

# Our Kids Are Worth It **Our First Year**

Strategy for Children and Youth



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December 2008

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# Executive Summary

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Our first year has been an exciting one. Since *Our Kids Are Worth It: Strategy for Children and Youth* was released last December, a lot has been accomplished behind the scenes and on the ground in our communities.

As expected, much of our work has been foundational in nature and occurred behind the scenes—for example, building relationships, researching best practices and analysing data, learning to think and work differently, as team members, and defining jobs, by describing them in position descriptions and then actually doing them.

We can also point to progress in each of the five key directions of our strategy.

## **Build a Strong Foundation:**

- A working group is defining the components of a well-child system, and analysing how these programs connect and overlap, and where there are gaps.
- More spaces and greater subsidies are making child care more accessible and affordable, and funding is available to recruit and retain qualified, caring staff.

## **Identify Problems, Help Early:**

- The Early Developmental Instrument, a teacher-completed survey, was introduced, probing five general areas of child development when they begin in grade primary.
- The Parenting Journey pilot project is under way in 10 sites.
- The Family Help program—initiated at the IWK to improve access to effective treatment for mild to moderate mental health disorders—has been expanded to Cape Breton, virtually eliminating wait times for treatment through this program.

## **Co-ordinate Programs, Services:**

- Regional specialists have been hired, the Schools Plus pilot projects are under way within four school board regions, and the WRAP pilot projects are up and running in four sites.
- These initiatives are aimed at strengthening relationships among all those who provide services for children, youth, and families, co-ordinating related programming, offering this programming at convenient times and places, and identifying gaps in programs and services.

## **Improve Access, Close Gaps:**

- More information is available to children, youth, and families through HelpZone.ca and the Kids' Help Phone—Canada's only toll-free, 24-hour, bilingual and anonymous help line for children and youth.
- Five youth navigators and case planners have been hired and are working with at-risk youth.
- The new Family and Youth Services section at Community Services has created program areas, including prevention, youth services and supports, and volunteer initiatives. Training in youth leadership and engagement, as well as family support and intervention, has also been provided.

- The Child Welfare Mental Health pilot project at the IWK is up and running, with a goal of enabling more timely access for mental health services to children, youth, and families involved in child welfare services.

### **Engage Youth, Promote Shared Accountability:**

- A Place to Belong pilot projects are under way in eight communities, in partnership with community organizations who have been able to expand existing programs and add new ones. The goal is to engage youth in positive activities that enable them to build self-esteem and develop social, life, and career-related skills.
- The Leaders of Today Provincial Youth Network has been established, with the third networking and organizing conference held this year. A Lunch and Learn series, with experts in the field of youth engagement, was also held.
- A provincial crime prevention strategy was launched, with a number of initiatives, such as a Community Crime Prevention Fund and the Halifax Attendance Centre, having direct links to Our Kids Are Worth It.

We have also updated the statistics reported a year ago as measures toward our goals and expected outcomes. While it is unrealistic to expect significant progress linked to a strategy within one year, we can get where we are going only if we continue to remind ourselves of our destination and signposts along the way.

Beyond statistics, the best evidence of our progress may be what people are saying—parents, educators, child care operators, family resource centre staff, doctors, and young people themselves.

- “Happy, active children, and happy staff!!!”
- “We are excited about the enhanced services and new possibilities.”
- “... parents are indicating satisfaction, particularly with the convenience of receiving care in their own homes at times that work for them.”
- “Our community has been ready for this innovative kind of service for some time.”
- “The Leaders of Today conference was an amazing experience, all of us youth putting our minds together to create something so powerful.”

Perhaps what Robert Wright, Executive Director, Child and Youth Strategy, says gives us the best reason to expect continuing progress. “The prevalent attitude among virtually everyone I have encountered is a passion for doing their very best to support children, youth, and families.”

No question, we have a lot of work ahead—but with so many people, with that kind of passion, we are bound to reach our goals. Our kids are worth nothing less.

“... youth are partaking in positive social activities, learning new skills, and taking advantage of mentoring and leadership opportunities.”

# 1. Introduction

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The future of Nova Scotia lies with our children. On December 3, 2007, government released *Our Kids are Worth It: Strategy for Children and Youth*—a comprehensive, multi-year plan to begin shaping this future.

In simple terms, we want to give kids the best start in life, help them stay—or get back—on track, and help them grow into caring, responsible adults. This leads us to our vision and goals, which we will work to achieve through a concentrated, multi-year effort, working through partnerships within government and between government and communities.

## Our Vision

Children and youth are healthy, safe, nurtured, and responsible—and given the right opportunities to be the best they can be.

## Our Goals

- Children and youth are well cared for, safe, healthy, and active.
- Children and youth are supported in making successful transitions in their lives from birth to adulthood.
- Children and youth are engaged in ways that support their successful development and their understanding and acceptance of responsibilities for their actions.
- Families are supported in ways that help them meet their needs and responsibilities for their children.

When we released our strategy a year ago, we knew that Nova Scotians would want to keep informed about the progress we are making toward our vision and goals. That is why we made accountability a key commitment within our strategy.

*Our Kids are Worth It: Our First Year* is part of this accountability.

*Our First Year* is our first annual report on progress in implementing specific actions identified within our strategy's five key directions:

- Build a strong foundation
- Identify problems and help early
- Co-ordinate programs and services
- Improve access and close gaps
- Engage youth and promote shared accountability

We also committed to reporting on progress toward our expected outcomes:

- fewer children living in low-income families
- higher percentage of youth getting appropriate level of physical activity
- improved rates of school readiness
- lower dropout rates
- more youth volunteering
- fewer youth involved in crime
- reduced wait times for appropriate mental health services
- reduced rates of youth homelessness

Like goals, outcomes have a long-term focus, and it is unrealistic to expect significant progress linked to a strategy within one year. Nonetheless, we can only get where we are going if we continue to remind ourselves of our destination and the signposts along the way. Therefore, we will repeat the statistics reported a year ago and report new statistics—where we have them—related to these outcomes. We will also report on work to identify additional or alternative measures to enhance our ability to chart our progress as we move forward.

Finally, we want people to understand the nature of our work in our first year. Much of our work was foundational in nature and occurred behind the scenes—for example, building relationships, researching best practices and analysing data, learning to think and work differently, as team members, and defining jobs, by describing them in position descriptions and then actually doing them.

“It’s been a very busy and exciting year—one of fresh starts, transitions, and innovation. We’ve created new partnerships, new positions, and new programs. We’re also working to change an organizational culture that is structured to support individual mandates by demonstrating that working together can achieve better results than working in isolation. Changing attitudes and organizational culture takes time, but I know we will succeed—because the prevalent attitude among virtually everyone I have encountered is a passion for doing their very best to support children, youth, and families.”

*Robert Wright, Executive Director, Child and Youth Strategy*

As well, we took the time to plan carefully. Service-level agreements have been signed for pilot projects, to ensure that everyone understands—from day one—roles, responsibilities, and what we want to measure and achieve. Project management committees have also been struck to monitor progress and keep efforts on track.

Of course, the people doing the work—and the people they are working with—need to understand the strategy and their responsibilities within it. Orientation and training have been provided to new staff. As well, information has been developed and shared for parents, youth, and others in the community to build their awareness and encourage their involvement in a strategy that requires understanding and collaboration for success.

This report is another step in a journey. It details the work that has been done to date, highlights plans for the years that lie ahead, and pinpoints where greater effort is required. At its heart, however, it is full of hope and promise that our children and youth are healthy, safe, nurtured, and responsible—and given the right opportunities to be the best that they can be.

This report is another  
step in a journey.



## 2. Build a Strong Foundation

*“Build a strong foundation.”* These are simple words, but actually doing so is complex and takes time.

The task is complex because a solid foundation is made up of many parts. First, a child’s early days (beginning even before birth) and years are critical to their success in becoming healthy, happy, successful teenagers and adults. This links directly to the need to support families in their efforts to provide stable, caring homes. In turn, stable families are supported by healthy, safe communities with access to affordable housing, adequate health care, a job or stable income, educational support, celebration of diversity, and cultural and recreational activities.

Complicating this even further is the reality that every child and every family is different. We therefore need a range of flexible, non-traditional options—that respond to differences in needs, languages, cultures, and ages—to build a strong foundation.

Clearly, this takes time and patience; but taking the time to build a strong foundation for our children and youth now can prevent many issues and challenges down the road.

The actions that were identified last year are primarily long term. In particular, the poverty reduction strategy and the creation of the well-child system require extensive planning, consultation, and collaboration. They also require a change in the way we think and work, and the way we deliver services and provide support for children and families.

The Early Learning and Child Care Plan, though also long term, is already delivering clear benefits. “Our children have benefited greatly and we see it every day as they use all of our new things. To top it all off, the staff have benefited financially and are very appreciative. You can’t beat that combination—happy, active children and happy staff!! —Karen Auby, St. Paul’s Youth Centre Nursery, Mount Uniacke

### Build a Strong Foundation

Action	Status	Comments
Poverty Reduction Strategy	In development	<ul style="list-style-type: none"><li>• Poverty Reduction Strategy Working Group established December 2007</li><li>• Public consultations held, November 2007 to March 2008</li><li>• Working group submitted recommendations to government June 2008; asked for government response by March 2009</li></ul>

Action	Status	Comments
Early Learning and Child Care Plan	Under way	<ul style="list-style-type: none"> <li>• Child care more accessible—1,050 licensed child-care spaces created, exceeding goal of 1,000, two years ahead of schedule</li> <li>• More options created through the Family Home Day Care Program, giving parents access to monitored day-care services in a home environment</li> <li>• Child care more affordable—with 300 more subsidized child-care spaces created this year (bringing the total to 550), available to more parents (by raising the income eligibility criteria), and at less cost (by lowering the daily parent fee)</li> <li>• More support for children with special needs—through the new Supported Child Care Program—ensuring that families have access to child care in their own communities, regardless of the child’s developmental needs</li> <li>• More support for recruitment and retention of qualified child-care educators—with new funding for individuals pursuing a diploma or degree in early childhood education and for existing staff to continue their education</li> </ul>
Well Child System	Under way	<ul style="list-style-type: none"> <li>• Work group established in spring 2008</li> <li>• Year 1 work focusing on defining components of a well-child system, starting at prenatal care to six months (e.g., prenatal clinics, breastfeeding program, postpartum care, etc.) and continuing to age eight</li> <li>• Analysis under way of how programs connect, where they overlap, and where there are gaps—all with a focus on prevention and well children, looking at all aspects of the health and well-being of babies and their families</li> </ul>
Social Policy Research	Under way	<ul style="list-style-type: none"> <li>• Partnership with Nova Scotia Health Research Foundation established; meetings occur monthly, with access to members on specific issues at any time</li> <li>• Purpose is to support plan implementation and investment, based on solid research and evidence of what works</li> <li>• Government and community partners have access to research expertise in all areas of health and well-being for children, youth, and families, including evaluation</li> </ul>

Priorities for the next year include

- continuing implementation of the 10-year Early Learning and Child Care Plan (see [www.gov.ns.ca/coms/families/elcc.html](http://www.gov.ns.ca/coms/families/elcc.html)), now entering its third year
- expanding the well-child analysis to programs and services for children from birth to age eight
- developing an evaluation framework—through our partnership with the Nova Scotia Research Foundation—to assess our pilot projects and overall strategy implementation

### 3. Identify Problems, Help Early

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The earlier problems are identified, the earlier help can be provided; and the earlier help is provided, the more likely the problem can be corrected or the risk reduced.

#### Monitoring Early Childhood Development

We are watching carefully the development of babies, toddlers, and young children. Specifically, we are gathering information that will help us measure and assess how well communities are doing in supporting the early development of children.

Screening between the prenatal and preschool years is being enhanced through efforts in child-care and family resource centres, as well as through interactions between families and health-care professionals. When children start school, we have another excellent opportunity to assess their early childhood development.

The Early Developmental Instrument—a teacher-completed survey—was introduced last year. The survey probes five general areas of a child’s development when they begin in grade Primary: physical health and well-being; social knowledge and competence; emotional health and maturity; language and cognitive development; and general knowledge and communication skills.

This survey is a population health measure for communities. The data gathered is intended to help educators and community partners understand and measure children’s early learning at school as an outcome of early childhood development.

While results are not linked to any individual child, study results could bring about changes in communities where there is a need to improve services and supports for families with young children.

#### Helping Children, Families Early

We are also finding new ways to reach out to families to support them by adding new programs and services and by helping them navigate and access programs and services offered by numerous government departments and in communities. Our specific commitments last year were to launch the Parenting Journey pilot project and to expand Family Help.

Parenting Journey is aimed at promoting the optimal growth, development, and well-being of children and youth by providing family support through purposeful, goal-based home visits.

Parenting Journey extends home visits and support to families until their children turn 16. Building on the services provided by early intervention programs, the Healthy Beginnings home visiting program, public health services, and family resource centres, we are empowering parents with knowledge, skill and capacity to parent more effectively by providing supportive counselling for individuals and families, problem solving, crisis management, and skill development in the family home.

**“Children who are ready for learning in a classroom setting from their first day of school have a greater chance of doing well in school.”**

**– Steve Prest, Co-ordinator, Student Development P–6, South Shore Regional School Board**

Home visitors skilled in child and youth development, parent-child relationships, family stressors, and community connections are piloting the Parenting Journey project in 10 sites: Sydney, Port Hawkesbury, Antigonish, Amherst, Kentville, Bridgewater, Sackville, Halifax, East Preston, and Musquodoboit Harbour.

“Our experience of the Parenting Journey program thus far has been a very positive one. It has enabled us to extend our reach and work with families having older children who would not otherwise have fit our mandate. As an organization, we are excited about the enhanced services and new possibilities that the program makes available to families across Cape Breton. And, our families having older children are only too glad to engage.”

– *Joanne LaTulippe, Executive Director, Cape Breton Family Place Resource Centre*

We also committed to expanding Family Help—initiated at the IWK to improve access to effective treatment for mild to moderate mental health disorders in children and youth.

In April of this year, Family Help was expanded to the Cape Breton District Health Authority. The program delivers evidence-based psychosocial and behavioural interventions to families and children in the comfort and privacy of their homes. Trained telephone coaches, who can answer questions and provide advice, are available at any time when parents involved in the service are dealing with specific concerns. Supporting information in print and video is also provided to help families respond effectively to particular behaviour problems.

All regular, non-priority referrals to Child and Adolescent Mental Health Services in Cape Breton are now initially screened through the Family Help program. This is helping to streamline the existing referral process and is expected to reduce wait times for non-urgent mental health services for children, youth, and families. As well, the program is improving access to services, particularly for those living in more rural, remote areas.

### What Doctors, Patients Say about Family Help

Feedback from patients, families, and referring agents, including pediatricians, has been extremely positive. After being screened, and a multi-disciplinary team has determined that Family Help is an appropriate level of service, parents can choose between Family Help or face-to-face sessions with a mental health professional for their children. To date, all but one family (who had already met with a mental health clinician) chose Family Help.

*“We are delighted with Family Help. We expect to carry out a comprehensive evaluation after the program has been operating for at least one year. I have no doubt that, were it not for Family Help, children with mild to moderate mental health disorders and their families would have to wait for extended periods before being able to receive such treatment in this district. Initial outcomes are reported to be very positive and parents are indicating satisfaction, particularly with the convenience of receiving care in their own homes at times that work for them.”*

*– Dr. Linda Courey, Director, Mental Health Services,  
Cape Breton District Health Authority*

### Identify Problems, Help Early

Action	Status	Comments
Early Developmental Instrument for Primary Children	Under way	<ul style="list-style-type: none"><li>• Introduced to primary students in South Shore region, 2007–2008</li><li>• Parent information sheet produced</li><li>• Primary teachers trained</li><li>• Expanding to Halifax and Strait regions during this school year</li></ul>
Parenting Journey	Under way	<ul style="list-style-type: none"><li>• Introduced in 10 sites across the province</li><li>• One-year service-level agreements signed; \$62,500 provided per site</li><li>• Services and supports defined, including visiting homes with children from ages 3 to 16; helping parents understand, monitor, and support their child’s development; supporting positive, nurturing parent-child relationships; linking families to necessary health and social services; helping families set and progress toward goals; and communicating with parents and community partners</li></ul>

Action	Status	Comments
Family Help	In progress	<ul style="list-style-type: none"> <li>• Expanded to Cape Breton, April 2008</li> <li>• To October 31, 450 children screened and results of screening reviewed by a multi-disciplinary team for the most appropriate service for the child and family</li> <li>• So far, 112 families enrolled in Family Help programs</li> <li>• Virtually no wait time for Family Help—compared to a wait time of about three months for treatment for other non-priority referrals</li> </ul>

Priorities for the coming year include

- introducing the Early Developmental Survey to more school boards and using the additional data to identify community profiles and build our understanding of the data to guide program decision making over the next three years
- designing and beginning the evaluation of the Parenting Journey pilot projects
- designing and beginning a comprehensive evaluation of Family Help within the Cape Breton District Health Authority, including the number of people who used the service, clinical outcomes, and patient and family satisfaction

## 4. Co-ordinate Programs, Services

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The provincial government delivers or supports more than 150 programs and services related to children, youth, and families. This entire strategy is based on the principle that we must begin by improving co-ordination among those programs and services, and the people delivering them.

This principle is fully consistent with government's framework for social prosperity, *Weaving the Threads: A Lasting Social Fabric*. The framework is based on a co-ordinated response, collaborative governance, and shared accountability in attaining goals related to the health and well-being, lifelong learning, access and inclusion, citizenship and engagement, and safety and security of Nova Scotians.

Effective co-ordination must occur at three levels:

- among government departments
- between government and community agencies
- among the people and organizations directly delivering services to children, youth, and families

### Within Government

The Child and Youth Social Policy Committee, with representatives from five government departments, meets regularly and shares responsibility for implementing the strategy. But their influence and efforts go well beyond what happens when they sit together at a meeting. Rather, these individuals are helping to change how their departments think about and deliver all programs and services related to children and youth—ensuring that they respond to the needs of children, youth, and families collectively, unlimited by departmental or organizational mandates.

### Between Government and Community Agencies

This year, four regional specialists were hired across the province to work with the Executive Director, Child and Youth Strategy in reaching out to and strengthening relationships with and among communities. The regional specialists are

- Donna Deveaux-MacLeod, Eastern Region (Cape Breton Island and Antigonish and Guysborough counties)
- John Ure, Northern Region (East Hants and Pictou, Colchester, and Cumberland counties)
- Jean MacDonald (acting), Central Region (Halifax Regional Municipality)
- Janelle Comeau, Western Region (West Hants and Kings, Annapolis, Digby, Yarmouth, Shelburne, Queens, and Lunenburg counties)

## Among the People Directly Working with Children and Youth

Two demonstration projects were announced last year to explore ways to bring together people and organizations serving children and youth as teams: Schools Plus and WRAP.

The goal of the Schools Plus project is to more effectively co-ordinate programs and services by having a team of professionals working together with families and young people at risk to provide direct services to students in the school environment.

Each demonstration site will share some common features:

- a facilitator to support the “family of schools” in the area to create linkages and maintain supports as children move from elementary to junior high and high school
- involvement of community partners in considering innovative approaches to issues such as attendance, in-school suspensions, and school attachment
- the goal of strengthening links between family, school, and community
- a core of extended services, developed in partnership with teams of professionals and community agencies; services could include speech language pathology, community-based health and social services, parent and family support programs, child care, adult education, and clinical intervention services

That said, each community and its children and youth are different. Considerable time was spent over the past year tailoring each project to meet the unique needs and opportunities in the communities being served:

- Chignecto-Central Region (Amherst): Working with interagency partners and school-based service providers, the initial thrust is to provide comprehensive and timely assistance to students and families in crises. Primary prevention activities and proactive supports directly in the community for students from pre-primary to grade 12 will be the next area of focus.
- Halifax Region: The first focus is to work with children and youth (and families, where appropriate) who have been identified as needing additional services and support to succeed in and out of school. Board staff will partner with outside agencies to provide the interagency support these children and youth need. Through community outreach, the Schools Plus team will identify barriers to individual children and youth attaining success and will work with families and the community to remove those barriers. This project is also focusing on making schools more inviting places for parents and guardians. For example, programs that support adult literacy will be available.
- Strait Region (Chedabucto Place, Guysborough): The primary focus is to establish Chedabucto Place—a P–12 school serving more than 360 students and a large geographical area—as a community centre. The school and Schools Plus team plan to host and co-ordinate services and activities that support all students as successful learners, prepared to meet the challenges of adulthood. Chedabucto Place is

Schools Plus teams are focusing on helping youth and families in crisis, building partnerships with their communities, and making schools welcoming, supportive community centres.

already home to the African Heritage and Friendship Centre, Chedabucto Theatre, a youth health centre, a pre-primary program, and recreational facilities. This project presents an opportunity to strengthen these existing partnerships and build new ones in ways that support the physical, emotional, mental, and intellectual needs of children and youth.

- South Shore (six Chester area schools): This Schools Plus team is focused on building partnerships across the communities. They are increasing the use of their schools for programming during extended hours and are looking at ways to improve school attendance and attachment, so young people are more likely to stay and succeed in school.

WRAP is a community support network that provides children, youth, and families with effective and timely access to supports and services through the collaborative efforts of numerous service providers who may have been involved with the family on an individual basis. The intent is to respond in a more co-ordinated approach to complex issues facing children and youth at risk, supported by individualized case plans designed around the changing needs of the youth and family over time and amid changing circumstances.

Like with Schools Plus, community reaction to WRAP is extremely positive.

“Our community has been ready for this innovative kind of service for some time. We’ve hired a facilitator with a long history working in our region in a collaborative capacity, including planning, facilitating, and evaluating information, education, and training for allied partners, community groups, and more. She has strong relationships with our key partners—Education, Probation, Police, and Mental Health—and we all are committed to work together, to think outside of the box and offer services that look just a little different in order to meet the needs of some very challenging youth in our community.”

– Anne Blandford, Executive Director, Pictou County Children’s Aid Society

**About WRAP in Pictou:**  
 “... we are all committed to work together, to think outside of the box and offer services that look just a little different.

## Co-ordinate Programs, Services

Action	Status	Comments
Executive Director	Completed	<ul style="list-style-type: none"> <li>• A social worker and mental health specialist who has been working with children, youth and families for more than 17 years, Robert Wright, hired</li> </ul>
Regional Specialists	Completed	<ul style="list-style-type: none"> <li>• Four regional specialists hired</li> </ul>
Schools Plus	Under way	<ul style="list-style-type: none"> <li>• In place in partnership with four regional school boards: South Shore, Halifax, the Strait, and Chignecto-Central</li> <li>• Program delivery co-ordinator, team facilitators hired</li> </ul>

Action	Status	Comments
WRAP	Under way	<ul style="list-style-type: none"> <li>• In place in four sites: Sydney, Pictou, Halifax, and Bridgewater</li> <li>• Facilitators hired, funding provided</li> <li>• Information prepared and shared to build community awareness and partnerships; team meetings being held</li> </ul>

In the coming year, we plan to focus considerable attention at the community level. The regional specialists will focus on strengthening existing relationships and building new partnerships through regional working and advisory groups and by supporting the work within Schools Plus and WRAP.

Partners involved in Schools Plus and WRAP are also anticipating a busy and exciting year. After a year of planning and organizing, people are eager to put their plans into action and to begin seeing results. An evaluation model for Schools Plus and WRAP will also be developed.

## 5. Improve Access, Close Gaps

More programs and services for children, youth, and families exist today than ever before. That's the good news. However, accessing these programs and services can still be difficult for a variety of reasons.

For example, people may need more information. That's why we have

- entered into a partnership with Kids' Help Phone—Canada's only toll-free, 24-hour, bilingual and anonymous help line for children and youth—to tailor, expand, and promote services relevant to Nova Scotia children and youth
- developed a new website—HelpZone.ca—home to a wide range of information organized by age as well as a search tool where young children (6–12), teens (12–18), and adults (18 and over) can ask questions
- published a list of programs and services from across government for children, youth, and families (see Appendix B)

Programs and services are also difficult to access if they are available only at certain times, in certain places. That's why our pilot projects, such as Schools Plus and A Place to Belong (see pp. 18, 19, 24, 25), improve access by being offered in more places and in more welcoming, familiar surroundings.

We also know that we have gaps in services. That's why

- We have created a new Family and Youth Services section at Community Services to build on programs, services, and community partnerships already in place, with the goal of developing a full range of services to support vulnerable children and families. Along with providing leadership on WRAP, A Place to Belong, and Parenting Journey pilots, this section worked in partnership with Heartwood, the Provincial Boys and Girls Club, and others to provide training on youth engagement and leadership, as well as family support and intervention.
- We have hired five youth navigators and case planners to work with at-risk youth—developing case management plans and linking the youth with social workers, mental health professionals, school board staff, income assistance workers, and others working in community and government agencies.
- We have developed the Child Welfare Mental Health pilot project at the IWK to enable more timely access for children and youth with behavioural or emotional concerns and their families who are involved with the Central Region Child Welfare Services. For example, children and youth who enter care often have behavioural challenges that would not be considered an urgent referral to a mental health professional. Through this pilot project, we are delivering mental health services to these youth more quickly, as well as providing clinical consultation to child welfare social workers, risk management teams, early childhood educators, family resource agencies, and schools. We are also looking at ways to provide services to groups of youth (e.g., a skills-based treatment group for teenage girls) that is more appropriate to their needs, provides them with services earlier, and removes them from (thus shortening) the overall wait list for non-urgent mental health services.

Hot topics on HelpZone.ca for young children range from fighting obesity to the dangers of smoking; for teens, social assistance and alcohol abuse, and for adults, autism services to choosing a day care centre.

## Improve Access, Close Gaps

Action	Status	Comments
Kids Help Phone	Under way	<ul style="list-style-type: none"> <li>Expanded services available to children and youth via telephone counselling, referral, and information sharing</li> <li>Additional resources and information about Nova Scotia available to children and youth</li> <li>Promotional packages sent to almost 400 Nova Scotia schools to build awareness among students</li> <li>More than 1,500 community and social services in Nova Scotia listed in the Kids Help Phone database; 70 orders for additional mailings received</li> <li>More than 78,000 Nova Scotia children and youth went online or called the Kids Help Phone between January and September</li> </ul>
HelpZone.ca	Under way	<ul style="list-style-type: none"> <li>Continuing to add new information to website</li> <li>Monitoring questions and search topics to guide what additional information is needed</li> </ul>
Closing gaps in Mental Health Services	Under way	<ul style="list-style-type: none"> <li>Psychologist and social worker hired; another psychologist assigned part-time for child welfare—mental health; collaborative work teams established; first group sessions for teenage girls under way</li> <li>Family Help expanded from IWK to Cape Breton, eliminating wait time for mental health services in Cape Breton for those accessing this program</li> </ul>
Family and Youth Services Section	Completed	<ul style="list-style-type: none"> <li>Family and Youth Services Section created; four new program areas created: Prevention Services; Youth Services and Supports; Policy, Planning and Evaluation; and Volunteer Initiatives</li> <li>Funded or provided training in youth leadership and engagement, as well as family support and intervention</li> </ul>
Youth Navigators/	Completed	<ul style="list-style-type: none"> <li>Five youth navigators hired, located in the local District Offices of the Department of Community Services in each region of each province</li> </ul>

Priorities for next year include

- continuing development of our information sources, in particular, HelpZone.ca
- identifying gaps in services—a responsibility shared among the youth navigators, regional specialists, participants in the pilot projects, and government staff in the children-, youth-, and family-focused departments
- beginning the evaluation of the Child Welfare Mental Health pilot project, as well as the Family Help mental health project (see pp. 14, 15, 17), which will assist in our assessment of wait lists for non-urgent referrals—typically those children and youth with behavioural issues

Kids Help Phone reports a 144 per cent increase in contacts from Nova Scotians (April to June 2008) after forming the partnership with government. Full-time counsellor is hired to help respond.

## 6. Engage Youth, Promote Shared Accountability

For many young people, the path to adulthood is not an easy one. It is our role to clear the way to the greatest extent possible.

The first step is to “engage” youth by providing

- meaningful opportunities for youth to be “seen and heard”
- more courses and opportunities within school that are interesting and relevant to students
- positive role models (peers and adults), activities, and more
- a clear understanding of expected behaviour, including respect and support for positive behaviour, as well as a clear understanding of consequences for inappropriate, risky, or criminal behaviour

### Seen and Heard

Youth must have opportunities to say what is on their minds, presenting hopes and ideas or expressing their frustration. These opportunities must be varied (ranging from conferences and consultations to ad hoc discussions online or in the gym), inviting and inclusive (not intimidating or insulting), relevant (youth see a reason to get involved), and, most significantly, respectful (youth feel what they say is not just being heard, but is valued and contributes to something positive for themselves or their peers).

These opportunities are being presented in a variety of ways, such as our provincial networking conferences and in schools and communities across the province.

Youth inclusion means involving young people—meaningfully—in planning, making decisions, and delivering programs. In this way, youth learn that they can play an effective role in community and organizational development. They also gain confidence in working with adults to solve problems and build leadership and employment skills.

We are also continuing the Leaders of Today Provincial Youth Network—giving young people continuous “voice” and feedback on matters that concern them. This year, we held our third networking conference. Young people provided the leadership, facilitating the entire event. Youth of many ethnic, geographic, economic, and social communities, and sexual orientations attended. These young people are also musicians, poets, athletes, comedians, in school, out of school, leaders and followers, doers and visionaries, smokers, vegetarians, addicts, and youth in recovery. Many committed to growing the network into the future, to create a positive space where youth culture and government culture can learn about each other and work together.

### *What Young People Are Saying*

*“The Leaders of Today conference was an amazing experience, all of us youth putting our minds together to create something so powerful. It was an honour to be part of something that will have such an impact in my community.”*

*– Elizabeth B., a youth attending Leaders of Today, commenting on the opportunities a Provincial Youth Advisory Network has to offer*

## **Courses and Opportunities in Schools**

If young people have interesting and relevant courses and opportunities in school, they are more likely to stay and succeed. Courses in school and school-community partnerships that give students employment-related skills and help them make informed career and life changes can be particularly engaging for students. That is why co-operative education, skills training, and the Options and Opportunities (O<sub>2</sub>) courses are being expanded in our schools. Guidance counselling is also being enhanced, with a particular focus this year at the elementary level.

## **Positive Role Models, Activities**

Young people want to have fun, often crave adventure, and need a physical or creative outlet to put their energies to good use. A Place to Belong pilot project is testing non-traditional ways for youth to engage within their communities through adventure, art, drama, music, sport, and recreation.

A Place to Belong is a partnership project with eight existing community organizations that provide programs and activities to help vulnerable children and at-risk youth develop a sense of belonging and purpose with their peers and adult role models.

- **Apple Tree Landing Family Education Centre, Canning**, is an after-school program offering a variety of developmentally appropriate programming based on the interests of participating youth. Activities range from physical education to cooking, and discussions focus on topics such as bullying and “school’s cool.”
- **Our House Youth Wellness Centre, Shelburne**, is an after-school (and sometimes Saturdays) drop-in centre for youth. Programs include dance, music, and socialization opportunities, based on the interests of the youth. The centre also partners with local schools to discuss issues such as bullying, drugs, and alcohol.
- **Guysborough Recreation, Physical Activity for Children and Youth (PACY)** offers an after-school program to more than 100 students. Funding has been provided to help with transportation costs, and parents can use the fitness centre facilities for free if they bring their children. Classes in art, drama, music, and yoga

have been added to help young people develop positive social skills and a sense of belonging. Community volunteers, such as RCMP and other adult role models, have provided educational information on community safety and addictions.

- **Boys and Girls Club, Truro and Colchester County**, ran summer leadership camps for youth. In the fall, teens between the ages of 11 and 16 have been participating in and helping to run various after-school, evening, and weekend programs and projects for their club and community. The program is divided into five groups, all designed to instill leadership skills through exciting, hands-on activities, and to provide opportunities for personal expression, leadership, community involvement, volunteerism, planning, and decision making.
- **Whitney Pier Youth Club, Cape Breton**, has expanded existing programs through support from A Place to Belong. These include dance classes, planning and fundraising for a concert, drama, an arts and crafts program, with the craft program providing an opportunity for older kids to help the younger ones, and a morning playgroup for children (0 to 6 years) and their parents and caregivers. Sport and recreation programs, including weightlifting and swimming, a lunch and after-school snack program, and youth/teen nights are also popular. An evening computer program, drawing 20–40 youth who do not normally participate in the club’s daily programs, is open after school and during the evenings.
- **Bay St. Lawrence Community Centre, Cape Breton**, brings in local musicians from the community to deliver a music program to more than 50 children weekly. Lights, Camera, Community Action gives youth an opportunity to show through visual and printed arts how they see the community and how they want to see the community develop. They also have a C@P site, a playgroup, floor hockey, special events (e.g., a fright night and fireworks for the whole community on Halloween), and informal after-school activities such as arts and crafts, pool, and movies.
- **East Preston Boys and Girls Club, Halifax Regional Municipality**, has expanded their programming to include a youth “stay fit” drop-in program, literature programs (poetry, newsletter, and flyer creations), Healthy Living (guest speakers, kids in the kitchen, and outings), music, art, and youth dances.
- **Spryfield Boys and Girls Club, Halifax Regional Municipality**, has expanded their programming to include a torch club, sports fun, singing club, cooking classes, and a sewing club.

Program staff and volunteers serve as positive role models and mentors and empower children and youth to make positive lifestyle choices and decisions as they experience success within new experiences. This program is built on the evidence that children who feel competent, cared for, and empowered are less likely to continue with defiance, crime, and other self-destructive behaviour.

A Place to Belong pilots offer after-school, evening, and weekend programs in everything from sewing to sports, to singing, and computers to crafts to community safety.

“We’ve already seen such positive impacts from A Place to Belong. We’ve hired more staff, including two youth part time, purchased equipment and are offering more programming during extended hours. New programs like dance and photography are attracting many youth to the Centre. Youth are participating in current activities, and they are engaged in program development, which responds to their needs and desires. The community is so supportive of the increased activity at the Centre and pleased to see that their youth are partaking in positive social activities, learning new skills and taking advantage of mentoring and leadership opportunities.”

– Jennifer MacIntosh, Executive Director, Our House Youth Wellness Centre, Shelburne

## Clear Understanding of Effective Behaviour

Studies and experience consistently show that young people respond best when they have a clear understanding of their expected conduct and behaviour, based on respect and on their own input. For example, the Positive Effective Behaviour Supports Program, built around a school code of conduct and mutual respect, continues to show results.

This said, focusing on positive behaviour and respect does not deny that unacceptable behaviour, and sometimes risky or criminal behaviour, occurs in our schools and communities. Through this and the crime prevention strategy, government is sending a clear message that youth must take responsibility for their actions. While initiatives such as the Youth Attendance Centre are primarily focused on engaging youth and helping them make more positive choices in future, youth are also being made aware that breaking the law has swift and serious consequences.

*Time to Fight Crime Together: Our Strategy to Prevent and Reduce Crime* had a number of initiatives directly related to the child and youth strategy. Complementary to A Place to Belong, the Community Crime Prevention Fund was designed to support programs that engage youth in positive activities. As well, the Youth Attendance Centre offers supervision and a variety of structured group and individual programs for youth in conflict with the law.

Feedback from parents of youth at the Halifax Attendance Centre is generally positive, and we have seen young people make the transition back into regular school programming, find employment, and participate in activities such as a Kiwanis leadership camp. A formal evaluation is planned.

## Engage Youth, Promote Shared Accountability

Action	Status	Comments
A Place to Belong	Under way	<ul style="list-style-type: none"> <li>• Piloted in eight sites with community groups in Canning, Shelburne, Guysborough, Truro, Whitney Pier, Bay St. Lawrence, East Preston, and Halifax</li> <li>• Funding provided, staff hired and trained, community volunteers recruited</li> </ul>
Provincial Youth Advisory Network	Under way	<ul style="list-style-type: none"> <li>• The third Leaders of Today joint youth and government forum held, resulting in a group of trained youth facilitators, commitments to support and expand the network, and an action plan</li> <li>• Table of Champions Interdepartmental Working Group established to share successes and build support in youth engagement practices</li> <li>• Lunch and Learn Series of five experts in the field of youth engagement</li> </ul>
Crime Prevention and Reduction Strategy	Released Dec.10, 2007	<ul style="list-style-type: none"> <li>• First grants from Community Crime Prevention Fund awarded, December 2008</li> <li>• Offering school programs to about 15 students this fall at the Halifax Youth Attendance Centre, offered a summer program, and offering programs for youth under community supervision in Halifax (currently 175 youth in total)</li> </ul>

The priorities for the coming year include

- continuing to develop the Leaders of Today Provincial Youth Network to effectively engage youth in ways that assist with policy and program development and evaluation, and to help more young people gain leadership and life skills that support their development into engaged, contributing citizens
- developing further and evaluating A Place to Belong pilot projects
- building on the introductory training for the Positive Effective Behaviour in Schools program, with training for school board lead teams on targeted interventions for students demonstrating disruptive behaviour
- evaluating the Halifax Youth Attendance Centre, moving to a permanent facility, expanding programming, and opening a Youth Attendance Centre in Cape Breton



## 7. Measuring Our Success: How Are We Doing?

We will only know the true measure of our success in a generation, when today's youngest children are grown. Nonetheless, we can, and have a responsibility to, mark our progress toward our vision and goals.

As a measure of progress, our strategy identifies eight expected outcomes related to our four strategy goals. These outcomes reflect that the health and well-being of our infants, children, and youth are affected by social, environmental, physical, and economic factors. Painting a clear picture of these factors is an important step in identifying the best way to support children and youth as they grow and develop.

A year ago, we reported on statistics that begin to paint this picture. While it is unrealistic to expect significant progress linked to a strategy within one year, we can get where we are going only if we continue to remind ourselves of our destination and the signposts along the way. Therefore, this section repeats the statistics reported a year ago and reports new statistics, where they are available and where they build our understanding of our progress toward our goals.

### **Goal 1: Children and youth are well cared for, safe, healthy, and active.**

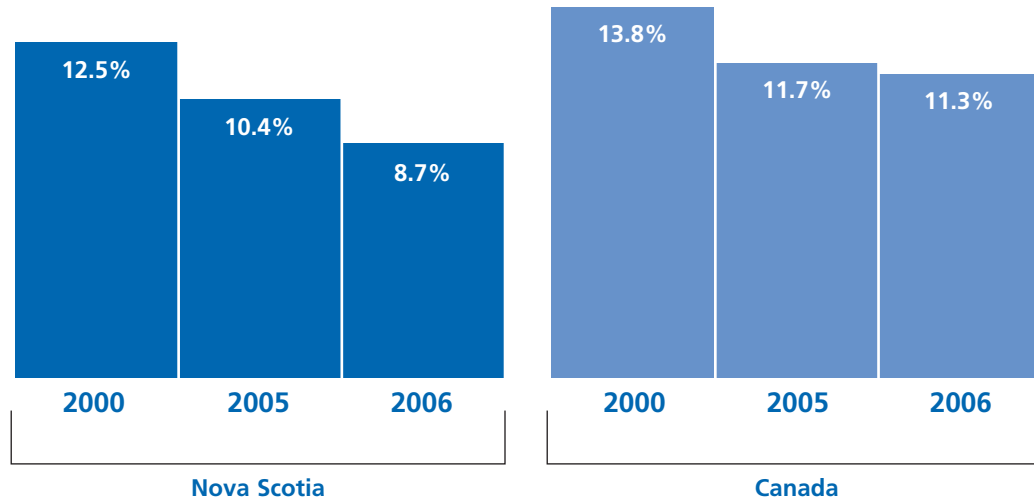
This goal is directly related to what researchers have defined as “population health.” In simple terms, population health links healthy children and families to strong, healthy communities. Two outcomes that would support this goal are fewer children living in low-income families and a higher percentage of youth getting an appropriate level of physical activity.

#### **Outcome: Fewer children living in low-income families**

Our Kids Are Worth It does not include specific actions to reduce the number of children in low-income families. However, living in a low-income situation can affect access to adequate housing, necessities for everyday living, health and well-being, and community participation. These are clearly risk factors for children and should therefore be closely monitored.

A year ago, we reported progress in this area, with significantly fewer children living in poverty in 2005 compared to 2000. Encouragingly, these numbers continue to decline, with our most recent data showing the lowest numbers in a decade. As well, we continue to outpace the national average.

### Children living in low-income households



Behind these percentages are the faces of children. Like the percentages, the number of children under 18 living in low-income families continues to drop, from 25,000 in 2000, to 19,000 in 2005, and to 16,000 in 2006. That is still too many. We need to continue to monitor this number carefully and do what we can—collaboratively within government and with communities and families—to reduce it, as well as to increase services and support for struggling children and families.

We also want to build on the data, presented last year, recognizing that all families are different. For example, for many families, making ends meet requires two incomes. That's not possible for lone-parent families.

Not surprisingly, these families are particularly prone to experiencing severe financial strain. Approximately half of Nova Scotia's poorest families are lone-parent families. Again, the situation is improving, but again—with 32.4 per cent of children in single-mother families living at a low income—we need to focus more attention on these families.

→ **Outcome: Higher percentage of youth getting an appropriate level of physical activity**

Regular exercise helps children and young people keep physically and emotionally healthy. As well, research supports that participation in physical activity helps reduce the rate of youth crime by promoting community engagement, occupying youth, enhancing well-being, building positive self-esteem, and developing leadership skills.

Young people need at least 60 minutes a day of moderate to vigorous exercise to get and stay healthy. Unfortunately, our youth are not nearly this physically active. While close to 100 per cent of grade 3 students attain the activity levels recommended by Health Canada at least five days a week, by grade 7 fewer than 50 per cent of young men and fewer than 30 per cent of young women are this active.

The table below repeats data presented in our strategy a year ago.

**Accumulate 60 minutes/day moderate or vigorous physical activity, 5 days/week**

	<b>Grade 3</b>	<b>Grade 7</b>	<b>Grade 11</b>
<b>2001 – Male</b>	90%	62%	12%
<b>2001 – Female</b>	92.3%	44%	6.9%
<b>2005 – Male</b>	96.7%	45.3%	9.7%
<b>2005 – Female</b>	96.1%	23.8%	< 1.0%

We are now building on this data by examining two factors that may influence the physical activity level of youth: “screen time” (television, video games, and computers) and the percentage of children who walk to school in good weather.

The table below shows that young people spent more time in front of a screen in 2005 than in 2001. As well, the amount of screen time increases from grade 3 to grade 7, and again to grade 11. Finally, boys have less screen time than girls.

### Daily hours of screen time outside school (TV, video games, computer)

	2001	2005
<b>Grade 3 – male</b>	2.25 hr	3.70 hr
<b>Grade 3 – female</b>	1.88 hr	3.11 hr
<b>Grade 7 – male</b>	3.14 hr	5.36 hr
<b>Grade 7 – female</b>	2.44 hr	4.78 hr
<b>Grade 11 – male</b>	3.95 hr	6.29 hr
<b>Grade 11 – female</b>	3.04 hr	5.51 hr

The table below shows that fewer students in grades 3 and 11 walked to school in good weather in 2005 than in 2001. Alternatively, slightly more grade 7 students walked. In understanding these percentages, it is important to note that most students in Nova Scotia are bused to school, and the distance they live from their school means that walking is not an option.

### Walk to school in good weather

	2001	2005
<b>Grade 3</b>	25.0%	15.4%
<b>Grade 7</b>	18.5%	20.0%
<b>Grade 11</b>	18.8%	15.2%

Government strategies such as Healthy Kid/Active Kids and Health Promoting Schools, mandatory physical education, and investments in sport and recreation are examples of actions that are hoped to improve these numbers over time.

## Goal 2: Children and youth are supported in making successful transitions in their lives from birth to adulthood.

Two markers, or outcomes, were selected to (a) indicate how “ready” children are when they begin school (by measuring their educational, social, and general well-being) and (b) how long they stay in school (dropout or student withdrawal rates).

### → Outcome: Improved rates of school readiness

The first six years of life are the foundation for adult well-being. Studies show that what happens in the early years affects how a person develops and, ultimately, who they become. Getting a solid start in life sets the stage for learning, for social engagement, and for mental and physical health.

When our young children begin school, we are presented with an excellent opportunity to assess how they have developed in their early years. Last year, we introduced a new Early Developmental Instrument, designed to assess the educational and general well-being of young children, specifically their physical health and well-being, social competence, emotional maturity, communications skills, general knowledge, language, and cognitive development.

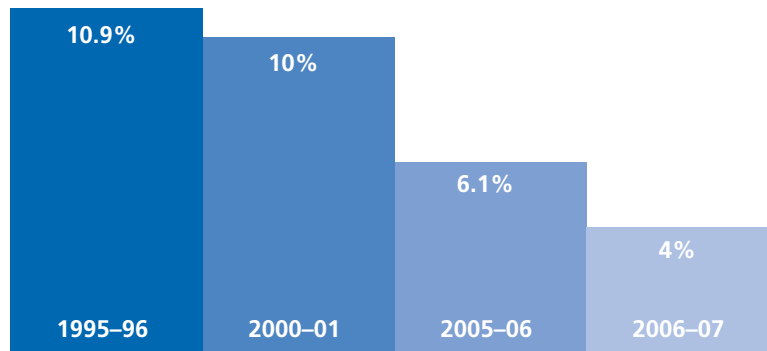
This tool is still being piloted, and provincial data is not yet available. As we look forward to reporting on this assessment in future years, in this report we are presenting data on language, social, and motor development for preschoolers in Nova Scotia and Canada. This data is limited in that it presents a picture that existed five years ago. However, it presents information that can continue to be monitored as we implement our strategy.

At the time this data was collected (2001–2003), our preschoolers fell within the average range in language development, motor skills, and social development. However, we were below the Canadian average in these areas. Future data will indicate whether our efforts in early childhood development are beginning to pay off.

**Outcome: Lower dropout rates**

The Department of Education monitors dropout rates based on student withdrawals. More young people in Nova Scotia are staying in school—and the more education our young people have, the more likely they are to have a job, and often a well-paying job.

In 2006–2007, we reported a continuing decline in student withdrawal rates—down from 10.9 per cent in 1995–96 to 6.1 per cent 10 years later. In 2006–2007, the student withdrawal rate is down again, to just under 4 per cent.



While this continuing decline is encouraging, the Department of Education estimates that close to 30 per cent of high school students are disengaged, frustrated, alienated, and marginalized with their learning experiences in high school. In response, we are changing the way high school curriculum is delivered and looking at new ways to engage students and to help them succeed. Actions include new courses that develop job-related skills, courses that give students experience volunteering and working in their communities, and new instructional approaches within the classroom. These, combined with what is being learned in pilot projects such as Schools Plus, should help students stay interested, motivated, and in school.

### **Goal 3: Children and youth are engaged in ways that support their successful development and their understanding and acceptance of responsibilities for their actions.**

Youth volunteerism was selected as a positive indicator of progress toward this goal. Youth crime rates were selected, in that success in reducing these rates will indicate further progress. As well, our child and youth strategy has its roots in government's response to the Nunn Commission—a commission struck to examine issues around the root causes of crime, as well as to recommend actions that would reduce it. This makes this indicator and outcome particularly significant.

#### **Outcome: More youth volunteering**

According to Health Canada, an important indicator of community health is the level of volunteerism. Nova Scotia has one of the highest rates of volunteerism in Canada—with close to 50 per cent of Nova Scotians volunteering their time and energy to services and programs in our province.

Nova Scotia teenagers are among those making a difference. As reported last year, 54 per cent of young Nova Scotians (ages 15–24) volunteered in 2004. As well, our teenagers volunteer 18 per cent more than their peers nationally.

Again, building on the information we presented last year, we are examining what volunteer activities interest youth most and what motivates them to volunteer. This may assist in our efforts to engage more young people in productive, esteem-building volunteerism.

- Youth aged 15–19 are three times more likely to volunteer with an education and research organization and almost twice as likely to volunteer with a social services organization than older people.
- The motivation to participate in volunteerism for youth is different than that for adults. Youth who choose to volunteer often want to improve their employment prospects, to explore their own strengths, or to join their friends who are volunteering with particular organizations or groups.

#### **Outcome: Fewer youth involved in crime**

The rate of youth accused of crime provides an accurate picture of the number of youth involved in crime because it takes into account the rate of young people who have been formally charged as well as those who have not been charged or have been diverted from the criminal justice system.

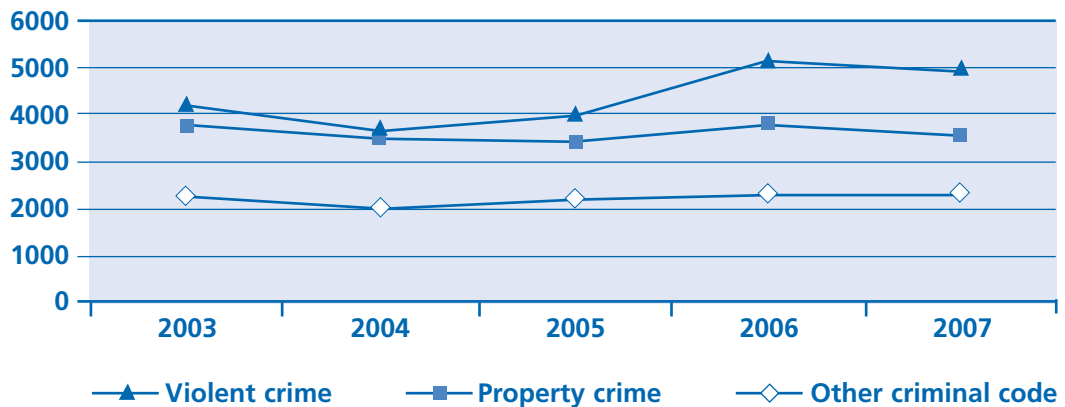
In 2007, the rate of youth accused of overall crime in Nova Scotia (10,719 per 100,000 youth) was higher than the national average (6,811 per 100,000 youth). This was also true for violent crime, property crime, and other Criminal Code offences.

Youth accused of Criminal Code offences down 4%, property crime down 6%.

Similar to the national picture, the accused rate in Nova Scotia was highest for other Criminal Code offences and lowest for violent offences.

On the positive side, since 2006, youth-accused rates have decreased for overall youth crime and for Criminal Code offences by 4 per cent. Rates for property crime have decreased by 6 per cent. The rate for violent crime has remained unchanged.

Rate of youth accused, Nova Scotia, 2003–2007



**Goal 4: Families are supported in ways that help meet their needs and their responsibilities for their children.**

In the early years, access to mental health services is critical to supporting families. As our children age, keeping them connected to a stable, loving home is also critical, and there are times when families need support in maintaining or strengthening that connection. This underlines the importance of monitoring wait times for mental health services and rates of youth homelessness.



**Outcome: Reduced wait times for appropriate mental health services**

At least one in five children and youth has a mental health disorder. Left untreated, emotional and behavioural difficulties can lead to school failure, family conflicts, drug abuse, violence, and even suicide. Quite simply, the longer an issue goes untreated, the more serious the problem can become and the harder it can be to correct. That's why we're reaching out to young people and their families with the services they need now.

We also need to measure our progress. We know that children do not experience delay in receiving emergency or urgent mental health services. However, our data monitoring wait times for non-urgent services remains limited.

One measure that we are reporting this year is the emotional well-being of children.

Stress and related difficulties appear as aggression, hyperactivity, and other emotional problems. Nova Scotia is on par with the rest of the country when it comes to the number of preschoolers with these types of problems.

### **Outcome: Reduced rates of youth homelessness**

Youth homelessness is a complex social issue. In larger cities, homeless youth are noticeably more visible—sleeping in parks, hanging out on street corners, or begging to meet needs. In smaller urban and rural communities, homeless youth may be less visible—hanging around coffee shops, in malls, or couch surfing from friend's house to friend's house, but they still exist.

The causes of youth homeless are not well articulated, nor are they well understood. Therefore, the issue of youth homelessness must be considered from the wider context of poverty, substance abuse, alcoholism, domestic violence, health problems, and mental health.

Advocates speak of youth homelessness as occurring on a continuum, from relative to absolute homelessness. Absolute homelessness refers to living on the streets or in an emergency shelter, while relative homelessness refers to living in inadequate, overcrowded, unsafe, and/or unaffordable housing compounded by lack of employment, education, or health-care services.

As reported last year, reliable data on youth homelessness is difficult to obtain. We will continue to work with government and non-government organizations to gather information about youth homelessness and to expand our knowledge so we can chart progress in this area. More significantly, this strategy commits to building community partnerships and strengthening community capacity to develop a plan to respond to youth homelessness by expanding the continuum of services available to children, youth, and families.



## 8. Conclusion

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### Our First Year

It is difficult to present a conclusion when our work is so far from over. Yet, we can already draw some conclusions from our experiences over the past year.

First, we can break down the walls between government departments and focus on a common purpose. In fact, that is the basis for the province's social prosperity framework, *Weaving the Threads*.

While closer collaboration did not begin with the child and youth strategy, the walls that previously existed were a considerable focus of the Nunn Commission report, which recommended the strategy in the first place. The close collaboration that now exists among the government departments involved with children, youth, and families can serve as a model for other initiatives that cross departmental lines.

Second, government can work, and is working effectively, with community partners. When we released *Our Kids Are Worth It* last year, our pilot projects were generally defined so people would understand their strategic objectives. But we knew we would need to rely on our partners—who know the needs and opportunities in their own communities—to define and shape the pilot projects. We have learned a lot from our community partners and from our children, youth, and families over the past year, and we look forward to our work in the coming year.

Third, we need to take the necessary time for planning, establishing process, building relationships, and defining roles, responsibilities, and expectations. This is not the kind of stuff that creates a lot of excitement in a progress report, but it is necessary to avoid delays and disappointment in the years ahead.

### The Years Ahead

Because we have taken the time to plan well over the past year—in partnership with our communities—we are eager to see our plans come alive as the pilot projects are fully up and running. As we shift our focus somewhat from planning to more doing, we will also be able to begin evaluating and learning—so we can take these lessons and share them in more parts of the province.

Specifically, we will develop more rigorous methods of evaluation for all our programs and services so we have good information to help us target our resources, effort, and investment. We will also build on our relationship with the Health Research Foundation of Nova Scotia to establish clear measures of wellness and success so that we can evaluate the progress of our efforts in making real change for Nova Scotians.

As our regional specialists and youth navigators have more time in their new responsibilities, they will focus on strengthening relationships with community agencies, families, and individuals. This will help us identify gaps or overlaps in service, as we work to create dynamic, responsive, and effective programs and services that meet the needs of children, youth, and families at all ages and as their needs and circumstances change.

Behind the scenes, we will also be analysing a number of strategies that affect children, family, and youth work, such as strategies to fight crime and alcohol and drug dependency. These strategies need to be considered collectively to again identify overlaps and gaps, as we work together to develop a comprehensive and seamless continuum of services for children, youth, families, and communities.

The work ahead is not easy. It will be solved only through deep reflection on the needs of children, youth, and families. We also must be willing to change how and what we do in pursuit of our common purpose—to see our children fulfill their hope and promise and grow into happy, responsible adults.

### **Find Out More**

Read our full strategy, *Our Kids Are Worth It*, online at [www.gov.ns.ca/coms/](http://www.gov.ns.ca/coms/) or contact us if you have any questions.

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# Appendix A: Child and Youth Social Policy Committee—Mandate and Membership

## Mandate

The Child and Youth Social Policy Committee is a group of senior officials from provincial government departments responsible for services for children, youth, and families: Community Services, Health, Justice, Education, and Health Promotion and Protection.

Accountable to the deputy ministers of their respective departments, the committee's mandate is to provide leadership and to assume collective responsibility in developing and implementing Our Kids Are Worth It: Strategy for Children and Youth—a comprehensive strategy for providing appropriate services to children, youth, and families in Nova Scotia.

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# Appendix B: Programs and Services for Children, Youth, and Families

## Department of Community Services

1-877-424-1177 (toll free in Nova Scotia)

### Child Welfare Services

#### Adoption Services

provides adoptive homes to children and youth who are in permanent care and custody.

#### Child Protection Services

ensures that children are safe from maltreatment. (If you are concerned about a child's welfare after regular business hours—4:30 pm to 8:30 am Monday to Friday, on weekends, or on holidays—the emergency duty child welfare number is 1-866-922-2434).

#### Children-In-Care Program

ensures that the physical, emotional, and mental needs of children are met during their time in care.

#### Foster Care Services

provides safe and nurturing homes for children and youth who are unable to be in their birth families for different reasons and varying lengths of time.

#### Residential Services

ensures that children and youth receive safe nurturing guidance from qualified youth care program staff in residential child-caring facilities.

#### Family Resource Centres

delivers services through 36 centres to families with children under six years of age who are considered at risk of poor outcomes. Services include parent education, informal support, information, and referral.

#### Family Violence Initiative

responds to victims and perpetrators of family violence; funds transition houses that provide emergency shelter and supports for women victims and their children; funds men's intervention programs that provide counselling for male perpetrators and safety planning for women partners.

#### Enhanced Programs and Community Outreach

promote language and cognition skills of children under six years of age through Early Language and Learning program; provide parent education grants to increase the quantity and comprehensiveness of programs in the areas of parent education and support; provide parent-child interaction programs; provide child care information and training to caregivers outside of regulated day care in matters of early childhood development and education.

#### Prevention Initiatives

promote healthy child and family development; offer early childhood development programs and services; provide resource materials to family resource centres; provide expert consultation and support for regional planning groups; provide and coordinate training and networking opportunities for regional/family resource centre staff; fund YMCA summer camps; fund the Boys and Girls Club to support the delivery of programs; and fund family counselling agencies.

#### Training Unit

plans, develops, and delivers training to staff and related stakeholders.

### Early Childhood Development Services

#### Child Care Licensing and Standards

regulates and monitors child-care services to ensure compliance with the Nova Scotia Day Care Act and Regulations.

#### Supported Child Care

provides funding to support the inclusion of children with special needs in licensed child-care facilities.

#### Child Care Subsidy

subsidizes licensed child care for eligible families.

#### Early Intervention

provides home-based support and information for families with children (0–6) with developmental disabilities to positively influence the children's developmental outcomes.

#### Grant Funding

provides grants to licensed child-care centres and related facilities/associations to support costs related to quality early childhood programs.

**Early Childhood Education Training** ensures a standard of early childhood education training in the province; funds pre-service training and professional development; and provides financial support to individual students.

## Services for Persons with Disabilities

**Direct Family Support** provides supports and services to children and adults with disabilities who live at home with their families. The intent is to help eligible families support their family member with a disability at home. Funding can be used for respite, equipment, special needs, and transportation to medical appointments.

### **Out of Home Support Services for Children and Youth**

supports families who can no longer manage their son or daughter's care needs at home, due to the level of their disability and behavioural needs. The service is offered in a community home with appropriate staffing to meet the child's needs.

## Department of Health

**(902) 424-5818 or  
1-800-387-6665 (toll free in Nova Scotia)**

## Early Years Initiatives

**Prenatal Care, Reproductive Care Program** provides pre-, peri-, and post-natal care to mothers and babies through DHAs, primary care physicians, and specialists (obs/gyn), including screening for bio-psycho issues (0–12 months).

**“Read to Me” Program** provides early literacy activities to families at all facilities doing deliveries (led by IWK), which facilitates parental/baby attachment by encouraging physical and verbal contact between parents and baby/child (0–3 years).

**Infant Hearing Screening—“Sound Start”** screens hearing of all newborns at birth in all delivery hospitals (administered by Nova Scotia Hearing and Speech Centres) to identify potential sensory deficits and offer intervention programs in infancy, thus mitigating risk factors of normal growth and development during early months when brain development is rapid.

## **Pediatricians and Other Child Health Care Professionals**

provide a wide range of early identification and treatment programs to children with issues including developmental delays, behavioural problems, learning difficulties, and parenting problems through pediatricians and clinical care teams located throughout the province, hospital care, and community-based services.

### **Autism Treatment—Early Intensive Behavioural Intervention (EIBI) Program**

provides time-limited, intensive treatment for children diagnosed with autistic spectrum disorder who are not yet in school to optimize lifelong functioning and enhance success at school; offered in DHAs 1 to 8 and at the IWK.

### **Prevention Initiatives**

promotes healthy child and family development; offer early childhood development programs and services; provide resource materials to family resource centres; provide expert consultation and support for regional planning groups; provide and coordinate training and networking opportunities for regional/family resource centre staff; fund YMCA summer camps; fund the Boys and Girls Club to support the delivery of programs; and fund family counselling agencies.

### **Training Unit**

plans, develops, and delivers training to staff and related stakeholders.

## Mental Health Services

### **Maternal/Child Mental Health**

provides mental health services for mothers from conception until baby's first year of age, focusing on early identification of and early intervention for maternal depression/anxiety and other mental health issues and early identification of challenges to maternal and newborn attachment and relationship problems (program links to both mental health continuum and maternity programs).

### **Mental Health Assessment and Treatment**

provides outpatient, day treatment, inpatient, and residential mental health services to children and youth with an identified mental health problem delivered through nine DHAs, the IWK Health Centre, and over 50 community mental health clinics throughout the province.

### **Youth Navigator**

provides advocacy and patient rights information to youth involved with the formal mental health system at the IWK.

### **Family Help Program**

provides home-based mentoring and coaching services in selected communities (IWK and Cape Breton DHA) to address mild to moderate mental health concerns, including concerns with parenting, behaviour management, and anxiety reduction.

### **Intensive Community-Based Treatment Team**

provides community-based services (IWK and Cape Breton DHA) to hard-to-serve children and youth with a focus on keeping children in their homes (as appropriate) and at school.

### **Emergency Mental Health Services**

provides assessment, stabilization, and treatment (inpatient, outpatient, etc.) as appropriate in all DHAs and at the IWK.

### **Tele-psychiatry and Traveling Psychiatry Clinics**

provides psychiatric services to rural areas in Nova Scotia and P.E.I. where on-site psychiatrists are not available or when a second opinion has been requested.

### **Collaborative Initiatives**

encourages intergovernmental/interagency collaboration to address the needs of children and youth experiencing mental health issues—includes Departments of Community Services, Justice, Education, and Health Promotion and Protection.

### **Depression Strategy for Children and Youth**

provides information for early identification of depression in youth and information about coping strategies—over 10,000 brochures requested and distributed (French and English).

### **Mental Health Specialty Services**

provides specialty mental health services through networks that include the DHAs and the IWK/Capital Health, including eating disorders, forensic mental health services, early psychosis, sex offender treatment, neurodevelopmental disorders, autism services, and concurrent disorders (mental health and addictions).

## **Forensic Mental Health**

### **Youth Forensic Mental Health Services**

provides mental health services to youth found either not criminally responsible (NCR) or “unfit.” Provides inpatient services at IWK and dual remand services with IWK. IWK also provides services to youth sentenced under IRCS.

- **Court-Ordered Assessment and Treatment Services**

provides mental health assessment and treatment services for youth appearing before the courts.

- **Treatment for Sexual Aggression**

provides mental health services to youth with an identified problem with sexual aggression.

- **Clinical Services at Waterville Youth Centre**

provides multi-disciplinary treatment of youth—consisting of psychiatry, psychology, and social work—on site in Waterville, managed under the IWK Mental Health Program.

## **Addiction Treatment**

### **Addiction Services**

provides addiction assessment and treatment services to youth throughout the province through the district health authorities and the IWK.

### **The Choices Program—IWK**

provides assessment and treatment services to youth and their families for alcohol, substance, or gambling abuse, including a residential treatment component available to youth from outside the metro area.

## **Department of Education**

**(902) 424-5168**

### **Public School Programs 424-5745**

Public school education in Nova Scotia has two major goals: to help all students develop to their full potential cognitively, affectively, physically, and socially and to help all students acquire the knowledge, attitudes, and skills necessary for them to continue as thinking, learning, physically active, valued members of society.

### **Reading Recovery® 424-7454**

is a short-term early literacy intervention program that supports children in grade one who are experiencing difficulties to become successful readers and writers. Key components of the program include: intensive daily instruction, highly trained teachers using researched based theory and practices, a structured and data informed system involving ongoing professional development, monitoring and evaluation.

### **Professional Support Services 424-7454**

include a variety of services available to all schools to support students requiring additional assessment or programming to meet their needs. These include, but are not limited to, resource teaching, school psychology, and speech language pathology.

**Positive Effective Behaviour Supports (PEBS)/Code of Conduct 424-7454**

refers to a school-wide system of behaviour supports that includes proactive strategies for teaching and supporting appropriate student behaviours to create positive school environments. Schools develop their own specific school Codes of Conduct, based upon the principles and behavioural standards outlined in the Provincial School Code of Conduct and Code of Conduct Guidelines. Data collection and analysis are used to inform decision making regarding behavioural supports and interventions.

**Comprehensive Guidance and Counselling 424-7454**

is a comprehensive approach to counselling based on needs determined through consultation with students, staff, and parents which provides programming in the areas of personal, social, career and education counselling.

**Resource Teacher Support 424-7454**

offers individual or small-group assistance to those experiencing learning difficulties or disabilities.

**School Psychology Services 424-7454**

offers psycho-educational assessment and recommendations regarding learning and behavioural difficulties.

**Race Relations, Cross Cultural Understanding and Human Rights (RCH) 424-7454**

The Department of Education and school boards have a variety of support services and programs to address Race Relations, Cross Cultural Understanding and Human Rights. Diversity supports and programming are found across a number of divisions in the Public Schools Branch.

**Atlantic Provinces Special Education Authority (APSEA) 424-8500**

is an interprovincial cooperative agency which provides services for children and youth from birth to 21 years who are deaf, hard of hearing, deafblind, blind, or visually impaired and reside in Atlantic Canada. Services include, but are not limited to, itinerant teaching, short-term programs, and assessment and transition services assist school boards in the provision of adaptations and programming for students designed to meet their individual needs.

**Options and Opportunities (O2) program 424-8945**

offers an alternative opportunity for high school students who may not be meeting their academic potential because they are not engaged with their school program. It focusses on career development and matching students with qualified employers to give them opportunities to gain real experience in a real workplace.

**Correspondence Studies 424-4054**

offers instructional programs via mail for people wishing to upgrade their academic certification.

**Student Assistance Counselling and Processing**  
provides needs-based funding to students applying for post-secondary education.

- 424-8420 (metro Halifax)
- 1-800-565-8420 (toll free within Canada)
- 424-2058 (Telecommunication device for the hearing impaired)

**Student Assistance Appeals**

gives applicants for post-secondary funding an opportunity to have funding decisions reviewed and exceptional circumstances considered.

- 424-8420 (metro Halifax)
- 1-800-565-8420 (toll free within Canada)
- 424-2058 (Telecommunication device for the hearing impaired)

**School Food and Nutrition Policy 424-5745**

outlines standards for foods and beverages that can be served and sold in public schools, grades primary through 12; promotes nutrition education in the curriculum; encourages community partnerships; provides a supportive environment for healthy food and beverage choices (The policy will be phased in with full implementation by June 2009).

**Health Promoting Schools (HPS) 424-6153**

provides funding to partnerships of school boards and district health authorities to implement those priorities related to healthy eating and physical activities that were identified at the local level.

**Early Developmental Instrument (EDI) 424-7454**

completed by teachers of primary students and assesses children's early development in five general areas: physical health and well-being, social competence, emotional maturity, language and cognitive development, and communication skills and general knowledge. The information collected helps educators and community partners measure children's early learning at school as an outcome of early childhood development. Results are not linked to individual children but to communities. The data is valuable when setting priorities to improve services and supports for families with young children at the neighbourhood or community level. The EDI is a population health measure for communities developed by the Offord Centre for Child Studies at McMaster University with the support of a national advisory committee. The EDI is currently being piloted in three school boards.

# Department of Health Promotion and Protection

1-866-231-3882 (toll free in Nova Scotia)

## **Healthy Eating Nova Scotia Strategy 424-3749**

focuses on four priority areas: breastfeeding, children and youth, fruit and vegetable consumption, and food security (released 2005).

## **Provincial Breakfast Program 424-5657**

provides funding to school boards to expand and enhance breakfast programs for elementary-aged children, to ensure that children begin their day nourished and ready to learn.

## **Food Security 424-5657**

supports food security for all Nova Scotians, including children and youth, by examining the cost of healthy foods in the province and understanding the effect of policy and program decisions on food security (Food Security is the ability to have access to safe, nutritious, personally acceptable, and culturally appropriate foods that are produced and distributed in ways that are environmentally sound and socially just).

## **Active Kids, Healthy Kids Strategy 424-7629**

increases the number of children and youth who have at least 60 minutes of moderate to high intensity physical activity on a daily basis through new policies and programs, active communities, and public education.

## **Prenatal Education and Support 424-4391**

provides education and support during pregnancy to women and families with a focus on healthy pregnancy, parenting, and linkage to community programs and services as needed.

## **Breastfeeding Policy 424-4391**

provides direction to promote, support, and protect breastfeeding across Nova Scotia as the normal and optimal way to feed infants because of the health benefits for babies and mothers.

## **Loving Care**

provides comprehensive key health messages to new parents in a format that is age paced and easy to use. The focus is on healthy child development, healthy eating, injury prevention, and parent-child interaction.

## **Postpartum Education and Support**

promotes healthy adaptation to parenting by providing support and education to all new parents in Nova Scotia following the birth of their babies.

**Food and Nutrition Support Advisory Group** will inform the development of a provincial policy that will aim to increase food and nutrition supports to licensed child care facilities in Nova Scotia.

## **Healthy Beginnings: Enhanced Home Visiting 424-4391**

promotes healthy child development, builds parenting skills and capacity, enhances parent-child interaction, and connects the family to community resources by identifying families facing challenges early on and providing intense, focused home visiting for the first three years of their child's life (implemented by Public Health Services throughout Nova Scotia).

## **Enhanced Vision Screening 424-5869**

offers vision screening to all preschool children before they enter grade primary and to children in grade primary who have missed the preschool screening, to ensure that all children achieve the highest level of vision possible, through early identification of potentially correctable conditions.

## **Fluoride Mouthrinse Program 424-5869**

provides a school-based dental cavity prevention program and promotes good oral hygiene at an early age (offered in schools that have a larger percentage of children at high risk of developing dental cavities).

## **Childhood Immunization Schedule 424-1748**

immunizes children as part of their regularly scheduled school immunization program.

## **Youth Health Centres 424-5869**

provides health education, health promotion, information, referral, follow-up, support, and some clinical services to youth at about 43 youth health centres (YHCs) across Nova Scotia, mostly located in schools (Youth identify the services and supports most needed by youth in their community, thus each centre's services may look different).

## **Framework for Action: Youth Sexual Health in Nova Scotia 424-6046**

provides a rationale and strategic direction for a comprehensive approach to sexual health education, services, and supports for youth throughout Nova Scotia.

## **Sex? A Healthy Sexuality Resource 424-6046**

provides sexuality information for youth that is based on evidence, factual, up-to-date, non-judgmental, clear, straightforward, easy to read, colourful, and appealing to youth.

## **HIV-AIDS Prevention Information 424-5730**

provides harm-reduction strategies, education, information, and prevention services to those at risk of exposure or exposed to HIV-AIDS.

**Healthy Living Incentive 424-7512**  
offers parents a non-refundable tax credit on registration fees of up to \$500 per child on everything from swimming lessons to dance classes to increase youth enrollment in physical activity, sport, and recreation.

**KidSport 424-4408**  
helps children overcome financial barriers that prevent or limit their participation in organized sport (administered by Sport Nova Scotia).

**Sport Opportunities for Children and Youth in Nova Scotia 424-4408**  
offers structured and unstructured sporting activities, through school and community-based programs, aimed at decreasing current levels of physical inactivity in children.

**Sport Futures Leadership Program 424-4408**  
assists provincial sport organizations to provide fun, safe, and inclusive sport activities for children and youth, to decrease current levels of physical inactivity.

**Physical Activity: Children and Youth Accelerometer Study 424-7629**  
studies activity levels by having a representative sample of Nova Scotian children and youth in grades 3, 7, and 11 wear a motion counter on their hip for seven days to assess current activity levels. Data collected every four years—again in 2010.

**Renewal of Tobacco Control Strategy 424-5962**  
reduces smoking rates and the burden of tobacco-related illness, through taxation, legislation, treatment/cessation programs, community-based programming, youth smoking prevention initiatives, media awareness, and evaluation.

**Tobacco-Free Youth Sport and Recreation: How to Get There 424-5962**  
explains why and how to create, promote, and reinforce tobacco-free policies for use within youth sport and recreation and acts as a resource to be used by sport and recreation organizations who would like to develop, communicate, and reinforce tobacco-free policy for their athletes/participants, coaches/leaders, and spectators.

**Tobacco Reduction Social Marketing Campaign 424-5962**  
targets youth and young adults with tobacco reduction messages.

**Tobacco Media Literacy Resource School Based Programs 424-5962**  
provides, in partnership with Education, You Choose, a tobacco media literacy resource for high schools and continues promotion of Smoke-free For Life, a tobacco prevention curriculum supplement for grades p-9 through Public Health Services and Addiction Services in the district health authorities.

**Tobacco Access Act Enforcement 424-5962**  
enforces the Tobacco Access Act issuing warnings for selling tobacco to persons under the age of 19 years.

**Injury Prevention in Schools 424-5362**  
builds injury prevention links with schools by focusing on how best to support the existing student curriculum. Examples include partnerships with the Departments of Health (EHS Trauma Program), Transportation and Public Works (Road Safety Advisory Committee), and Education around the Prevent Alcohol and Risk Related Trauma in Youth initiative (P.A.R.T.Y.), designed to educate teenagers (ages 15 and 16) about the consequences of risk and serious injury, and exploring options to incorporate this program into a restorative justice/diversion program for youth.

**Suicide Prevention Strategy 424-5464**  
carries out implementation of the suicide prevention strategy and continues its work with CMHA to support the development of community-based suicide prevention initiatives including actively exploring a specific initiative for LGBT (Lesbian Gay Bisexual Transgender).

**Road Safety 424-5362**  
partners with Transportation and Public Works as part of the Road Safety Advisory Committee to put a road safety communications campaign together targeting impaired driving and speeding.

**Helmet Safety 424-5362**  
supports a number of helmet safety related activities including policy development, Helmet Safety Action Coalition, Noggin Knowledge Program, support for helmets (disparities issues), and various other awareness and enforcement programs.

**Alcohol Strategy 424-4368**  
launched in 2007 to help in making a shift to a culture of moderation.

**Fetal Alcohol Spectrum Disorder (FASD) 424-4368**  
focuses on developing priorities related to the prevention and treatment of FASD with several government departments, including participating in the Atlantic Intergovernmental FASD Partnership.

**Web-based Alcohol and Drug Education Curriculum Resources 424-4368**

works with Education to provide leadership in the development of web-based Alcohol and Other Drug Education Curriculum Resources for teachers and students in grades 10 to 12.

**Targeted Education Programs on Risks of Gambling 424-2175**

plans early identification/intervention programs in the near future to increase knowledge of youths and seniors and provide tools that they need to help mitigate at-risk and problem gambling.

**Rural Women and Youth Addiction Service 424-4368**

provides rural women and youth increased accessibility to prevention, early intervention, and treatment services in their communities.

**Addictions Prevention Curriculum Supplement, A Question of Influence 424-4368**

provides, in partnership with the Department of Education, an addictions prevention curriculum supplement for grades 7–9.  
www.druged.ednet.ns.ca

**Problem Gambling Help Line 1-888-347-8888**

provides Nova Scotians with access to professional social workers who specialize in gambling addiction

24 hours a day, 7 days a week. Services include: assessment, treatment and referral of problem gamblers; advice, information and treatment for their families, friends and employers; and gambling related materials for anyone.

**At-Risk Social Marketing Campaign 424-2175**

targets 19-34 year olds who may be experiencing problems.

**Nova Scotia Student Drug Use Survey 424-4368**

administers, in collaboration with the other Atlantic provinces, a standardized survey to gather relevant prevalence data and monitor trends.

## Department of Justice

### Correctional Services 424-7640

delivers a range of programs and services for young persons, between the ages of 12 and 17, who are in custody or under court-ordered community supervision.

**Nova Scotia Youth Facility**

provides safe and secure custody for incarcerated youth at the Nova Scotia Youth Facility.

**Correctional Investigative Reports**

provide investigative reports to the courts on the status of youth, e.g., pre-sentence reports.

**Reintegration/Rehabilitative Planning and Case Management**

provides case planning for youth in custody to be reintegrated into society.

**Community Supervision and Support**

provides community oversight, support and monitoring for youth under court-ordered community supervision, e.g., probation, deferred custody and supervision, bail.

**Correctional Enforcement**

enforces conditions placed on a youth under court-ordered community supervision.

**Education Programs**

provide public school education programs for youth in custody and an experiential-based school curriculum and employment placements at the community-based alternative day schools for youth in custody and those under community supervision.

**Employment Placement**

provides employment placements/jobs for youth in custody or under court-ordered community supervision.

**Life Skills, Anger Management, Substance Abuse and other Programs**

provides a variety of psycho-education programs for youth in custody and under community supervision, such as:

- anger management (e.g., CALM, Options)
- life skills (e.g., Reasoning and Rehabilitation)
- substance abuse education
- gender-specific programs (e.g., Voices)

**Leisure Activity**

engages youth in custody or under court-ordered community supervision in leisure activity such as canoeing, swimming, fitness, adventure, sports, and summer camps.

**Spiritual and Cultural Programs and Services**

provides spiritual programs and support, and a range culturally sensitive programs for youth in custody, e.g., powwows, sweat lodges, sweet grass ceremonies, Life Lessons for Black Youth.

**Halifax Youth Attendance Centre**

provides a range of day, evening, weekend and summer programming for youth under court-ordered community supervision, including alternative day school, psycho-educational programs, and leisure programs, as well as employment services through the Department of Community Services. Psychological and social work services are also provided on site by the IWK Health Centre. A bail supervision program is also co-located at the Centre.

**Cape Breton Youth Resource Centre**

provides youth under court-ordered community supervision with psycho-educational, employment and leisure programs.

**Centre 24/7**

provides youth in custody or under court-ordered community supervision with community-based alternative day school and psycho-educational programs.

**Restorative Justice 424-3303**

provides extrajudicial measures and restorative conferencing in Nova Scotia under the Youth Criminal Justice Act for referred young persons between the ages of 12 and 17, delivered by a network of approved community-based agencies.

**Victim Services 424-8785**

provides province-wide services to reduce the harmful impact of crime on victims. Services include a specialized court preparation and support program for child victims who are called to testify to criminal proceedings.

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