction or percentage of a total. In this report, proportions are used to describe, for example, the percentage of referrals screened in for investigation or the percentage of children discharged from care within a given timeframe.

Protective Intervention Program (PIP) File

The administrative file opened in the ISM system to record and manage child protection involvement for a family, including referrals, investigations, and service provision.

Rate per 1,000

A standardized measure expressing how frequently an event occurs for every 1,000 units of a defined population or base. Rates per 1,000 allow comparison across groups of different sizes. In this report, rates are calculated per 1,000 children (for investigation rates) and per 1,000 investigations (for admission rates).

Referral

A report made to CSSD by a member of the public, a mandated reporter, or another service provider regarding concerns about a child's safety or well-being. Referrals are screened to determine whether they meet the threshold for formal investigation.

Screening (Screen-In/Screen-Out)

The initial decision made by CSSD following a referral to determine whether the reported concerns meet the legislative criteria under Section 10 of the CYFA (2018) and warrant a formal investigation. Cases meeting the threshold are “screened in” for investigation; those that do not are “screened out.”

Sensitivity (True Positive Rate)

A measure of the proportion of cases involving actual child maltreatment or verified protection concerns that were correctly identified and screened in for investigation. High sensitivity means fewer children requiring protection are missed at screening. Calculated as: $TP \div (TP + FN)$.

Specificity (True Negative Rate)

A measure of the proportion of cases without verified maltreatment or protection concerns that were correctly screened out and not subjected to investigation. High specificity means fewer families without genuine protection concerns are unnecessarily investigated. Calculated as: $TN \div (FP + TN)$.

Supervisory Order

A court order under which a child remains in the care of their primary caregiver while under the formal supervision of CSSD. This order is used when court oversight is required but removal of the child from the home is not deemed necessary.

Temporary Custody Order

A court order placing a child in the care of a manager of child protection (e.g., foster care) for a defined period. Under the CYFA (2018), the first temporary custody order may last a maximum of six months, with time limits for any subsequent orders set by the child’s age.

True Negative (TN)

A case that was screened out and for which no verified protection concerns were identified within 12 months of the referral date. True negatives represent correct screening decisions for cases that did not require investigation.

True Positive (TP)

A case that was screened in for investigation and for which protection concerns were subsequently verified within 12 months of the referral date. True positives represent correct screening decisions for cases involving genuine maltreatment or protection need.

Verified Investigation

An investigation in which a child protection worker determines that maltreatment or a protection concern has been confirmed based on the evidence gathered. In this report, a verified investigation within 12 months of a referral or a prior investigation closure is used as the standard for defining true positives and measuring recurrence.

Working Relationship Agreement (2015)

An agreement reached between the Innu and the Province of Newfoundland and Labrador in 2015, establishing a framework for collaborative engagement in child and family services. It was subsequently replaced by the 2021 Protocol Agreement.

This glossary reflects definitions as used in this report and in the provincial child welfare context of Newfoundland and Labrador. Terminology may differ across jurisdictions or data systems.