

Connecting Voices

Newfoundland and Labrador College of Social Workers

Feature

Gender-Based Violence: Past, Present and Future

BY MAXINE PAUL MSW, RSW & NICOLE BROWNE BSW, RSW

It is difficult to believe the Montreal Massacre at L'École Polytechnique happened 33 years ago on December 6, 1989. As we write this article, it is also disheartening to hear about another mass shooting in Colorado in November 2022, which seems to be related to sexual orientation and gender identity. Over the past third of a century, we have learned so much about the issue of gender-based violence and we have so much work to do.

At Memorial University, a Vigil is held every year on December 6th to remember the women who were killed because they were women in an engineering school. It is part of The National Day of Remembrance and Action on Violence Against Women and the 16 days of Activism from November 25 to December 10th. The event happens at Memorial's Engineering Building in part to highlight the continuing gains of women in that field and to pay tribute to the 14 women and all other victims of gender-based violence. It also highlights the changes that have happened from a legal and policy perspective along with what sometimes seems like the

See full story on page 5



Maxine's Reflection:

“ The shock of the Massacre in 1989 is still vivid to me, I had a night class that Wednesday evening and watched the news story after I got home. Sadly, mass shootings have become much less shocking, we are used to hearing about it now. The killings in Nova Scotia in April of 2020 come to mind as gender-based violence was also part of that story. The issue is a crisis and has serious impacts on the whole of society. ”

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This edition of **Connecting Voices** is dedicated to the 14 women who were murdered at École Polytechnique in Montreal on December 6, 1989.

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Editorial Policy

Connecting Voices is a publication of the Newfoundland and Labrador College of Social Workers that facilitates information sharing among the membership. It is published two times a year (January and July).

The NLCSW Editorial Committee accepts articles throughout the year. However, the deadline for article submissions for the January edition is November 1 and for the July edition the deadline is May 1.

The Editorial Committee is interested in articles, commentaries and book reviews that address some of the following areas:

- social work practice and promotion
- professional issues
- social and legislative issues
- social work research, theory, practice and education
- ethics
- community development
- social work leadership

The editorial committee reserves the right to reject any article or return it to the author for revision prior to publication, as well as to edit submitted material for clarity and conciseness.

Article submissions and photographs must be submitted electronically.

Advertising space by organizations, groups or businesses is available in the **Connecting Voices** publication.

Publication of articles and advertisements does not imply endorsement by the NLCSW.

A complete copy of **Connecting Voices Editorial Policies** are available on the NLCSW website
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Editorial

Social Work, A Profession Breaking Barriers

BY DEANNE M. O'BRIEN
BA, MSW, RSW

The social work profession extends across many areas of practice, which was one of the things that drew me to this profession, given the transference of skill sets across many practice settings. There are over 1700 social workers employed across Newfoundland and Labrador in a wide array of practice settings, including government departments and agencies, court systems, mental health and addictions, long-term care, hospitals, schools and universities, private practice settings and non-profit organizations, just to name a few.

One foundational theme in many of these practice areas is that social workers play a role in helping to reduce/break barriers, whether that be institutional, systemic or client specific barriers. The skill sets of social workers are extensive and based on our foundational values, principles and code of ethics. Social workers continue to make a huge impact in the lives of others in their areas of practice, from policy and administration to specialized clinical areas. The Canadian Association of Social workers (CASW) Code of Ethics, which is core to social work, states that "Social workers promote social fairness and the equitable distribution of resources, and act to reduce barriers and expand choice for all persons, with special regard for those who are marginalized, disadvantaged, vulnerable, and/or have exceptional needs. Social workers oppose prejudice and discrimination against any person or group of persons, on any grounds, and specifically challenge views and actions that stereotype particular persons or groups" (CASW, 2005, p. 5). In addition, social workers throughout Newfoundland and Labrador are working in various areas of practice where systemic, institutional and client specific barriers exist. Social workers



are, through their unique skills, able to identify, assess and advocate for and impact change on barriers that exist for clients and the entire population.

In this edition of *Connecting Voices*, you will find articles written by social workers in diverse areas of practice that pertain to ethics, advocacy, clinical practice, community development, and policy and program development. This edition not only highlights new initiatives that our colleagues are spearheading and involved in, but also showcases some of the impactful programs and services that are offered throughout the province that help to reduce barriers for clients. Kaberi Sarma-Debnath provides information regarding the Multicultural Women's Organization of NL (MWONL) in her article titled the Benefits of Empowerment Programs for Newcomers in Clinical Social Work. This article highlights the empowerment programs offered by the MWONL and Kaberi provides information on specific programs that help newcomers to connect and engage with each other through activities offered. Caitlyn Collins writes about a submission she authored titled Anti-Oppression Framework for Child Welfare in Ontario: A Critique - Why Has it Not Fixed the Problem of the Over-Representation of Black and Indigenous Children in Care? Caitlyn authored this submission as a final project for her Bachelor of Social Work placement at Trent University in Durham. Caitlyn's submission is included in the textbook *The Myth of Child Protection: An Equity Guide for Change* written by

Rona Jualla Van Oudenhoven, Dawn Walcott-Parris and Steve Woodman.

Alison Feehan provides valuable information regarding perinatal mental health, in her article titled **Social Work and Perinatal Mental Health**. Alison gives insights into how social work fits into perinatal mental health. In addition, she provides information regarding what is happening across the province regarding perinatal mental health initiatives. Also included in this edition, Annette Johns writes about the increase in the use of technology to deliver social work services. Annette also provides practice examples to reflect upon, along with ethical and practice considerations when using technology in service delivery.

Connecting Voices continues to provide a forum in which registered social workers from around the province are able to share information about their areas of practice, share their experiences and knowledge, and demonstrate their commitment to the profession. We hope you enjoy all of the articles in this edition of *Connecting Voices* and you learn something new about the exciting new initiatives and work our fellow colleagues are involved in across the province. The committee encourages members to consider submitting an article to be published in a future edition. Information on article submissions can be found in the *Connecting Voices* Writing Guidelines document that was developed by the Editorial Committee as a helpful resource.

We hope you enjoy this edition of *Connecting Voices* and have a healthy and happy New Year in 2023!

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Executive Director

Context Matters

BY LISA CROCKWELL LL.M,
MSW, RSW

As we begin 2023 and near the three-year mark of this global pandemic, many of us wonder how this time will be viewed in the future. If those who reflect on this period will ever understand the current context of our lives.

From the social work perspective, the profession has seen continuous growth in the number of registered social workers across the country including in our own province over the last three years. Despite the growth, we are a profession in demand and like other regulated professions there are vacancies and changes anticipated across our public systems. Social workers navigate these challenges while keeping the focus on clients, the community, and the impact of systemic issues.

Within this context, the Canadian Association of Social Workers is preparing to launch a revised **Code of Ethics**. The first draft was circulated to social workers across Canada through the CASW Reporter on November 1, 2022. The draft was accompanied by a survey seeking RSWs input to ensure the document is relevant to the

needs of service users and addresses changes in practice, social justice and advocacy while supporting the profession's commitment to Truth and Reconciliation. The last CASW Code was released in 2005; ensuring the revised Code reflects current context and is sustainable in the foreseeable future is important.

Social workers across all fields repeatedly identify the complexity of practice. This is known to reflect the complex state of society which directly impacts the individuals, families, and communities with which we work. Approaching complexity with confidence is influenced by at least three factors: preparedness to practice which comes from a solid social work education, availing of meaningful continuing education which advances knowledge and skill, and having supportive supervisory and collegial relationships. A gap in any of these three factors can pose difficulty in practice. Professional regulation starts with ensuring that those who work in this context have the entry to practice qualifications and therefore the skills to safely practice in this complex environment. This reflects the

importance of the registration process. At NLCSW, we continue to offer a variety of easily accessible continuing education webinars intended to supplement other forms of education that social workers receive as well as the practice resources to assist with self, supervisory and collegial reflection on practice. These are the elements of a regulatory quality assurance program which are meant to support practice and address the second two factors. Regulation is one piece; universities, employers, and unions also play critical roles.

As discussed in the last edition of **Connecting Voices**, the NLCSW Registration Committee and the Board of Directors continue to recognize the complexity of clinical practice especially when it is delivered in independent private practice settings. The exploration of the Registered Clinical Social Worker (RCSW) designation is balanced with ensuring all systemic factors including access to service are considered. Illustrating another step in the evolution of a profession where every aspect of context matters.

Happy New Year! I wish all social workers in our province health, happiness, and peace.



NLCSW Private Practice Roster

The NLCSW maintains a voluntary roster of social work private practitioners. The following social workers have elected to be included on the roster. They meet the criteria for private practice in the profession of social work in Newfoundland & Labrador. Contact information for these social workers is available on our website - <https://nlcsw.ca/social-work-in-nl/private-practice>

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Cover Story continued

overwhelming amount of work that still needs to be done to address and stop violence in this society. We can all work to prevent violence, we all have a role, and everyone must do their part if we are to be successful. At Memorial, the Sexual Harassment Office promotes culture change through bystander intervention. An approach that requires that everyone take prosocial action when faced with situations that contribute to violence. Simple comments or "jokes" that demean others must be addressed. We need to move to a "call in" approach in most situations, since "calling out" tends to cause harm (Ross, 2019).

As we take steps toward building safety and eliminating gender-based violence on systemic and community levels, it is also important to consider the work to be done in our day-to-day lives. Many social workers are parents or role models for young people in their lives. Many social workers have lived experience as a survivor or caring for survivors of gender-based violence. There are local resources aimed at challenging gender-based violence and other types of violence which we can share amongst our circles:

Empowering Them E-Course by St. John's Status of Women Council (SJSWC)

Social workers developed the E-Course as a free and accessible resource to build skills around gender-based violence. As noted on the SJSWC website "Teens, adults, parents, siblings, friends, workers, partners... We want everyone over the age of 14 to take up the cause and change the way gender-based violence impacts all of us. You might be experiencing abuse; it might be that you are causing it; it might be happening to someone you know. Whatever the case, this course will give you the confidence to ask and act accordingly" (SJSWC, 2022). It can be accessed

here: <https://sjwomenscentre.ca/empoweringthemecourse/>

Navigating Modern Masculinity / Navigating New Norms of Masculinity

Violence Prevention Avalon East has developed a new provincial project that is challenging social norms for masculinity, focused on engaging men in the prevention of intimate partner violence in Newfoundland and Labrador. Contact the coalition for more information. <https://violencepreventionae.ca/nmm/>

Teen Healthy Relationships by Planned Parenthood NL

Planned Parenthood has been an educational resource for many years in St. John's and area. In recent years they have offered a 12-week program designed for those between 14-19 years of age. They list some of the topics to be covered on their website. Topics include: boundaries, consent, Intimate partner violence, social media and online safety, misogyny, feminism and rape culture. The details can be found here: <https://www.plannedparenthoodnlshc.com/teenworkshop.html>

Community Justice Connect (CJC) by Newfoundland and Labrador (NL) Human Rights Commission

CJC provides conflict resolution services to Indigenous, racialized, and religious minority communities throughout NL. The service is accessible online and by phone. CJC takes a creative approach toward solutions with participants. Issues can be systemic, indirect, or interpersonal. Their program is free, voluntary and confidential. You can read more about it here: <https://thinkhumanrights.ca/community-justice-connect/>

We encourage you to critically reflect beyond gender, on the ways other intersecting social locations (race, ability, sexuality, class) might impact the experiences of gender-based violence. Robbins (2014) speaks to the

connection between social work values and regarding lived expertise with gender-based violence as knowledge in the field. Make time to stay curious about your loved ones' and service users' experiences with gender-based violence, both online and in person. Listen, support, and believe them. Dumaresque et. al (2018) call for narrative approaches to be reimagined and politicized, as peoples' stories should and do bear weight in social work policy and practice. As we reflect each year on the impact of the violence at L'École Polytechnique, we also celebrate progress which has been made by women and other marginalized genders. At the same time, we continue the work of building safer and more equitable communities. Remember that political advocacy works and tell your elected representatives that you care about this issue.

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Ethics

Interjurisdictional Electronic Social Work Practice

BY ANNETTE JOHNS MSW, RSW
NLCSW ETHICS COMMITTEE

Introduction

The use of technology to deliver social work services continues to increase. This growth in technology has provided opportunities for social workers to provide counselling and therapy across jurisdictions. This article will highlight the practice standard pertaining to interjurisdictional electronic social work practice and raise awareness to some of the ethical and practice considerations.

Practice Scenarios

1) My client is a rotational worker who spends 2 weeks a month in Alberta. The client requests electronic services while in Alberta. 2) My client is a post-secondary student who is moving to Nova Scotia to attend university. The social worker-client relationship is well established, and the client requests continued services through electronic technology. 3) My client is moving out of the country and requests online counselling while transitioning to their new home. 4) I have been contracted by an organization in Ontario who provides electronic services to clients throughout Canada. I have been assigned clients who live in many different provinces.

Practice Standard

Social workers have a professional responsibility to be aware of and adhere to the **Canadian Association of Social Workers (CASW) (2005) Code of Ethics, CASW (2005) Guidelines for Ethical Practice and the Newfoundland and Labrador College of Social Workers (NLCSW) (2020) Standards of Practice for Social Workers in Newfoundland and Labrador. The NLCSW (2020)**

Standards of Practice addresses Interjurisdictional Practice in standard 9.

Interjurisdictional Practice

Social workers have a responsibility to be aware of interjurisdictional issues when providing therapy or social work services in another jurisdiction.

- a) Social workers who provide social work services across jurisdictions must comply with the regulatory requirements in the jurisdiction in which the social worker resides and the jurisdiction in which the client resides.
- b) Social workers engaged in interjurisdictional practice have the appropriate professional liability insurance.
- c) Social workers providing services to a client in another jurisdiction, comply with legislation and reporting requirements (i.e., reporting child protection concerns) in that jurisdiction. (p. 10)

As outlined in this standard, social workers in Newfoundland and Labrador who are providing electronic services to a client who is located or living in a jurisdiction outside the province, must consult with the social work regulatory body where the client is located at the time of proposed service delivery, to inquire about any regulatory/registration requirements prior to engaging in service delivery across jurisdictions. The NLCSW produced **Interjurisdictional Social Work Practice: FAQ & Practice Guidance for Social Workers in NL** that is great resource for social workers to consult and addresses frequently asked questions.

Ethical & Practice Considerations

In addition to understanding

and adhering to the regulatory requirements, social workers need to be attuned to the ethical and practice considerations pertaining to interjurisdictional social work practice and the use of technology in service delivery.

In providing electronic social work services across jurisdictions, social workers consider the following:

- 1) Do I have the necessary knowledge, skills, and competencies to delivery social work services through electronic services?
- 2) What are the strengths and limitations of using technology in the delivery of services with this client?
- 3) What needs to be covered through the informed consent process?
- 4) How will I document client interventions and provide clients with the right to view their records?
- 5) How will I endeavor to protect client confidentiality and what risk management strategies should I consider?
- 6) Is the technology platform that I am using compliant with the Personal Health Information Act?
- 7) How do I plan for unanticipated outcomes (e.g., emergency situations, loss of power/internet)?
- 8) How do I maintain virtual boundaries?
- 9) Am I familiar with reporting requirements in the jurisdiction where the client is located if I have concerns about child/adult safety?
- 10) How familiar am I with the community resources in the jurisdiction where the client is located?
- 11) What alternate options exist that

may be in the best interest of the client (e.g., referral to local supports)?

In considering these questions, it is advised that social workers review the NLCSW (2020) Standards of Practice and NLCSW's (2021) Technology Use in Social Work Practice Explanatory Document. It is important to reflect on and adhere to the Standards pertaining to competence, documentation, confidentiality, technology, interjurisdictional practice, social media, dual and multiple relationships, conflicts of interest, and professionalism and accountability.

Other helpful practice resources to review include:

Practice Matters – Electronic Social Work Practice

Practice Matters – Beyond Borders and Interjurisdictional Electronic Practice

Documentation Matters Tip # 3 – What things should I consider in the documentation of electronic social work services.

Self-Assessment Tools for Informed Consent and Documentation

Conclusion

This article highlighted the importance of social workers being aware of and adhering to regulatory requirements pertaining to interjurisdictional electronic social work practice. NLCSW practice resources were also shared that can assist social workers in navigating their ethical

and professional responsibilities and grounding their work in the **NLCSW (2020) Standards of Practice** and **CASW (2005) Code of Ethics**.

It is important that social workers seek appropriate consultation when necessary to ensure they are meeting the standards and providing high quality electronic social work services across jurisdictions.

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Deadline for submission for the next edition of Connecting Voices is May 1 • 2023

Community

Benefits of Empowerment Programs for Newcomers in Social Work

BY KABERI SARMA-DEBNATH RSW

Empowerment can play an important role for the well-being of the individuals who are culturally and linguistically diverse. From the social work perspective, it helps clients focus on their goals, and alleviate problems in their lives by using their own abilities.

Migration to a new country can be challenging. As part of the Multicultural Women's Organization of Newfoundland and Labrador (MWONL) programs, we have been offering empowerment programs that help newcomers engage, relate, connect, and build networks and understanding. With a small group in each empowerment session, the program allows for peer encouragement and learning. Each session involves a new activity which includes arts and crafts and learning conversational English. Participating in empowerment sessions allows participants to see parts of themselves in each other and uncover strengths within themselves, their experiences, and their growth.

Through the empowerment process, social workers can help increase individual client's capacity to use their own abilities. It is an uplifting process for the client that supports the development of their abilities. It is important for social workers to emphasize the clients' strengths, use positive reframing, and solution-focused language to guide clients in recognizing their strengths and resources necessary for problem solving and reaching their goals. One of the strengths of empowerment is it provides resources and sets the tone



for people to enhance their own lives. Social workers help clients become aware of their limitations and ways they can overcome them.

The MWONL has proven examples of how newcomers and immigrants, of all age groups, benefit from our home-grown empowerment programs. The newcomer women we serve are from different cultural backgrounds, and often lack self-confidence and faith in their abilities. Social workers need to understand the cultural differences to offer support to the clients who are culturally and linguistically different. Our empowerment programs help change their way of thinking, how they manage relationships, and interact in their social environment. Clients may rely on the social worker's guidance to seek solutions for their problems, referencing the social worker as an expert. However, we encourage clients to see themselves as the experts and recognize the power they hold.

Examples of Empowerment Sessions and MWONL's Success

Language Connection - Conversational English Through Empowerment

Language barriers are one of the challenges that newcomers experience. MWONL has been offering this program for more than ten years. It provides newcomers the opportunity for socialization, and to improve their conversational English. We observed this raises their confidence level and provides a platform in sharing personal experiences. It also creates social networking opportunities that help in settlement and integration of immigrants' long-term process.

One participant reflected: "In English conversation session, at the beginning, I was so scared and nervous. I have seen learning how everyone has grown. Sharing our personal experiences gives

us opportunity to learn from each other, our challenges, and successes."

Knitting

This knitting session is another empowerment program offered by MWONL and is facilitated by one of the newcomer women. The trainer starts off this class with simple techniques that helps participants to learn in a better way. At the same time, the women with a less confidence level who participate in this activity find that they can do it which helps to raise their self-confidence.

Henna Design

This is an empowerment session with lots of creativity that gives women some relaxation and to time to focus on creative work. We found these kinds of activities help to relieve stress, build networks and raise confidence level



that they can do something creative.

Creative Art for Adults and Children

These sessions are our very popular empowering activities, which we have been running for many years. These programs help women who live with multiple challenges and never get opportunities to do anything creatively

for themselves. The participants found their creativity in art that make them happy. Children were also able to enjoy social time during the isolation of the COVID-19 pandemic.

Participant quote: "This was really enjoyable; I could not believe I had this talent to paint with brush on canvas."



Did you know? **NLCSW's YouTube channel** is a valuable source of continuing professional education (CPE). Any webinars viewed through the channel can be claimed as required credits under the workshop category.

Clinical

Social Work and its Role in Long-Term Care During COVID-19

BY ANGELA MOYSE BSW, RSW

The COVID-19 pandemic has shifted the practice of social work in long-term care. Residents and families were panic stricken. "Will my loved one get sick?" "Will my parent die?" "Will I ever get to see my family member again?" Canadians were flooded with news stories and images of death, illness, health systems failing, military being called into active duty to handle failing long term care systems, lack of medical staff to deal with the number of hospitalized COVID-19 patients and economies on the brink of collapse.

I chose to reframe the chaos.

Early in the pandemic, I was walking down the hallway in the long-term care facility where I work, when I came upon an elderly resident who had a smile from ear to ear and was singing a song. I stopped to ask the resident what they thought of it all (the pandemic). The reply was "meh!". With that, the resident shrugged their shoulders and continued down the hall. I stood there and thought "leave it to an elderly veteran to help me keep it all in perspective". That interaction established how I would view my existence during the COVID-19 pandemic. Was I hungry? No. Was I safe? Yes. Was I cold? No. Was I fighting for my life in a war-torn country? No. Did I have a roof over my head? Yes. A simple shrug of the shoulders said so much.

Having reset my attitude in less than 20 seconds to what was going on around me helped to focus on what I was trained to do, that being to support people in times of crisis in a manner that was focused on their needs and those of their families. How was I supposed

to do that when the necessary public health direction was to maintain physical distancing with residents and that families were not permitted inside the building? New ways of providing psychosocial support had to be figured out and fast.

Learning new forms of technology was first on the list. Zoom meetings for clients, Microsoft Teams meetings for consulting with colleagues, Zoom meetings for resident family council meetings and interdisciplinary team conferences. At times, the learning curve was overwhelming. The collection of family member email addresses was imperative. How else was I going to disseminate the ever-changing policies and guidelines for the pandemic and the impact it was having on long term care if it were not by the use of technology? Typing letters and stuffing envelopes multiple times a week was just not going to cut it.

When residents and families were upset that they could not see their loved one on their 100th birthday, it was social works' responsibility to respond with empathy and understanding when relaying information pertaining to the COVID-19 guidelines and restrictions. Who else was going to advocate for the needs of the individual and keep in mind the health and well-being of an entire community?

For some time, not even a box of chocolates could be left at the door for a resident by a family member. The time came when restrictions were loosened, and families were allowed to drop off care packages. While nursing was donning Personal Protective Equipment (PPE) to serve meals and complete personal care,

social work was answering family questions about what was safe to bring to the facility and wouldn't go against guidelines. Social work was tasked with coordinating a drop off schedule for 50 + residents and families. Greeting them at the front door to receive the prepackaged cookies and bottles of pop the residents were craving, while dressed in full PPE and trying to ease concerns and fears as each car pulled up to the entrance, with family members' fears overflowing out the driver's side window.

Mental health practice knowledge and skill set for social work in a long-term care setting was paramount for assisting residents and families in coping with the stressors associated with a pandemic and the impact isolation was having not only on residents but on family members. Family members who would normally spend significant amounts of time at the long-term care facility, providing day to day support to their loved ones were no longer able to do so. Weekly reminders about healthy self-care practices, recognizing when stress was becoming unmanageable, and encouraging families to take on new ways of ensuring their loved ones were being well cared for, became a focus of social work practice in long term care.

When residents passed away, families were not permitted inside to pack up personal belongings, or to pick out clothes for laying residents to rest. Nurses were nonstop with changing PPE before entering resident rooms to provide medications, food and personal care and were so strapped for time and staff that social work was tasked with going through personal belongings and selecting funeral attire to present to the families at the front door of the facility

and hoping that choices made would not elicit more stress.

Then came the co-workers who were deployed to the facility who normally didn't work there and were isolated from their usual workplace supports. Management were not always readily accessible face to face because they were isolated at separate sites in some instances, eliminating the ability to support staff on a personal level and help them address their concerns, worries and fears. Staff would often seek out social work for emotional and logistical support. Social work was helpful in emphasizing the process of communication and advocating for the needs of valued coworkers who at times were struggling to cope with the impact COVID-19 was having on their place of employment and personal lives.

While social work was using skills such as active listening, crisis management, situation stabilization, problem solving, boundary setting, clarifying, reflecting, reassuring and supporting of a community in crisis, the other aspects of the social work role continued on; admission work, screening, assessment, monthly statistics, Resident Assessment Instrument (RAI) data entry, documentation, counseling, concrete

service delivery, resource referrals, advanced healthcare planning, internal and external advocacy, discharge planning, behavioral consultations, team and family education, field education to social work students, committee work, new hire education, etc. Just because a worldwide pandemic was at the doorstep didn't mean the day to day needs of a healthcare system in motion came to a halt. The responsibility of promoting a positive atmosphere and attitude, fulfilling a leadership role, and keeping a watchful eye to potentially abusive situations required social work to have sharp practice skills, focus, energy, and will power when the world was in a state of what appeared to most, as chaos.

Social work's role in long term care during the COVID-19 pandemic was critical. The ability to adapt to crisis, take on responsibilities that were new and evolving, yet maintain the everyday standards of practice in an ethical and professional manner, gave social work the opportunity to stand out as leaders in a time of crisis.

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Leadership

Adult Protection – Updates to Legislation, Regulations, and Policies

BY HENRY KIELLEY MSW, RSW, STEVE ROSS MA, BSW, RSW & TONYA SULLIVAN BSW, RSW

The Adult Protection Act is the law in Newfoundland and Labrador that protects individuals aged 18 and older from abuse, neglect, and self-neglect in instances where the adult does not understand or appreciate the risk. This means the Act is somewhat narrow in focus, as it only applies in cases where an adult does not have capacity to make a particular decision. In December 2022, the Act was updated to bring more focus to the idea of decision-specific capacity, or decision-making ability in the domains of health care, physical, emotional, psychological, financial, legal, residential, or social needs. Even within these domains, there is a continuum of simple to complex decisions. The community of practice is shifting from global competency to decision-specific capacity. From a human rights perspective, it makes sense to only limit decision-making rights where risk cannot be mitigated, instead of seeking full care and custody of adults. This human rights perspective is deeply embedded in the Act and is further strengthened in the updates to the legislation, regulations, and policies.

The work that happens under adult protection is guided by eight service principles as outlined in the Act, all of which should resonate with social workers throughout Newfoundland and Labrador:

1. An adult is entitled to live in the manner the adult wishes as long as that adult has the capacity to make decisions respecting the

adult's lifestyle. We all have the right to make decisions that others may consider good or bad. The quality of a decision is not indicative of someone's ability to make that decision.

2. In relation to an intervention to assist or protect an adult who is or may be in need of protective intervention, the paramount consideration shall be the best interests of that adult. In adult protection policy, best interests are considered to be the best approach to eliminate or decrease the assessed risk to the adult based on that adult's choices and lifestyle.

3. An adult who is or may be in need of protective intervention should be involved to the greatest possible extent in decisions relating to that adult. We all want to be involved in decisions that affect us. The same is true for adults involved in the adult protection process. Adult protection practice requires an ongoing consideration of balancing autonomy versus protection, as well as a commitment to involving the adult to the greatest extent possible.

4. An adult who is or may be in need of protective intervention should receive the most effective but the least restrictive and intrusive form of support or protection when unable to care for themselves or their assets as program and service resources, including budgetary appropriations, permit. This consideration is case-specific. For example, an adult does not need to be institutionalized if they can be supported in their own home or in

another community arrangement. Under the Act, a person's autonomy is only limited to the extent necessary to mitigate the risk and this has been reflected in the first eight years of practice under the Act.

5. An intervention to assist or protect an adult should be designed for the specific needs of that adult and should be reviewed on a regular basis and as the adult's needs and conditions change, and should be revised as appropriate to address those needs and conditions. All service plans prepared under the Act are evaluated and reviewed by a social worker minimally every six months, embedding a consistent evaluation process into the care plans of adults protected under the Act.

6. The delivery of services under this Act should, where appropriate, provide for the preservation of the adult's cultural and community connections. This is a new service principle that highlights the importance of our connection with culture and where we come from. This is of particular significance for Indigenous individuals and newcomers to Canada.

7. The delivery of services under this Act should, where appropriate, provide for the preservation of family ties and contacts. Family can be a significant source of support for adults, however, in some instances, a family member is the alleged source of abuse or neglect, making the connection difficult or impossible to maintain.

8. An adult who is or may be in need of protective intervention should, if desired, be encouraged to obtain support, assistance and advice from family and friends to help that adult understand choices, and to make and communicate decisions. Some adults need to be supported to make and/or communicate a decision, and must be given every opportunity to do so.

The major changes with the new adult protection legislation occur in five key areas:

1. Enhanced procedural protections. This includes strengthening the rights of adults involved in the adult protection process by implementing timelines on temporary orders, legislating timelines on investigations, and enshrining the right of the adult to retain and instruct counsel in the Act.

2. Enhanced cultural sensitivity. This includes the addition of the new service principle described above, along with the requirement that culture and community are reflected in assessments, court orders, and service plans to the greatest extent possible.

3. Establishment of temporary orders. These orders help bridge the gap between the clinical team's determination that the person likely lacks capacity, and the court's decision regarding capacity. The team's

assessment is not proof of incapacity, rather it is evidence that the court considers in reaching its decision.

4. Reformed emergency interventions. The first Adult Protection Act required a court application for declaration two days following an emergency intervention. This has not provided adequate time to complete assessments and determine the best course of action with the adult. The new Act will allow for more assessment time.

5. Reformed declaration orders. New orders will move away from the idea of care and custody, and focus more on the specific decision(s) where the team feels and the court agrees the adult lacks capacity.

While adult protection timelines and court involvement make it challenging and complex, at its core are fundamental social work values, skills and competencies that are required in any field of practice. These include the clinical interview, critical analysis, clinical judgement and the values that guide our practice every day.

For the assessment of capacity, some disciplines have quantitative tools with numeric scores that indicate this or that about a client. It is important to remember that an assessment tool is not an assessment – it is a tool that guides assessment and assists in forming a clinical opinion. For

social workers, that tool is the clinical interview and is more qualitative by its nature. The clinical interview, like any other assessment tool, requires analysis in order to form a clinical opinion. A person's decision-making ability cannot be reduced to a single quantitative score and the holistic, contextual and critical lens of social work has a vital role to play in continuing to enrich the collaborative capacity assessment process moving forward.

As social workers, we share an individual and collective responsibility to inform and support this growing community of practice. Regardless of our practice area, there will be times when we see valid triggers that make us question a client's ability to understand and appreciate their decision (or lack of a decision). We encourage you to learn more on your own, and to join educational opportunities as they arise. More information is available here: <https://www.gov.nl.ca/cssd/apa/>. Please reach out to either one of us with any questions - HenryKielley@gov.nl.ca, SteveRoss@gov.nl.ca or TSullivan@gov.nl.ca.

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March is Social Work Month.

Stay tuned to NLCSW's website and twitter feed as more details will be released soon.

School

News from the Memorial University School of Social Work

School Launches New Strategic Plan – “Passion and Purpose”

We are excited and proud to present *Passion and Purpose: The Strategic Framework of the School of Social Work 2022-2027*.

Our new strategic roadmap acknowledges the challenges and opportunities of our environment, while focusing on our goals and aspirations going forward.

This framework will guide us as we focus on our priorities: connecting people, improving lives and creating social change for a just and inclusive province and world, through integrated and transformative social work education, research and community engagement.

Creation of this strategic framework would not have been possible without the assistance of Anne Becker and Jane Fitzgerald of Climb Consulting Inc., and the dedication and commitment of the School of Social Work Strategic Planning Steering Committee members.

The team devoted many hours of their time to bring together the thoughts, criticisms, suggestions and recommendations of students, staff and academic staff members, along with those of our community partners and the general Memorial community.

School of Social Work Strategic Planning Steering Committee members include:

Dr. Paul Banahene Adjei
Anne Becker
Gina Billard
Ivy Burt
Dr. Kathy de Jong
Jane Fitzgerald
Dr. Sulaimon Giwa
Dr. Paul Issahaku
Dr. Julia Janes
Kim Kelly
Lynsey Soper-Thistle

Krista Tiller
Dr. Gail Wideman
Laura Woodford

We compiled and took into account responses from surveys, focus group discussions, individual interviews and written feedback.

Our new strategic framework represents the voices, thoughts and aspirations about the School of Social Work.

Our next step is to have conversations about establishing short- and long-term priorities and strategies for implementing them.

Passion and Purpose is our plan, and our pledge, to aim high and achieve excellence.

A huge thank you to all involved for your input!

We welcome social workers in the community to join our Implementation Committee.

See our strategic plan at: <https://www.mun.ca/socialwork/about-us/strategic-framework/> and stay tuned for our official launch of Passion and Purpose!

Faculty Member News

Dr. Fred Andersen completed the PhD program and was awarded his degree during Memorial's fall 2022 convocation.

Dr. Andersen is a faculty member at the School of Social Work and was a per course instructor for seven years prior to that.

Dr. Andersen's dissertation explored Indigenization in BSW Social Work Education.

Drawing from his experience as a residential school survivor, Fred's scholarly interests include a self-reflexive gaze which champions the voices of residential school survivors and

their successive generations.

Fred has a wide-ranging local, regional and national community-based and institutional expertise in the areas of HIV/AIDS, addictions and mental health. His practice areas focus on Indigenous contexts in both urban and community populations as an addictions counsellor, mental health consultant and therapist, advocate and activist, and as a community-based researcher.

For more information, visit <https://www.mun.ca/socialwork/about-us/our-people/faculty/fred-andersen/>



Congratulations Fred!

COVID-19 News

Memorial lifted the mask mandate during the fall semester, in accordance with guidance from Public Health and changes to federal travel requirements. Masks are still strongly encouraged and the university will continue to provide masks in public spaces.

Those experiencing COVID-19 symptoms should not come to campus.

Memorial continues to follow the most up-to-date advice provided by the Government of Newfoundland and Labrador and the Government of Canada on COVID-19 response.

The School of Social Work's members remain dedicated to providing the best

possible learning experience to our students, as we work together to get through this pandemic.

BSW, MSW and PhD News

Orientation

Over 100 BSW students attended a virtual orientation session on September 2, 2022, where we welcomed our newest first- and second-degree students.

Our student leadership volunteers hosted the sessions and provided a warm welcome as well as some tips and advice for new BSW students. One of the most memorable moments of the session was when the student leaders were open about the discomfort, unlearning, and transformation that comes with social work education.

Scholarships and Awards Ceremony

After several years of postponing our signature BSW Scholarships and Awards Ceremony for COVID-19 safety, we were thrilled to resume our in-person event on October 6, 2022.

The event honoured award recipients from 2019-2022 and took place in St. John's at the main auditorium, Health Sciences Centre. It was livestreamed and recorded for those who could not attend in-person, and can be viewed at: <https://www.mun.ca/socialwork/alumni-and-donors/awards/>.

In total over the three academic years, 74 social work students received a total of \$79,635 in scholarships, awards and bursaries, including a new scholarship named to honour Sheena Findlay, a matriarch of the School. The School also named 62 students to the Dean's List and 11 students received the School's highest honour – the Dean's Award of Academic Excellence. A complete listing of awards and recipients can be viewed at: <https://www.mun.ca/socialwork/alumni/awards/ScholarshipsAwardsBursaries.php>.

Congratulations to all recipients and a huge thank you to all our generous donors!

Lunch & Learns

The Sexual Harassment Office at Memorial offered a specific session, "First Responder Training" to social work students in fall 2022. The training is designed to help prepare individuals to respond to disclosures of sexual violence. There was an overwhelming response from students, as the training filled up quickly, and there is a waitlist for the next session. The response showed that BSW students are interested in learning how to support survivors of sexual violence.

Our student liaison officer sought feedback from the students about which other topics they are interested in learning about in addition to their course and fieldwork, and their suggestions included:

- Self-care and burnout for Registered Social Workers (RSWs)
- Suicide and suicide prevention
- Addictions as a broad topic
- Sex work and sex work advocacy
- Corrections
- Indigenous culture and knowledge
- Résumé and cover letter building
- Mental health diagnosis: social work with borderline personality disorder, complex Post-traumatic Stress Disorder (PTSD)
- Collaborating with healthcare professionals

We welcome building connections with the social work community for students to learn more. If any RSWs would like to offer a session or Q&A on these topics, please contact Nikki at nbrowne@mun.ca to arrange a format that works for you (virtual or in-person).

Fall 2022 Convocation

Memorial hosted an in-person fall 2022 convocation ceremony, during which eleven MSW students and one PhD student graduated.

Congratulations to the following MSW fall 2022 graduates who have been awarded the distinction of Fellow of the School of Graduate Studies: Taylor Barei, Jennifer Cranford, Heather Doyle and Vanessa Power. This award is made in recognition of their continued academic excellence throughout their program.

The deadline to apply for our PhD program beginning spring 2023 was Sept. 15, 2022. Inquiries about the program may be directed to phdsocialwork@mun.ca.

Field Education News

The Field Education Team continues to be incredibly thankful for the support we have received from the social work community in Newfoundland and Labrador as we continue to live and work with the realities of the pandemic.

Planning for winter 2023 BSW placements was well underway in fall 2022.

The Children, Seniors and Social Development Labrador Initiative resumed in January.

We are seeking additional placements for fall 2023 to accommodate increased enrollment. Registered social workers and agencies interested in hosting a social work practicum can reach out to the Field Education Team at scwkfield@mun.ca.

Registered social workers can access the National Field Instructors Course available through the Canadian Association for Social Work Education (CASWE-ACFTS) and claim continuing professional education (CPE) credits as per NLCSW's CPE Policy. For registration and information on the course, email scwkfield@mun.ca.

Stay in Touch!

Update your profile at <https://www.mun.ca/alumni/info/> and be sure to follow us on social media - Facebook: www.facebook.com/MUNScwk, Twitter: @MUNScwk for all the latest news and events.



Initiatives

Province Launches 5-Year Life Promotion Suicide Prevention Action Plan

BY SUSAN GREEN MSW, RSW

In June 2022, the Department of Health and Community Services launched **Our Path of Resilience: An Action Plan to Promote Life and Prevent Suicide in Newfoundland and Labrador** (Government of Newfoundland and Labrador, 2022b). This five-year action plan reflects extensive consultation, research and collaboration with local community organizations, national partners, Indigenous governments and organizations, multiple government departments, researchers and people with lived and living experience of suicide attempt and/or suicide loss. It calls for a strategic and concerted effort by health, education, justice and social systems in partnership with local communities to promote life and reduce the incidence of suicide in Newfoundland and Labrador.

Suicide is the ninth leading cause of death globally, and a leading cause of death in First Nations and Inuit communities nationally. It is the second leading cause of death of youth in our country. Every day in Canada approximately 10 people die by suicide. In our province, while the suicide rate decreased overall from 2017-2020, there was an increase in 2021 and our overall rate remains higher than the national average (11.49 versus 10.1 deaths per 100,000 people). (Public Health Agency of Canada, n.d; Statistics Canada, 2022; Office of Chief Medical Examiner for the Province of Newfoundland and Labrador, 2021-2022, Office of the Chief Medical Examiner for the Province of Newfoundland and Labrador, 2014-2022).

As social workers, we know suicide is a complex issue that impacts all people regardless of age, ethnicity, race or socioeconomic status. However, we also know people who experience inequities such as poverty, homelessness, systemic racism, ageism, gender-based discrimination, transphobia or homophobia, face higher risks of suicide (Government of Canada, 2020). For example, lesbian, gay and bisexual youth are five times more likely to consider suicide and seven times more likely to attempt suicide, and transgender youth face an even greater risk (Centre for Suicide Prevention, 2018). Furthermore, the suicide rate of people who are incarcerated is higher than people living in the community, with suicide accounting for one in five deaths in custody (Office of the Correctional Investigator, 2015). That's why Our Path of Resilience takes an equity-based approach with 12 action items under the following categories:

- Community mental health literacy and capacity building;
- Socially-equitable prevention and intervention and follow-up services; and
- Monitoring, surveillance and research.

Budget 2022-23 (Government of Newfoundland and Labrador, 2022a) includes \$2.5 million to begin implementation of this plan, with a commitment of approximately \$4.5 million annually for the next four years. With this budget, government will continue to support ongoing life promotion suicide prevention initiatives including peer-led services,

Indigenous-led community programs, e-mental health programs, supportive housing, coordinated supports for children and youth, and education and training. We are also embarking on new initiatives including a collaboration with media outlets to ensure responsible reporting on suicide, the implementation of province-wide specialized trauma treatment, promotion of creative art, music, mindfulness, recreation and land-based therapies, and expansion of suicide bereavement and loss support groups. The work will also include development of a comprehensive provincial suicide monitoring and surveillance system to track risk and protective factors, evaluate the impact of programs and policies, and use data to inform future decision-making.

The provincial Our Path of Resilience Steering Committee and four working groups were established in September 2022 and have already started work on priority items. Thus far, we have over 60 people from across our province as part of our implementation team and this includes all regional health authorities, a variety of community advocates and organizations, Indigenous partners, researchers and individuals and family members with lived and living experience. To date, we have expanded our Community Addictions Prevention and Mental Health Promotion Fund Program, transitioned the mental health crisis line services into an integrated 811 Healthline, and provided \$300,000 to six different Indigenous partners to develop and sustain their own land-based life promotion initiatives. The implementation team of Our Path of Resilience will continue to

Continued on page 19

Perspectives

Anti-Oppression Framework for Child Welfare in Ontario: A Critique

BY CAITLYN COLLINS BA,
BSW, RSW

As a final project for my third-year placement for my BSW at Trent University Durham, I wrote a piece titled, 'Anti-Oppression Framework for Child Welfare in Ontario: A Critique - Why Has it Not Fixed the Problem of the Over-Representation of Black and Indigenous Children in Care?'. This piece went on to be published in the textbook, *The Myth of Child Protection: An Equity Guide for Change* written by Rona Jualla van Oudenhoven, Dawn Walcott-Parris and Steve Woodman. In this article, I want to highlight the importance of anti-oppressive practice in social work, the over-representation of Black and Indigenous children in care, and the importance of race-based data.

My student placement was completed at the Durham Children's Aid Society (DCAS) in Oshawa, Ontario in 2020. At the time, Rona Jualla van Oudenhoven was my placement supervisor in the Anti-Oppressive, Diversity, Equity and Inclusion department and was director of Equity, Communications and Community Partnership at DCAS. She has now moved on to teach at Radboud University in the Netherlands. My piece published in her book touched on the role that policy plays in our everyday lives as social workers. Although written within the scope of the province of Ontario, these ideas can be translated into our own provincial child welfare system.

My chapter titled 'Anti-Oppression Framework for Child Welfare in Ontario: A Critique' touched on the importance of anti-oppressive practice and how it plays an essential role in the overrepresentation of Black and Indigenous children in Ontario's child welfare system. It continues with the history of government-funded residential schools, the 60s scoop,

and the intergenerational trauma that Indigenous people now face. A large part of the piece examines 'Interrupted Childhoods'(2018) from the Ontario Human Rights Commission and 'One Vision, One Voice' (2016). This piece addressed child welfare agencies confusing poverty with neglect, the pre-conceived bias in the system and how this directly contributes to the overrepresentation of Black children in care. I also examined the statistics of Black and Indigenous children in the current child welfare system and the importance of collecting race-based data. By collecting race-based data, we can better study the exact numbers of Black and Indigenous children in care and examine why the numbers are so elevated. By doing this, we will help children and their families with the barriers they face resulting in their children being in care.

My piece also touched on child welfare agencies receiving funding from the Ontario provincial government and how this affects the delivery of services. More specifically, the numbers of Black and Indigenous children in care in Ontario must be public information to continue monitoring and ensuring that child welfare agencies are practicing in an anti-oppressive way. Finally, I explored the importance of recognizing privilege and power. In writing my piece, I acknowledged that I have a tremendous amount of privilege and have not had to face the oppression that many people in society face daily.

The overall purpose of my piece was to highlight the importance of an anti-oppressive framework in child welfare agencies and involving families that are directly marginalized due to our daily work. Practicing social work in an anti-oppressive way involves social workers constantly reflecting critically on their work. It is crucial that we are always

working in partnership and seeing what we can do better when working with families. Another way to practice in an anti-oppressive way is to work collaboratively with the service user. By doing so, this will empower the service user and attempt to equalize the power imbalance that is constantly present in the social work field. Personally, I believe that the most important aspect of practicing with an anti-oppression lens is being able to talk to the service user about the oppression that they may feel and grasp an understanding of it. When we are working with families, it's important that we know and understand their feelings of our involvement due to intergenerational trauma in order to build the rapport. I feel fortunate to have completed a placement at the Durham Children's Aid Society, which has significantly impacted my work as a child protection social worker.

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Issues

Social Work and Perinatal Mental Health

**BY ALISON FEEHAN B.Sc., MSW,
RSW**

What is Perinatal Mental Health?

Did you know that our province has higher rates of perinatal mood and anxiety disorders at a rate of one in four compared to the national average of one in five (Perinatal Mental Health Alliance of Newfoundland & Labrador, 2022)? Perinatal mental health refers to mental health throughout the prenatal, antenatal, and postpartum periods, and encompasses a variety of mood and anxiety disorders, such as anxiety, obsessive compulsive disorder, post-traumatic stress disorder, bipolar disorder, psychosis, and depression. Trauma must also be considered, since infertility, birth, and pregnancy trauma can have a significant impact upon the mental health of birthing persons (Beck et al. 2013; Beck 2004).

As with many mental health issues, there is an inadequate amount of resources and attention given to perinatal mental health. Lack of screening throughout pregnancy/postpartum is a contributing factor to these statistics, given that parents are not being screened, and therefore the few resources available are not being offered or explored. Screening is not occurring despite literature having identified validated tools, such as the Edinburgh Postnatal Depression Scale, and the Patient Health Questionnaire-9 (Postpartum Support International, 2020). Societal factors and stigmatization also play a role, in that parents assume they should be adjusting well to parenthood, often compare themselves to others, and the assumption that negative experiences are normal (Postpartum Support International, 2020).

Why is This Area Important?

Psychosocial factors and life stressors irrefutably have an impact on the long-term health of children; however, it has also been demonstrated that maternal mental health and social determinants are predictors of adolescent mental health, social functioning, and overall child well-being (Coles & Cage, 2022). Consequently, a mother's mental health has a significant impact upon children, and in turn, families. It must also be acknowledged that one out of ten fathers experience postpartum anxiety or depression, again directly impacting parenting, relationships, and family dynamics; paternal depression during the postpartum period has been associated with adverse child outcomes (Guitierrez-Galve et al., 2015). Evidently, addressing the perinatal mental health of parents is vital in ensuring healthy parent-child relationships, child development, healthy families, and subsequently, healthy communities.

Where Does Social Work Fit into Perinatal Mental Health?

When reflecting on the role of social work in any area, reverting to the profession's **Code of Ethics** can often establish a cohesive understanding of where our profession "fits". The value of "Respect for Inherent Dignity and Worth of Persons", as detailed in the **Canadian Association of Social Workers (CASW) (2005) Code of Ethics**, is certainly applicable to the area of perinatal mental health, since social work operates on the principle of respecting the inherent dignity of all people, and upholding human rights. Additionally, value 2 in the Code, "Pursuit of Social Justice", is

relevant as we uphold the right for people to have access to resources to meet their basic human needs, and to have equitable access to services. This is particularly relevant when working with any marginalized individuals who identify as parents.

In a more practical sense, social work plays a significant role in micro, mezzo, and macro areas within health care, thereby having both direct and indirect means to evoke lasting change. Social workers interact with families on a frontline basis within community and health care settings. In addition, social workers develop and inform policies within organizations that provide support. Furthermore, providing both trauma and culturally informed care is typically at the forefront of our profession, and these aspects are imperative within perinatal mental health (Postpartum Support International, 2020).

What is Happening in Newfoundland and Labrador?

Positive movement is happening within our province. The Perinatal Mental Health Alliance of Newfoundland and Labrador (PMHANL) "was created by community-university partners of agencies, educators, health and social care professionals, and government leaders who want to address the gaps in programs, supports and services for mothers, infants and families. The Alliance aims to form new bridges and bring forward a unified response to a growing public health concern that can affect generations" (PMHANL, 2022). This Alliance aims to promote and support mental health from

conception through the early years, via collaboration and advocacy, and working towards systemic change (PMHANL, 2022). Additionally, the Provincial Government also announced an Action Plan in the Summer of 2022, aimed to support mental health initiatives in preventing suicide (Government of Newfoundland and Labrador, 2022). In part with the Government's "Socially-Equitable Prevention, Intervention and Follow-Up Services", one of these actions focuses on formalizing a provincial perinatal mental health program for expectant/new families. It is hoped that with recognition and further action by the provincial government, in conjunction with the formation of the PMHANL, there will be increased screening, awareness, and support for perinatal mental health - an area in which social work is undoubtedly essential.

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Initiatives continued

work towards fostering a culture of compassion, understanding and action across health, education, justice, and social services systems by supporting the role of people with lived and living experience as experts and partners in system reform.

To see the full action plan and future updates, please visit *Action Plans and Updates - Health and Community Services* (gov.nl.ca).

Are you concerned about suicide for yourself or someone else? Call 811. The Provincial 811 Healthline provides support for people who need mental health and addictions support or are experiencing a mental health and addictions crisis. 811 is available 24/7, and services are provided by trained crisis interveners.

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Book Review

"Indigenous Writes" by Chelsea Vowel

BY MEGHAN CALDER MSW, RSW

In my current role as a Policy and Program Development Specialist with the Department of Children, Seniors and Social Development, my focus is on policies, practice and initiatives relating to Indigenous children, youth and families within the child welfare system. Through this position, various courses I have taken in Indigenous Studies, and my own study, I have developed (and continue to develop) a stronger appreciation of the significant history, current events and incredible nuance to Indigenous issues in this country. Having basic knowledge of many of these issues is integral for those of us working within systems that provide service delivery to Indigenous peoples and/or Indigenous communities. "Indigenous Writes" by Chelsea Vowel is an easy-to-digest and captivating read that provides a guide to First Nations, Métis and Inuit Issues in Canada.

Vowel is Métis from manitowsâkahikan (Lac Ste. Anne) who is a public intellectual, writer, lawyer and mother to six children. In this book, Vowel provides comprehensive overviews and nuanced discussions of a variety of topics, many of which are not well understood by the general public. Vowel's passion and well-placed humour helps explain subjects in such a way that will make readers curious to learn more.

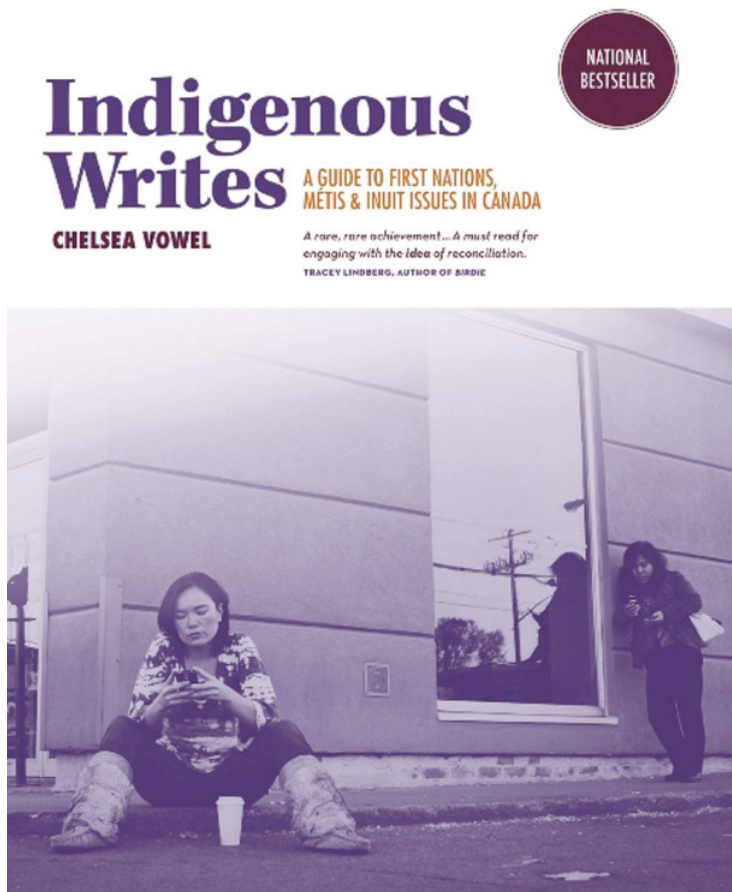
The book begins by Vowel guiding us through a discussion on terminology,

highlighting words currently in use in reference to Indigenous peoples and a discussion around words to never use. In the next chapter, Vowel explores the convoluted history and current context of the discussion around

our systems like the discussion on the "myth of the level playing field," which is a particularly enlightening discussion.

A powerful chapter involves a look at what the author entitles "state violence" in the context of Canada, by explaining the residential school legacy, the sixties and millennial scoops, Inuit relocation and the current crisis of some First Nations communities not having access to clean drinking water. Vowel finishes the book by covering topics of Indigenous rights, the evolution of treaty making, discussions around reserves, and various attempts by Canada to assimilate Indigenous peoples in recent decades. Although I have learned (and continue to learn) about my own culture through my family, my formal education in Newfoundland and Labrador regarding Indigenous history was minimal and as I have come to learn, incredibly

flawed and inaccurate. There are real systemic and personal consequences every day for Indigenous peoples and communities because true and complete histories of Indigenous peoples in Canada has largely been unknown by many. This book provides an excellent starting point for those of us who want a basic understanding of a variety of Indigenous issues across Canada, which is one of many steps that we can take on a personal and professional path in the spirit of reconciliation.



Indian status in Canada, examines Métis and Inuit identity, and discusses cultural appropriation, among other topics related to culture and identity. The entire next chapter is devoted to myth busting in order to address the incorrect and often problematic assumptions that are often made of Indigenous peoples and communities. For example, Vowel examines the often-incorrect assumptions the general public has about taxation for Indigenous peoples while also tackling myths embedded in many of



Topics

The Value of Data in Social Work Practice

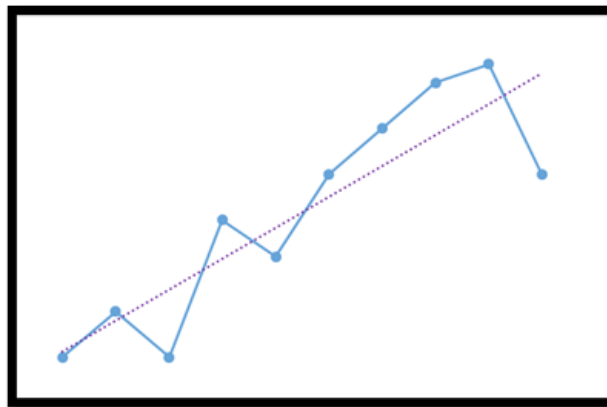
**BY DEANNE M. O'BRIEN BA,
MSW, RSW**

Social work is a diverse profession, with a multitude of practice areas. When you reflect on the practice of social work, data collection, analysis and trending may not come first to mind. However, data and information collection is extremely important in most areas of social work practice as it provides valuable information pertaining to client demographic data, service usage, population health, service need as well as existing program efficacy.

Within the profession, some social work roles are heavily involved in data analysis, research and evaluation methods, whereby these practices are used to create, revise or strengthen programs and services. One constant among social work practice areas is the collection and storage of information. Whether that data is client information or data resulting from quantitative, qualitative or mixed methods research, it is data that can be analysed and used to inform decisions, identify program and policy gaps and enhance service delivery.

Data is critical across many areas of practice as it provides evidence, which supports informed decision-making processes and can help to identify root causes of systemic issues. At times, anecdotal evidence can shed light on a change that may be required within a specific program area, however, it is the strategic data collection and derived data that provides concrete evidence to support and inform change. Decisions

regarding new or revised service offerings, policies, procedures and practice standards are all informed by data. Whether that data be macro-organizational data, which focuses on service delivery on a larger scale, or specific service offerings based on client demographic information, data is critical to ensure efficient service



provision that meets the needs of the client population being served.

The Canadian Association of Social Workers (CASW) (2005) Code of Ethics, which is core to social work, states that "Social workers respect a client's right to competent social worker services. Social workers analyze the nature of social needs and problems, and encourage innovative, effective strategies and techniques to meet both new and existing needs and, where possible, contribute to the knowledge base of the profession" (p. 8). As social workers, we recognize the needs of our clients based on information received and through our clinical assessment of this information, we can then recommend services. The information obtained from client(s) is used to inform program delivery, and service need trends may become visibly apparent when working within a

specific population or geographic area. For example, if reviewing how many clients are utilizing a particular service within a geographic area, we may make an assumption of a specific set of client needs. However, data to support this assumption, such as referral numbers, service usage information and client demographic data, can be used to strengthen the argument of a broader current population need or forecast resources that may be required in the future.

When involved in the collection of information, whether it be client identifiers and demographics, referral information, program and intervention needs or data to inform policy, it is important to understand how this data can be used to inform practice.

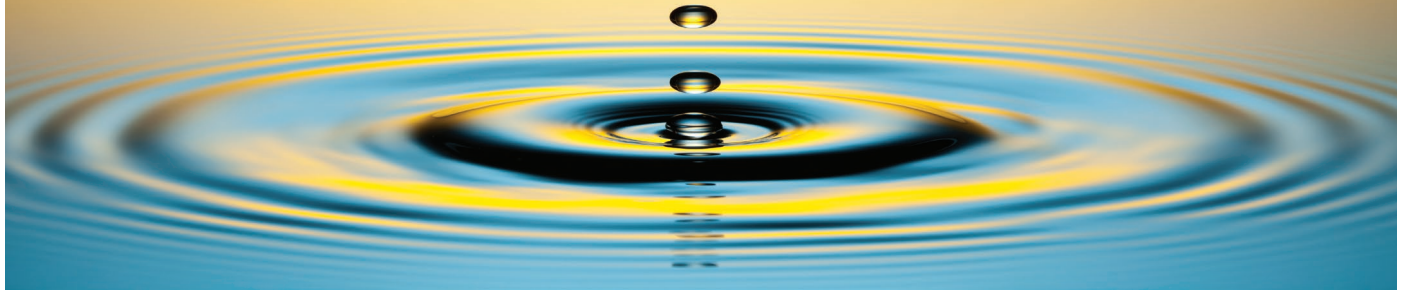
Equally important, is ensuring information collected is accurate, up to date, and as complete as possible, as data collection and analysis is foundational for evidence-based practice, and increases efficacy of programs, policies and services. As social workers, data collection can be a significant part of your role and allows staff to problem solve, ensure more informed decision making and provide appropriate services based on information obtained. Social workers, in their day-to-day practice, collect data from various sources, and most importantly, we use this data to provide better outcomes for our clients.

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Practice Matters



Practice Matters is an educational resource for social workers in Newfoundland and Labrador. It is designed to generate ethical dialogue and enhance critical thinking on issues that impact social work practice. In 2022, a significant milestone was reached with the release of the 25th edition. Access this valuable resource at [Practice Matters | NLCSW](#).

2023 Online Renewal

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- MyNLCSW.ca will begin accepting renewals for the 2023 registration year in mid-January.
- Current NLCSW registrants and non-practicing members will be notified by **email** when the online system is opened.
- The renewal deadline is **February 15, 2023 (midnight Island time)**. A late fee will be applied to active renewals received after this date.



The Newfoundland and Labrador College of Social Workers (NLCSW) has a wealth of practice resources available. Access the full range of resources at www.nlcsw.ca.

Make these resources part of your everyday social work toolkit!

Standards of Practice

Explanatory Documents

Guideline Documents

Interpretative Documents

YOUR SOCIAL WORK TOOLKIT EXPLAINED

Standards of Practice	<p>Outlines the practice requirements that must be adhered to by social workers in Newfoundland & Labrador to ensure safe, ethical, and competent social work practice. These are informed by the Canadian Association of Social Workers (CASW) Code of Ethics and Guidelines (2005).</p> <ul style="list-style-type: none"> Standards of Practice for Social Workers in Newfoundland and Labrador (2020)
Explanatory Documents	<p>Provides information and direction on the Standards of Practice.</p> <ul style="list-style-type: none"> Social Work Recording Explanatory Document (2022) Cultural Competence in Social Work Practice Explanatory Document (2022) Technology Use in Social Work Practice Explanatory Document (updated 2021) Supervision of Social Work Practice Explanatory Document (2011) Child Custody and Access Assessments Explanatory Document (2007)
Guideline Documents	<p>Provides information and guidance on issues related to social work practice and affirms professional responsibilities.</p> <ul style="list-style-type: none"> Resource Guide for Private Practice (updated 2022) Practice Guideline on the Use of Complementary and Adjunct Interventions and Techniques in Social Work Practice (updated 2022) Health and Social Policy Advocacy Guideline Document for Social Workers (2022) Enduring Power of Attorney, Substitute Decision-Maker: What is the Role of Social Work (2022) Informed Consent with Children & Youth (updated 2021) Medical Assistance in Dying: What Social Workers Need to Know (updated 2021) Guiding Framework for Social Workers Concerned About the Professional Practice of a Colleague (updated 2021) Social Workers and Diagnosis Using the DSM-5 Practice Guideline (2020) Social Work and Decision-Specific Capacity Assessments (2012)
Interpretative Documents	<p>Provides information, clarification, and commentary on professional and ethical issues in social work practice.</p> <ul style="list-style-type: none"> Ethical Decision-Making in Social Work Practice (updated 2021) Self-Assessment Tools for Informed Consent and Documentation (updated 2021) Practice Matter Series Ethical Compass Series Documentation Matters Series