

International 7: Dan

Hi and welcome to Social Work Spotlight, where I showcase different areas of the profession each episode, with a 12-month focus on social workers around the world as of August 2025. I'm your host, Yasmine Loupis, and today's guest is Dan, whose more than 30 years of human services experience has seen him serving both children and adults in multiple settings and in various capacities. He has worked at four different child welfare agencies in Ontario, Canada, in frontline, supervisory and managerial roles across different functions. Along with work in the youth and adult mental health and addictions sector, Dan developed and facilitates the HEERO Model, focusing on moving this forward in Canada, the USA and further internationally.

Yasmine Welcome Dan to the podcast. Thank you so much for joining me today, and looking forward to having a chat with you about your social work experience.

Dan Yeah, thanks for having me. This is unusual just how we've connected, but I think that will be part of the story. So I appreciate you inviting me.

Yasmine Yeah, nice. I want to know firstly, when you got started in social work and what brought you to the profession.

Dan So maybe I can just give a couple seconds of backstory. So I live in Southern Ontario, Canada, and grew up in a family and generations of people who worked in kind of physically laborious type professions. So my father used to deliver furniture for a large company that my grandfather delivered furniture for. And I ended up getting involved in construction. And long story short is, I fell off a house. Which was, don't suggest anybody ever do. And it was pretty bad. So, I couldn't return to doing anything physically laborious. And so I was asked by, and this is an interesting for me, part of the story. I was on workman's compensation, which is like an insurance that takes care of you if you get hurt in a construction accident. And they said, what do you want to do with your life? And I said, I want to be a teacher. And they laughed at me, and said, how are you going to go from building houses to, and long story short, is I said, well, I'll prove it to you. And I went back to university, took some courses, did really well, and then brought it back to them and said, help me do this. And so I got in to do my Bachelor of Arts at McMaster University, and one day I was traveling up an elevator and I got off on the wrong floor. And the doors opened, and there's this big sign and it says social work, school of social work. And I'm like, huh, what's that? And so, you know, picked up a pamphlet, did a little bit of reading and went, I think this is what I want to do. And so that was kind of the journey in. I had to fall off a roof to get here, but yeah, that's how I landed in social work. And I truly believe that was where I needed to be. Like, I think that was what I was looking for. The idea of teaching and helping was something that was a value base, you know, that was learned. And I thought I could transfer it into, you know, what I did as a career. So that was the journey. I'm not sure if I answered your question, but that's how I landed in social work.

Yasmine It does, a hundred percent, literally landed, unfortunately. How does your injury affect you now? Does it stop you from doing other things that you want to do?

Dan Yeah. So there's definitely residue, because I broke various things and tore other things, and I fractured my skull. And in the process of that, lost my sense of taste and smell. So I don't taste or smell anything, which I will say as a father changing diapers, it's a blessing. But it

was a very interesting time, you know, way, way back then. And now it's just a part of who I am. I have, you know, chronic pain from various things and, you know, some physical limitations, but they pale in comparison to, for example, losing your sight or, you know, some other sense, for example. You know, taste and smell, yeah, I could adapt to. Not being able to see, people can adapt to that, but I think it would have had different implications. So that's the way I like to look at it, is that was a, you know, some greater power saying, okay, look, you don't belong in construction, Dan. So we're going to push you off a roof and get you to kind of re-engineer your direction. So there are definitely days I will tell you that, I get up in the morning and it's like, oh, jeez, I don't think people understand pain and what this is like, but you adapt. Thank you for asking.

Yasmine Yeah. Well, I work in workers' compensation. So I support people exactly in your position, who often will never get back to the sort of work that they were doing. And it's a huge deal in terms of identity and everything you've known, and who am I if I'm not this. So, you know, can't begin to understand the situation exactly, but it's a big deal.

Dan Do you know, let me, let me actually give a message to you that I hope kind of permeates what I share, and it's this. When I was speaking with the caseworker, so I've been on the other side of the table. I was a client. And when I was speaking with the caseworker about going back, and she literally laughed at me, she ultimately became one of my greatest allies, by the way, but like in the pursuit of, but there are, you know, these judgments and presuppositions and how could someone from a house framing kind of background go to being a school teacher, and that's just ridiculous and so on. And they sent me for all of this testing, and the testing came back and said I should be a dairy farmer, an electrocardiographic technician or a "social service worker", whatever that was at the time or whatever it meant. Here's why I tell you all that though, is that, and I'm not sure how I got referred or connected to her, but someone connected to me to a social worker within the workman's compensation board. And compensation was basically saying, no, that's just not an available option to you. And she said to me, it's an option to you. It's an absolute option to you. And let me tell you how to navigate this system. And let me help you understand kind of some of the nuances. And don't you ever doubt yourself based on what systems are telling you. What a powerful message. I honestly believe that had I not met her, because my courage was kind of punctured, you know, she kind of refilled the balloon a little bit. And I think, again, that's an experiential learning that I've brought forward in my career, and have translated that message many, many times to other people that, you know, systems are designed sometimes not in a way to serve. And so recognise your own truth and your own capabilities, and take it on. It's your life. You drive your bus. Don't let systems drive the bus. And yeah, so that's what you do for a living, just FYI.

Yasmine Yeah. And I mean, vocational rehab is all about looking at people's strengths and abilities, and you are not just one thing. So you have all this other life experience and passion for supporting people that perhaps the earlier people couldn't see. So it's about, I'm glad that you found the right person at the right time.

Dan Yeah, thank you.

Yasmine So you went back to college, you studied, you got your degree. Do you have some placement experiences through that learning that then kind of guided the direction that you wanted to take as a social worker?

Dan Yes. So I ended up doing a combined degree, and because I was on compensation, I felt it necessary, and I went to them and said, look, because they were

supporting me through the BA. And I said, look, I've investigated this thing called social work, and I think that's where I need to be. I also think I'm going to be, you know, employable after the fact and that's something that's of desire, but it's going to take, you know, some more time. However, I did some background and said, here's my proposal to you. I can do this five years of education in three and a half years, and here's the map and here's how I'll do it. And so what I need from you is, instead of supporting me for the three year BA, support me for 3.4 years to be able to get this dual degree, which in the end will be investment, return on investment for the system. And it was pretty intense, but I did that. And if I may, I graduated the top highest combined average. Not that those are necessarily the measures, but you know, I really leaned into it. During that time I did two placements.

Yasmine No, but you want to have something to show for your hard work.

Dan Yeah, it's nice. Although if social work is the same 20, 25 hours away from here, there are awards that they were giving out to like engineering students, you know, a couple thousand bucks, and we got \$50 for the various awards we won. So the hierarchy was well at work.

Yasmine Right.

Dan But I did a placement in the children's aid society, my first placement, which is a child welfare agency here. We have well over 40 regionalised child welfare agencies. So I actually did my placement in Brantford where I now live. Well, I didn't at the time, but I now live. And it certainly influenced me early. And I think it actually, as I reflect now, really poked at my kind of critical analysis of systems, but in a way that, you know, as an early new social worker, I just kept thinking, oh, okay, we can do this better. And so I'll do that. I'll do that better in terms of systems design. And then, and so honestly, that was probably the one thing that I took from that experience doing a placement there. The second placement I did was honestly transformational, and it was at a JK to grade five school. And it was transformational because the social worker there, who was my, like she oversaw my placement, was just salt of the earth. She was one of the best humans I've ever met in my life. And she taught me that some of these formalities and some of these things that I call complexities that we have created to maintain complexity, which then creates a system, and many systems that actually exclude people, she said, just treat humans in the most basic of ways. Her name was Heather. And so Heather really came at the school placement, which I had for over the year. So it wasn't a block where I went every day, but I went a couple of days a week over the school year. She did things like community organising of the parents in a neighborhood or a region where there was a lot of poverty, a lot of people who were living in housing and which is, you know, in my view, designed in a way that kind of perpetuates circumstances and marginalises people. But Heather just said, find their strengths and bring them to it. And so she created a community around the school and I got to participate in it, and it was infectious. And I saw, you know, parents who would enter the door at the beginning of the year, shy and withdrawn and whatever, who became leaders of different mini movements within the school to create opportunities. And the whole school was bought in, and it became this regionalised at the feet experience, instead of some formalised systemic thing that's hierarchical down. So she created, you know, when the school started, they did some measures and really, really struggling with behaviours and, and so on. And Heather said, they're hungry, let's feed them. And created, you know, community partnerships with local farmers and so on. And we fed them, no judgment. Anybody was welcome, and created this, what ultimately became an education system wide program in Hamilton Ontario, that lives till today, which said, if kids are hungry, feed them. If you feed them, they're better able to attend, to participate in, and the change in both the behavioural measures, but also importantly the academic measures, was

astounding. Heather also, when kids came up to her and asked her for a hug, she gave him a hug. And she was Heather to everybody, like, oh, there's Heather, let's go give her a hug, you know? And it was a need, you know, and it was honestly, a beautiful experience. So they were bookends to framing what would ultimately become the future directions, you know, that I chose. And yeah. So those were my placement experiences that impacted me.

Yasmine And I remember hearing, especially around the early lockdown periods in New York City, for instance, there was a lot of shout out about, there were food programs that were in schools. And that was often the only reason kids were coming to school, is because they wouldn't get food otherwise. So that kind of points to that whole, if people are disadvantaged, they're going to keep their kids at home. They're not going to send them to school. They don't want them to feel as though they're different to someone else. And if they don't have good nourishing food, they're not going to be able to concentrate. They're not going to want to be there. So yeah, that's really wonderful that that sort of community development existed.

Dan Well, and for me, what it did early on, I think we do a lot of learning early in our careers that we don't realise we're doing, and then it translates over time. And yeah, it's similar to me. It's really formed kind of my view. And I can share a little bit about that as I talk about the work I do now, but yeah, that definitely had had impact. We need to focus on health. We need to focus on relational health and how do we promote that, instead of frankly, the exact opposite in some of the systems. And I'll speak to that a little bit when I talk about what, as I said, what I'm doing now.

Yasmine And what's the trajectory then from the placement experience to where you are now? What's the in-between?

Dan Well, so I'm 61 now, and I was an adult student. So I graduated when I was like 29, and immediately was employed. Had a contract in a children's aid society here in Ontario within a couple of weeks of graduating school. So I kept my promise to the workman's compensation board that I would be employable. And from the contract, which was six months, after about a month, I was hired full time. And that had nothing to do with me. It wasn't like, oh wow, this guy's like really great at whatever he's doing. It had to do with something that I wish I was more analytical of in the beginning. What I've learned since is that 40 to 50% of social work graduates from the school that I was at end up working for children's aid societies in Ontario or at child welfare somewhere else across Canada. And that, there's a story in that. And a lot of it had to do with, I can tell you the first children's aid society that I worked at, I was the person with the most seniority after two years. And that was something to tune into, because the first week I worked there, they gave me a worker that was going to be my shadow. And I was supposed to follow this person around and she was going to teach me kind of the ropes and so on. So I met with her on my first day, and she brought me in her office and she said, okay, let's just get this clear, that ain't gonna happen. I don't have the time. They made this decision without me for me. And so I don't wanna mislead you. So all I'm gonna do is give you some advice and then where there's opportunities, for certain I will try to expose you to stuff, but don't expect what's been told to you. And she said, here's my advice to you. Give yourself two years before you question yourself whether or not you're competent in this work, because it is highly complex and it changes with frequency. The laws change, the regulations and standards change just when you think you're starting to get to know them. So be kind to yourself that way. And it was brilliant advice, but it was also, OK what am I hearing here? Like, what's woven within the message of I'm not going to be available to you. And so to answer your question, from that point I moved to a different children's aid society. And frankly, the reason I did it was we had a child, we were in a circumstance in our province where our government had frozen salaries at a certain rate. I won't

go into the details of the politics and decision making around that, but so I'd been frozen, and in the city I lived in, there were two children's aid societies, and the other one reached out to me and said, hey, if you come over here, we'll pay you 10 grand more. And I was like, oh my goodness, I need to feed the family kind of thing. And so I made the leap at that time. And then while I worked for both those children's aid societies, I also worked after hours for both children's aid societies in that city, providing emergency response, you know, to emergencies and the evenings. So I did that. I was in those two CASs for up til around 2003. Yeah, 2003. And I stepped away and went back, started to work on my master's and did some work in both adult and youth mental health and addictions. And basically the nature of that work was crisis response, where you as a mental health worker, social worker or nurse trained in responding, would attend with a police officer in the field wherever the person was in need, which is an incredibly wonderful program. It's called COAST, C-O-A-S-T, Crisis Outreach and Support Team. And I actually loved the work. I really loved it, but there was something at me saying, that child welfare thing, Dan, that child welfare thing. That's where you belong, and there's work to be done there. And so I then went and got a job at a different children's aid society, and my thinking there was, okay, maybe it'll be different somewhere else, outside of this particular city, notwithstanding we work under the same laws and so on. And so I'll go, and it'll be different. Yeah, no, that wasn't the case. It was very similar. And I'll explain to you what I mean by different. Well, actually the short story is that, you know, children's aid suggests helping children. And at that stage of my career, I started to really question, how are we helping children and are we really helping children? And if you believe the best way to help a child is to help their family, why are we not helping families differently and better? And so, you know, that was at play. So I went to work there. And during that trajectory, you know, I started out front line doing investigation assessment and intake, and then I won't belabour this. I'll just say that I ended up working in every position in the agency, also thinking within, if I did, if I work here, maybe it'll be different. And then moved to supervising. And I thought, well, if I supervise the work, then maybe I can help it be different. I like to think that I had some influence and impact. And then the latter part of my career, when I moved to yet another children's aid society, it was in a managerial capacity, and thought oh, you know, maybe I can have a different impact broader than just like a team of, you know, five or six people. And that was my kind of preconceived notion or hope. And I believe hope needs to be a verb, not a noun. It's something that is action. It's about actioning something and, you know, toward a particular achievement. Long story short, I did the work for about 23, 24 years in child welfare over a span of 25, 26 years.

Yasmine That's a very significant amount of responsibility to put on a new graduate. So yes, you were perhaps a little bit older and more mature than some of the other people coming in to children's aid straight from university, but to put you straight into, maybe it wasn't straight in, but to put you into the crisis response roster, it's just, it's a lot of early significant responsibility unsupervised. I'm wondering if you kind of took that on the shoulder, or maybe you just had really good supervision. How did you get through what perhaps some other social workers would have said, no, this is too much. I don't know if this is really for me.

Dan Yeah. So I'm nothing if not transparent. So I'm to be very blunt and honest about it. It was absolutely traumatic. And really important to call it what it was and continues to be for others. The Friday of my first week, I apprehended a child. I removed a child from, you know, from their family. And that was at the direction of, I can honestly say on reflection, at the time, I was told to do something, just the same way as I was told, hey, go on the roof and nail down that sheet of wood. I was told you need to do this and it's on kind of this basis and you need to hurry up because the day is ending. You know, go do this.

Yasmine Yeah.

Dan And so I did. I ended up in the director's office that afternoon in absolute tears saying, and she didn't even know me. She was like, who, what is this, what's happening? My supervisor was away. My supervisor supervised at least 12 people, 12 staff at the time. Just to contextualise that currently, the typical range is one to five, maybe one to six. He had double that plus other responsibilities.

Yasmine Yeah, wow.

Dan He was a brilliant man, but his capacity to be available, nevermind he was on holidays. you know, at the time. I remember going afterward to a family gathering and being in tears at the family gathering, just thinking, because it was totally contrary to how I was raised, what I believed in, how you help and so on. Notwithstanding, I can absolutely still articulate there were reasons and cause for concern for the safety of this young person. But response to does not need to be prescriptive. And I think at the time, you know, resources often dictate how you respond to things, and it's like, okay, unsafe, this is, you know, the mechanism that you use to intervene, and it's to remove children and so on. And, and it didn't jive with me. Sadly on the backs of that family, and I want to be clear again, there was a need for intervention, but I learned early to follow your gut Dan, follow, follow your truth and challenge the systems. Which is not a very comfortable place to be in a large system as well, because if you rattle the cage a little too much, then you become the cage rattler instead of someone who's questioning and trying to make a system better. So that's been an interesting journey, let me tell you. But yeah, I want to restate the word traumatic, because I've coined a term recently. So are you familiar with the ACEs literature and study, adverse childhood experiences?

Yasmine Yep.

Dan I've coined what I call a parallel term, called adverse child welfare experiences, with the same kind of outcome for workers of toxic stress experience, loneliness, being left to kind of manage these challenges and then you know as Brené Brown says, go home and drink a couple of beers and eat a muffin to soothe the soul. And that not being the most healthy way of, you know, doing the doing and living the living.

Yasmine Yeah, but there's a whole bunch of moral injury thrown into that, right, in terms of this goes against every fibre of your being?

Dan Huge. huge. I can tell you, I created a training called Survival and Child Welfare that came out of some of my experiences. And one of them was, I was on after hours one night and I got a call from the supervisor saying you need to attend the hospital and apprehend this baby. You're to sit there, wait for the baby to be born, and then you're to go and take this young person away. And I'm saying that in the harsh way that I am to make the point. And that's exactly what I did. Except when I went to bedside, mom was holding the baby, the father was at the side of the bed. I had a cop on either side of me. And I think I approached this circumstance with the, I reached deep inside of me and tried to find the greatest humanity I possibly could, while I was about to devastate a family. I explained to her that there was a warrant that had been sworn and I was exercising the warrant, and we were going to remove her child. And she looked at me and she said, but why? And Yasmine, I couldn't answer. I just did what I was told. And I did the classic kind of thing, classic in the sense of what I learned the classic was early in my career, was I just defaulted to, I'm doing what I'm told kind of response. Not as harsh as that sounds, but doesn't matter how it sounds to you and I, it's how it sounded to them and how it

was experienced by them. And I didn't know enough either way. I just did what I was told, which is why over time I became the person who would not do what he was told.

Yasmine Sure.

Dan He would think about it, analyse it. And if I believed it shouldn't be done, I'd vocalise it because humans and humanity deserves better, much better.

Yasmine Yeah. And we're complex and there's always more to it. Right?

Dan Yeah.

Yasmine I will say, having worked, we had a similar system set up in the hospital when I worked there, and we just had an on-call roster where if there were, we had a handful of criteria of if this happened, call the social worker overnight. And I would say that's probably some of my best learning, of being on the spot and having to make a decision and being solely responsible for that decision. But it's very different to what you experienced. My decisions were making an impact at a point of crisis with no context and no other supports around. There wasn't the child welfare team to call. There wasn't any other, you could put in your risk assessment, but you don't have any context for was there a previous anything, because no one's awake at 3am. And you end up in situations where you've got a two-year-old on your hip and a four-year-old on your hand and you're walking through emergency department and just trying not to traumatise these poor children, because their parent has had a psychotic episode and you really need to find them somewhere safe to go. But I feel like that gives you lot of confidence, and hopefully eventually what you developed in that space was some confidence to say, actually, I do know what I'm doing. Yes, I've had to do what I felt were horrible things and I didn't have the support I needed. But over time, I understand the systems, I understand my place in it, and I understand the impact that I can have. And that gives you a bit of confidence going forward to do what you feel needs to be done in the future.

Dan I think that that's a very reflective, a nice synopsis of what the experience was, the only thing I will say is that if it's predictable, it's preventable. And so that was predictable, and it all could have been prevented. And if it was prevented for me, would have also been prevented for that mom. It would have, the experience of being in a director's office that late on a Friday in your first week being in tears and the person looking at you like, oh my goodness, this person's not going to make it. And if it's predictable, it's preventable. You know, that's a key tenet that guides me in kind of current practice. It also guided me, especially when I started to supervise staff, not to sound cheesy, but I'm very proud of the way I behaved in a supervisory role. I'm very proud of even statistics like, that said, hey, you don't go to court very much or you don't remove very many children. Yeah, no, we don't. Because we don't have to. And there's a better way and a different way and a more humane way of doing what we do. And that came from those experiences. and being in some of those challenges. And I think that ultimately forms the greater whole that you become. And it also though creates fight or flight. A lot of people flee the child welfare system as child protection workers because of how overwhelming it can be. And is that the context we want people to experience and work in? And if that's truly the environment and context, how does that play itself out in our relationships with families? How do we relate with families? I mean, we already come in with the hammer. That's what they used to call it. I worked in a city called Hamilton and they said, you have to figure out a way to balance the hammer with the helping. And I was like, why do have to bring a hammer to the table? When I'm framing a house, I bring a hammer, but that's not a tool I need when I go to a, I don't have to hammer anybody. Why do we have to have a hammer? And that's some of the learning

that kind of came through that. And then teaching others how to do it differently, treating them differently in their experience as they come into this system in a way that they would say, I really enjoyed working with this team and, you know, working in partnership and in tandem. Like, why can't we do that and support each other? And, and if we're going to do that and we show up at a home with two people, why can't we have the first conversation with the parents saying, who are the three people you would drop everything for and go and help in a situation where they're, you know, in some kind of difficulty. And they name them and say, okay, which one do you want to come now? Do you want all of them to come down and sit with you while we're with you, because we know the minute we knock on your door, we represent authority and we want to figure out a way with you to level the playing field. How can we do that? You know, what would be helpful for you before we start some form of, do we have to interrogate, you know? Honest, I could talk about that and all of this for, you know, it's a thesis, but that all came from that experiential learning. So, yeah.

Yasmine Yeah, I know from speaking with social workers in the UK, it is built into their system to have support mechanisms, case conferences, actual programs that are funded to help support the families of people who are at risk of developing into that significant situation. Is there not something similar in Canada where you have the wraparound support if you identify that someone's at risk of developing further down the system rabbit hole and, or is that just up to you to kind of pull together and refer to external systems? Do you talk to each other basically?

Dan Yeah, I know. So two kind of primary responses. One is, when you come into a system, say like a new city. And when I say new city, I'm saying, like I was born and raised around the city of Hamilton. And I'm not, by the way, I'm not picking on Hamilton in any way. I'm just, I happen to work there. When I went to work there, I had no Rolodex of these are your people, these are your systems, people who you can bring in. These are your service providers who would be the people you would refer to or reach out to and so on. So what's predictable about that is, okay, well, if you don't know what's available to you, then you're going to be working in isolation and thinking you have to come up with the solutions. So that tells us what we need to do. We need to better educate and, you know, way fast forward, in the system now, there are trainings. Let me make the point with this. Myself and another worker who started at, very similarly at the same time, I think she started like a month before me, we went to what was called Child Protection One training, six or seven months after we started. So here we are out in the community doing the work. They sent us to training, and when we were in the training, we were sitting across from each other. And as they were teaching us certain things we need to do, whether they were systemic or what might be referred to as clinical, we'd look at each other and go, oh my god, I gotta go back and go back to that family or go back to that file and undo something that I've done, because we should have known differently and so on. That's a clue. And so number one, the system is doing better with that in terms of how they're training new workers. The problem is they haven't stemmed the tide at the back end. So while people are in new worker training, a formal kind of new worker training and the spot is filled, the full-time equivalent is filled and being paid for, then the budget can only manage that much. And so there's no leeway, and whoever's left, so if you have 10 workers but three of them are a new worker training and they don't have, they're not approved to do certain things, then the seven are left to carry the burden. And that burden persists through the system. And then the other part of it is, is that still in child welfare, there is this underlying power imbalance that you just assume the minute you walk into the door. And I'm not saying, oh, I walked in and I assume I have power now. I mean, it just comes with the role and you bring to the table. And you have to learn how to neutralise that if you're ever gonna do any kind of relational work with families. And I would by extension say relational work seems to be like still a new concept idea to so, so many people. And it's at the heart of what I believe we need to be doing. And in doing the HEERO

work we've done in the last number of years, I think we've proven it and now need, it's not just HEERO, there's other people doing really good relationally based work now and meeting people at their feet in a particular way that has totally translated the experience, whether it's individual, with groups of people, and so on. So I ultimately, I learned the Hamilton community and was really good at, you know, "making friends" and learned, hey, if you develop the relationship with the person, yeah, there might be a waiting list, but you can navigate that waiting list differently and better. That being part of, you know, learning how to advocate and so on. But that took time. And so some of those early experiences, you would either carry it on your own back. So I would be at a family event on a Saturday or Sunday and I'd be out in the car communicating with families who I'd, because I couldn't imagine leaving them in the circumstance that they were on the Friday without having some kind of outreach and connection and, you know, to nurture them forward through whatever difficult circumstance they were managing. That's a good way to, you know, burn you out real fast.

Yasmine Yeah, for sure.

Dan So again. What's predictable in that I think is identifiable, and if it's identifiable, it's preventable. I don't, I still don't think we're doing a great job with that, but do we have wraparound services, family group conferencing, those kinds of things? We didn't when I first started, some of those, but we definitely do now. However, there are flaws, and the greatest one is that we have got to get out of our own ways. I was speaking to someone yesterday in the US and her name is BJ. Beverly Walker. And she talked about the ground game and she related it to American football. I don't know if you're familiar with American football, but basically you have a ground game where you hand the ball off to someone to run it, or you have an air game where you will typically score your points and you'll gain lots and lots, but you can't have an air game unless you have a ground game. And the way she articulated that to me yesterday was just like, it was overwhelming. Like, it was just brilliantly enlightening. We are still up in the air, in the air down with families and we need to get to the ground and work with them where they're at. And that sounds so cliché. I mean it differently as a verb and actioning it. Again, it really relates to what we do in HEERO now and how we continue to try and get better at what we're doing, but the foundational kind of principles that we follow, which are, there's nothing for anybody without them. Everybody has people who love and care for them. Everybody matters to somebody and someone matters to them. And there's a way that if systems can't do it, and for us in HEERO, what it is is do the relational work, create the opportunity for people to get back to community, get back to their people, get back to family, people who have been separated from and heal in family. Because what's missing is healing. We're actually pretty good at creating safety as defined by us, but our safety is often horror for young people and for families. What if we change it and focus on relational health and healing, and how will that guide us? And I can tell you, it'll guide us a whole different direction in a whole different way that ultimately, interestingly we've found, has created health and wellbeing for us too. And so there's a huge win-win in really taking a relational kind of focus in the work that we do, and starting with the ground game. So I think I got very tangential there, but ...

Yasmine I love it. I don't want to gloss over the fact you said you completed a master's degree. Was that by coursework or by research, and what were you looking at?

Dan Coursework. The focus was, guess what the focus was? Child welfare. And to be honest with you, I think, so I became very critical of academia, because what I learned over time was that it was in fact, so exclusionary that, and it created certain struggles for me. So let me try to make my point here. And this is, kind of connects back to the question about, you know, what was the focus of study? So I won't name the author here, but there's a particular author that

really, really bothered me. And the reason that it bothered me is everything he wrote, I could not understand. I couldn't read because he wrote in such a intentionally intellectual way and jargony way that I could literally read a paragraph and go back and go, I have no clue what he just said. And the whole idea in social work is to create accessibility, is to create equity. It's to be a participant in equity. And here, academia was actually screening out. If whatever he had to say, because I still don't know what he had to say, was really important, then why not make it accessible to the whole, so that everybody can understand it? And there's a reason for that. And we see it playing out in the world worldwide today. So I've really committed myself to trying to be accessible in any communication that I make or anything that I write, or I try to make even the things I'm thinking about and then whatever the outputs are to be accessible as possible. And so I took that on in academia because there's a parallel process in child welfare. Like, you know, you remove someone's child, for example, I know that's the extreme, but it happens far too often and way more than it needs to. And then we welcome them into this highly complex system called the court system. And over time, I learned a lot about that court system. And I actually think I had a certain, I'll call it for the purpose of this, because I don't like the word expertise, but a level of expertise in terms of understanding the court process, how it worked, the many, flaws in it, including like delays and and the things that were delaying when we delay within process and so on. And I took it upon myself to translate that to people who were involved. Now, they had lawyers and they would be told, you know, don't trust the system. And I agree with them. That's fine. But the intention was to meet them at the ground game and make it accessible. I would be called frequently to the court to sit with families and talk with them when something wrote, was put in front of them. And they're like, what does this mean? Like, what are you asking for? And then, you know, translating it and I'm saying, well, why are you asking me for that? And I would say, I don't even know. I don't know. Is it relevant? Is it something that's going to be helpful to change this? We should strike it. Let's put a line through it right now. I don't know why it's in there. And I'm sorry, it shouldn't have been in there. And so I've found that academia, there's an either or with it. And again, the criticalness I think is necessary. It's not to be critical of the people. It's to look at the system and say, wait, If we know something really good, let's make sure that everybody can access it so everybody can know everything good. There's a reason we don't teach financial literacy in secondary education or post-secondary education. I mean, yeah, you can take economics and so on. But why? Power is holding onto that knowledge to maintain wealth and, power and wealth. And I just saw the same things. So I focused kind of parallel on that. How do we make the process more accessible? How do we become more relational in our approach to the work? Although at the time I wasn't thinking in the research context of relational work, to me it's almost like newer. And just thinking about how can child welfare be more humane? How is the system designed? Like, how is it just designed now? Quick example, someone gets involved with a child welfare agency and their child is removed. Their child has a worker over here on the right, and that worker takes care of all the stuff over there with the child. They're in a foster home. They have a worker and they're way over here on the left, and somewhere in the centre is the worker for the family. And never did the people come together to communicate. Yet they hold the power over decisions about a family whose child has been taken from them. Someone tell me what the problem with that is. And so how could we change that? So those were kind of areas of interest and focus for me. And then how do you train that into practice? How do you make it a verb? An actionable verb?

Yasmine I think part of the issue in university settings is that translation to practice. And sometimes people can get so caught up in academia around the theory and the this is why we're doing things, but not having an actual impact. And unfortunately that was my experience as well. I absolutely loved doing my research master's degree. I had a wonderful supervisor who actually got it, who had worked most of her career in hospitals. So she understood the health context. And then I thought natural progression, PhD, let's continue that research, but just

broaden the context. And the supervisor, unfortunately, the wonderful Dr Rosalie Pocket had retired at that point and couldn't continue with me. And many, many things happened along the way, but the catalyst for me ending the PhD process was my supervisor saying to me at one point, you don't actually think you're going back to the hospital, do you? And I thought, the whole point of this is, what are we doing this for if we're not taking that information back to the people who need it and can benefit from the research or the information that we develop through doing this? So yeah, preaching to the converted a little bit in terms of just, it is really hard. It's hard to have people who are on the ground who are passionate about doing research actually develop that new knowledge, because there are so many barriers and there's so much gatekeeping, I think, unfortunately.

Dan So then draw the parallel to the people that we're in service to. And how does that play itself out? But with the very same dynamics and the same outcomes. And as I say that, it's still it's horrifying to me. You know, in the work that I do now, I learned from parents that the most isolating, overwhelming, disempowering experience of their lives, remember, isolating, lonely, is being a client of a child welfare agency. So you know, my first question is, well, why would we want that? Why would we want that? Never mind oh my god, what are we doing to people? And so if that's the case, wait a second, they're identifying, I would say a foundational unmet need in our approach that we need to change. And what is that? Well, we need to make sure that the experience is not disempowering, overwhelming and isolating such that their outcome is they feel lonely and disconnected. Oh, who feels lonely and disconnected? Oh, their kids when we remove them also feel lonely and disconnected. Oh, who else feels lonely and disconnected? The worker who's working in isolation who has their file and doesn't want anybody else in there because somewhere along the lines, maybe they did something wrong or should have done, and we're all carrying the toxic stress of this, you know, together. And when I say we, I do include the worker. I do want to make clear that it's the service that we need to be kind of focused on, because the truth is, is that if the service was different, and that's predictable so we can prevent it, so we can do something different. Then also, is there a way that the worker doesn't have to be alone, overwhelmed and so on? And the answer is yes, and we know how. And so then everybody's going to be healthy and it's going to be different and better? Yeah. What's the impact for society? And the impacts across the whole spectrum from everything, social emotional to financially, like the agency I worked in last when I was still within child welfare where we started to practice what I do now, we were a deficit agency for years. Every year we get a budget and we'd have to beg for money at end of the year, you know, to get through the year. And then there are local government or provincial government said look, based on statistics you as an agency are actually overfunded. So we're going to take away 2% of your budget for the next four years. So we went from a \$17 million budget to a \$15 million budget. So we're already in a deficit and they took that money away. But before that happened, just as it was happening, we said, let's do this work differently. Let's do this relationally based. And so we lost the \$2 million and we were a surplus agency. What? You lost \$2 million a year and you're, we're a pretty small organisation. Yeah, we did. And is that the reason that we did the work was to say, no, it was just a lovely outcome. But then it became an intentional kind of focus. Well, why? And the answers are very simple. Doing relational work, getting kids out of group care and into family-based care saved us hundreds of thousands of dollars. Having family connected with their kids and driving them to and from appointments instead of paying for volunteer services to drive people from A to B, but also from their home to A and from their wherever back to home and, you know, multiple kilometers and so on, we'll save money. And what could you do with that? Well, then you reinvest that into the system at the front door to do prevention work, and a very specific prevention work. And we went from having 244 kids in care to having 50 kids in care. Why? Well, because, oh, we were nice and we made things

accessible and we, is it that basic? And I go all the way back to Heather. The kid was hungry. So we fed him.

Yasmine Yeah. It's not hard.

Dan Was the kid capable? kid was capable all along. They were capable all along. They were just hungry. So they couldn't focus. And so they became agitated. And now what are they at? That's little Johnny. He's the troublemaker. No, he's hungry. So let's feed them. And if I may, that was the inception of HEERO and what I do now.

Yasmine How did you then develop what you have now? How did you make that really bold, courageous decision to step out of, I won't call it a comfortable system, but you know, a paycheck that you know is coming. How did you kind of take that on and think, okay, I can bite the bullet. I know what I need to do and here's how I do it. And here's the people I need to support me through this.

Dan Yeah. I'm not going to say it was easy, nor is it easy now, but it was probably the most necessary thing for me. You're so right. Like, I have five children and they need to eat too. And so you need to be able to balance those things. But I met a guy named Kevin Campbell, who is from the US, who founded the family finding process in the US about 25, 30 years ago. And I did some training with Kevin, and he just really, really inspired me in the thinking. And one day I was standing with him at a training. And here was the problem. We were training staff to do really a kin first kind of approach, right? Everybody has somebody, somebody who cares, who they matter to and so on, but training staff to do something progressive in a system that hasn't changed. When you're done that and Monday comes, there's a return to casework as usual. You have to have a way of doing that that's different. And so anyway, I was standing across from Kevin and we were talking, and we said to each other, if they can't do it, meaning the workers, or won't do it, and I think it's an element of both. Like, some will choose not to because they like the role of providing service to kids in care and being the worker for a kid in care. And I mean that. I know that could sound harsh, but it's absolutely true. Or they're so overwhelmed. I mean, the time to be able to do this work and so on and find family and connect them to family and nurture the relationships and so on. They just can't do it because they're carrying 25 families on a caseload. So if they can't do it, can the kids do it themselves? Can the longest kids in care who are, we're in service to, including extended care from 18 to 21 after they've become definably by law, young adults, who are isolated in a way that we can't even imagine. But we can now, because we've been through a pandemic and we've experienced the nature of isolation. We've seen people and maybe ourselves have felt, I certainly did during the pandemic, highly isolated, totally disconnected from certain things. And it had implications for my health. Well, you want to talk about, you want some expertise on that? Talk to kids who've been in care for, you know, their lives and who have been isolated by the system, who have been separated from everything they knew, their identity, the people that were important to them, the environments that were important to them. They know pandemic. And so the question was, is if we can't do it, won't do it, can they? And the answer is a resounding yes. And the what doing it is this. I'll use the analogy that if you're going to build a house, you need a foundation. So in our work, and I, this crosses child welfare to other sectors of service. The hospitals, I'm sure that you in hospital came across, for example, and I'll use young people introductory, but I'll speak to parents. You came across young people who showed up at hospital in acute crisis, who were unwell and needed some kind of intervention. When you were done whatever work you were doing in the hospital, and we met with a number of hospital workers around this, and we actually trained some in this work, there were a number of times where we would get like 911 calls and child welfare from the hospital, for the very same kid who came in and there was a

worry, and the staff, often social work staff, were calling saying, we can't keep this kid, but we're worried for them. And so you, child welfare, need to do something about it. And my response to that is, well, look at what we're doing in child welfare. How good are we doing? Is that the place it belongs? And by the way, who's the first person as a dad that I would want to have called if it was my son or my daughter who was there? And if it can't be a mom or a dad because of whatever circumstance, well, who else can it be? Instead, we default to systems and we think professions and professional response is the way to go. Well, how's that going for us? We have the greatest mental health crisis that we've ever had across North America. I suspect it's the same for you all. We don't have the resources to respond to these outcomes. Kids post COVID are grappling, but it all came from being isolated and disconnected. Well, if being isolated and disconnected was the problem, then being connected is the solution. But we don't do that in child welfare and we keep kids. So anyways, after that conversation with Kevin, it was like two things happened, to be honest with you Yasmine, and I don't know how much time we have, but I'd like to share really quickly a couple of stories. One is, the way I present this in my training, which I have the permission of the family to do is, this is a day in the life of a young person who was in care. She got up, she went to school, she met with a couple of teachers and a couple of social workers from child welfare because she was in acute distress. She had been in a treatment facility for socio-emotional overwhelmedness translated into a physiological response for her, which was seizures and conversion disorder.

Yasmine Yeah, I was going to say conversion, but these days it's also known as functional neurological disorder. But yeah, we used to know it as conversion.

Dan And so for her on that particular day, she saw, you know, four professionals in the morning who responded to her and then were able to calm her, and she was okay. She did not seize at school. After that, she had an appointment that the workers had to go back and pick her up to go and see a psychologist. So she's going to go and see another professional person. She wanted her mom to go. They went to try and find her mom and couldn't locate the mom. So they went to the appointment. And then when she got back, she had a therapist appointment. So she went to her therapist and then she went to her foster parents. So we're up to like seven professional or paraprofessional people that she saw that day. And then that night she went, taken by a one-to-one worker, so another person, to cadets, which she really liked. And she saw her cadet leader, who she really, really liked, so another paraprofessional professional. While she was there though, she became overwhelmed. She actually did seize, they called in paramedics. So two more professional people showed up. The paramedics, they wanted to take her to hospital. She didn't want to go anywhere near any institution. She was 15 years old. And so in sum total that day, she saw 11 different professional important people, important people that we thought were important to her and a few people that were important to her like her cadet leader. And the story goes as follows. The next morning she was found around 9.30 having taken her own life in the foster home. She'd hung herself, had suicided. So that's a horrible, horrible story. But here's why I tell it. So it's the next day, and I don't know this young person. I don't know her at all, but I'm assigned to oversee the investigation into her death, because it's a critical incident that needs to be investigated. And so I'm trying to reach my director, and I call him and he's uncharacteristically in his car. And so I said, where are you? And he said, oh, I'm at the funeral home. I'm here making arrangements for the funeral for this young person. And I said, oh, buddy, that's heavy stuff. Like, let me come and join you. Don't be alone, right? The whole theory, like, don't be alone. And he said, no, no, Dan, it's okay. 15 family members are here, and they're here and they're alongside me doing the planning. This is between 18 and 24 hours after this young person's death. And my question that came immediately to me was, what if we would have brought them around this young person earlier, because clearly they're capable of responding to her in need. She is in need of a final resting place and a plan for her

funeral and, and all of, you know, everything related, and they're doing it and they did it and they didn't need us. They didn't need my boss. And he said, I'm at the periphery. I'm just telling them, we'll do whatever we need to do from the periphery to support whatever you need for this to happen in the way that you want it to happen, because you're the experts on this and you're the experts on this young person. And then the day after the funeral was held and there were over a hundred people, family, kin, friends, none of us, cause we weren't invited. And it was that, in that moment, that it was one of those moments for me. Concurrently, I had started to supervise the department that oversaw young people who were 18 to 21, and so kids who were on extended care. And this story goes, I'm walking in the hallways, I hear an announcement for everybody in the agency to feel invited to come downstairs and share cake with this young person. I'm like, I wonder what that's about. And so the worker actually for the young person walks by me. I said, what's going on? She said, oh, we're having cake. So and so turned 21 today, and so we're celebrating their birthday. Well, how do we celebrate 21 in child welfare? Well, what we do is we put on our work boots and we shine the work boots while we light the candles, so when they blow the candles up, we kick their ass out to the sidewalk where we leave them for the rest of their life. And that's harsh. That's truth. And that's somewhere I've landed more, you know, in the more recent. And she had this piece of paper, and I said what do you have there? And she said, oh, we give this to every youth upon them leaving care. I said, oh, what is that? Can I see it? She said, yeah, you can have a copy of it. I have others. Here it is. It's part of our policy. So I looked at it, one page, and it had the phone numbers and contact information for homeless shelters, walk-in medical clinics, because we knew they were going to be sick, walk-in legal clinics, because we knew somehow they were going to be involved with the law, right? What we would call our welfare system here, Ontario Works, and food banks. Those are the five things. Now I have five kids. That is not the bar I set. And if that's the bar, the system was set, and it rocked me, Yasmine. It absolutely was a gut punch. And from that moment, I said to myself, I cannot do this anymore. This is what we're striving for, for these young people. Nevermind what we're striving for, for families and, and so on. And so, I got to work saying, wait, where are the apples? They need an apple. They need to be fed. What does that mean? And I actually, I locked myself in a room literally with a marker and a big whiteboard. And I mapped out this process, a kind of an initial iteration of HEERO. Hero is Helping Everyone/Each other Reach Out. The everyone is us, staff. We needed to shift from a place of trying to be the doer of all things for these kids and failing, and going home feeling like we failed because we did, and shift to brokering relationships, building their team around them. I use the analogy a lot of baseball. Imagine being a pitcher in baseball, going out to the mound and pitch, you're the youth and you look around you and you're right, whole team against you, and you look around you and there's no centre field or there's no left field or there's no third base. You're out there on your own. What are the chances of winning the game? And so how do we build a team around you?

Yasmine So do the services just stop at 21? There's nothing that kind of extends beyond that period to provide a buffer, nothing?

Dan At that time. Ontario has changed where basically they've extended extended care. They call it the ready set go program. We call it the ready set go away program, which is basically an extension over a couple of years of the same-ish thing. And the way it's designed, and I'm highly critical of it, because it doesn't work, so we should be highly critical of it, so we can do different and better. And this is what I'm trying to promote to our province now. And I'm actually doing, me and my team are doing some work in Ottawa right now with youth there, where we're actually meeting the deputy minister next week and hoping to impact them. But I just want to share a couple key points about HEERO. Remember I said Kevin and I were talking and we said, well, if we can't do it, can the kids do it? HEERO is youth led, youth facilitated. Now, initially it wasn't because we didn't have any youth who had gone through the approach.

It's not a program, it's a process. It's a way of doing casework differently. I mean, what we do is we bring youth of like lived experience together, and so they can see right at at hello, they're not alone. We feed them and we take them through a very intentional process where we help them shift from a place of vulnerability to a place of courageousness, to lean into this process of building their own networks and supporting each other to do that, because they're worthy of different and better. They're worthy of a better life. They are capable, they just haven't been able to reach their capabilities because of how we've designed the way we deliver system. But most importantly, at the foundation of that house, they don't have relational health and health to build on, to achieve academia, to achieve an education and employment and all these other spheres that we measure. In 1994, I started in child welfare. Ontario's child welfare system, young people who grew up in that system graduated high school at a rate of 4.1 out of 10. So 41% of kids graduated high school. Fast forward to current, 44% in 30 years. And we pump tons of money into liaise people and committees and no, a kid sitting in class not knowing where they're gonna eat, if they're gonna eat and where they're gonna sleep is never gonna be able. So right, go back to the ground game. And what we learned is let them do it. Create the format and create the forum for them to do it. And they can because they're capable, and they can because they get it. So in the process of HEERO, they courageously identify who is important to them. We use a number of tools we designed to help them do that. We help them identify what their unmet needs are, not what the system says. The system has a checklist of, you know, unmet needs. No, no. What do you really need in your life? Underlying which, and we prove this to them every time, is the need to be loved. They need to be cared for. They need to matter to other people in a way that they can be responded to, because guess what? We punch the clock in the morning, we punch the clock at night, and we should, because I have five kids to go home to and take care of. So if that's the circumstance, then let's make sure they have someone coming home to them to take care of them, to be available to them. Maybe not that they live with them, but maybe we look at relational health, and that we maintain grandparent relationships, aunt relationships, friends, neighbours, teachers. You wouldn't believe how many professional people sit and worry for years about particular kids who, when those kids go, I'd really like to connect to them, and we show them how to do that, they come, they show up. What do I need to do? Show up, just show up. And then you'll figure it out together. And they do. But there's also an intentional part of it where kids will say, well, I'm working on this or I need a Coke. So someone helps to get them a Coke and well, what's the big deal then? Well, the big deal is, that whoever did showed up for them, saw they had a need and met it with no conditions. They're not paid to do it. They just care about them. And so they do it. I don't know how to navigate. I don't know how to get my license. I'll take you driving, you know, whereas the system says we say, I get the liabilities. Oh, we can't do that. You can't drive the agency car. You're not allowed to. We don't have insurance. You can't drive my car. And you know, some workers will sneak out in the backwoods and take a kid driving and, you know, do that and take the risk of, because they really care about the kids. But What if we just bring it above ground and say, hey, who cares about this kid? And people step up, I'll take you driving. When? And what happens? Well, now they're in the car together and they relate, and they reform relationship and we help them do that. And so that's a real, real quick introduction to what we do in HEERO. But I want to make another point, which was the problem we had in HEERO, because we saw successes and we saw the kids coming out the other end differently and we were catching them kind of at the end, we then would look and there would be more coming. So I created Adult HEERO and that's that hello with parents. Parents who are isolated alone, bring them together. Take them through this intentional process. Do it together. Help each other build your own networks. And the other thing for both the youth cohorts and the adults is that they built community together around each other. And it's a community that's lasting. And a quick example is, I only employ for Youth HEERO, former kids in care and they facilitate and co-facilitate the workshops. Why? Because they have credibility with the youth, because they get it. They understand the story in a way that

we never will. And so to me, that was a way to take the leap of faith. Now, I will say this to your question, doing and developing a process that was about bringing people together just before a pandemic breaks out and having the pandemic, you know, separate people, was a very challenging thing. But we were able to adapt, which I think speaks to the power of a capabilities perspective. And I was fortunate to be connected to some pretty large systems in the United States who ran group care. And so kids were still convened. And so we taught people online to be our arms and legs and to do the delivering while we ran the workshops over, and then the post-workshop process of network meetings and peer support meetings and so on. So we were able to do that through the pandemic, which taught me that from a kind of an entrepreneurial perspective, if there's a will, there's a way. So, you know, keep going. And, you know, so the challenges, I think one of your questions was what are the challenges? The challenges are you have to have funding, because you got to eat. And so it's not as if it's like a government-based program that the government is funding at this point. Some smaller parts of the government will bring you in to do the work and they'll pay you and you do that contractually, but it's not something that is long, long-term reliable yet. But it's been growing. So where we started in the first years where I was literally making no money to sustain myself, I just bootstrapped it, we were able to grow it a little bit such that it was sustainable. I do not do this for the money. That's not the intention. I have not made very much money doing it, and I don't care. But what I do know is I have built and developed a process that has allowed youth now to work within it and develop tons and tons of skills while being paid and being paid well and valued for their work. And now we go to different places, like we have in the US, and we scale by building the capacity within the places we go to. And so now there's youth in different places of the world who've learned this, who have done it, who've reconnected with their people, who have regained their health. We talk about it as doses of relationship instead of, not that medication doesn't have its place, but if we dose that young person who's sitting in the, who is just laden with worry about the next meal and where they're going to sleep. And if we dose them with relational health, with people who they can go to, who can help them answer questions and be available to them and teach them how to cook. We make programs. We're going to teach you preparation for independence, and we're going to teach you all to cook. No, no, those kids are showing up for the meal. They're not really worried about learning anything except when's the next meal and how can I get it? And that's good. Those are adaptive skills that they've learned to survive. They're better survivors than any of us could ever be. But it doesn't work. Whereas, you know, if aunt so-and-so who, I can tell you, there are literal examples of like an aunt who lived literally two blocks away from this young lady who hadn't seen her for three years. But when we brought them into this process, when this youth found the courage to invite them in to their life again, took them driving the next day to start learning to drive. And now they have a relationship that kind of formed from that.

Yasmine It's almost like she needed permission to be brought into the circle.

Dan Yeah. Yeah. And we don't do that well systemically. And so it's flipping the system on its head and it's giving back the power we've taken away from family to them to say, look, we do a really crummy job at solving these problems. So how can you do it together? How can it be in an inclusive way? What if a whole baseball team of people was taking care of making sure a young person was safe in a circumstance instead of me from my office window, which I can see, you know, four by six and nothing else. It makes kids a heck of a lot safer, but it also makes families way, way, way more resilient and supported and feeling that they're worthy of different and better. And that's what our experience has been. And so, we've gotten some buy-in into the work we're doing. And the goal is now to scale it, like I said. I've been in contact with lots of folks in Australia too.

Yasmine Yeah. That's great.

Dan Hoping to, to find folks to bring it to. But yeah, I'm way healthier than I ever was in the context of, know, getting out of bed and, oh no, I got to do this again, to I can't wait to do this today.

Yasmine It's also the cognitive fatigue, which is the invisible stuff that people don't see. So, you know, anyone doing this work would have some level of you know, you've had to go through quite a lot in your own recovery journey, just to be able to manage all of this and take it on. And it sounds as though you're just doing remarkably well.

Dan Thank you. But I think, and just to make this point, we did some measure within an organisation of impact on the staff. And what we found was staff were doing and needing to do less crisis work. As a result, they were able to do more controlled, planned work, scheduled work and relationally based work. And what happened was, the staff was coming to me saying, the kids are not in crisis anymore. Like, my phone's not blink, blink, blink, blink, blink. And you know, this kid, he says, I said, they're still in crisis. I mean, I personally live in crisis every five minutes, but they're reaching out to their people and they're being responded to from a place of love and caring. And that's what they've always needed and wanted. So that's what they're reaching out to. They're not reaching out to you. What this permits for you to do now is work up the chain to support the relationships, help them navigate some of these kids and whether it's parents or extended family or friends or whatever they hadn't seen in a long time. And we had aunts and uncles showing up, hadn't seen the kids in like 10 years, and immediately activating around them and doing the things like I was talking about. The one young person I was talking about who was trying to get her license, her uncle kind of piped in, who she hadn't seen in 10 years, and he said to her, have you ever been go-karting? And she said, go-karting? No. And he said, okay, this Saturday we're going go-karting.

Yasmine Amazing.

Dan Hadn't seen her for 10 years. And immediately now they're going go-karting, which they did, and they had lunch together. And guess what? She actually drove a go-kart. And so she had the fun experience of that, but it also played into learning how to drive. And fast forward, she has her license now. She works for me. She's actually in her last year of university where, and I mean this sincerely, this is absolutely fact, about six years prior, I was showing up to work and my question about her to the worker was, is she alive? Is she alive? And now it's, how is she doing with fourth year in university?

Yasmine That's amazing.

Dan That's a lovely question to ask compared to the other one. That's a lovely worry to have. I'm worried that she's struggling in fourth year versus I'm worried that she may have taken her own life last night.

Yasmine Right.

Dan What do we learn from that? What is predictable from that, which will prevent and let's do it. And there's tons of research to support, you know, the wise, but to the staffing, their overtime went down, sick time went down, leave time went down and self-reported job satisfaction went up. And they became healthier. And so it's a win-win.

Yasmine That's really significant, because it means they can continue to do the good work. You've invested in people. You want them to continue.

Dan Yeah. Anyway, sorry. I could talk, and I will talk about HEERO nonstop, because I'm both, I'm proud of it, but I'm also ...

Yasmine So passionate about it.

Dan Exactly. Yeah. So I, I apologise if I'm kind of overstaying my welcome.

Yasmine No, thank you. Thank you. I'm mindful of your time, but you've also made me think of, there was a wonderful documentary that has come out in Australia, and it follows on the back of, so our Prime Minister, Kevin Rudd in 2008, delivered an apology to the Stolen Generations, our First Nations families. And this documentary follows four grandmothers who find each other and start a national movement to place extended families as a key solution to the rising number of, so beyond 2008, the number of Aboriginal children in care has risen, it hasn't gone down. So they're looking at hey, we already have systems that work, we have ways that work and we know that they work, we've used them for generations. Can you please just take this information, these ways of doing, knowing, being, and run with it and institutionalise this in your systems, because it works. We don't need to keep reinventing these things that are clearly not working and wasting money and time and people's lives, when we have this thing here. Please use it. So they actually came up with a document to take to services to say, please just use this as a guide, I guess, as to, it shouldn't be this hard. It doesn't need to be. Let's start from what we already know.

Dan And who knows better than them?

Yasmine Right.

Dan Like who knows better? They do. And so why are we imposing what we think is our knowledge on, I'm sure you're aware of, very, very parallel circumstance here in Canada where our Indigenous peoples are so well overrepresented in the child welfare systems. In the province you're in right now, 90% of young people in care are Indigenous.

Yasmine Yeah, that's so sad.

Dan But as a part of the population, and I don't know these exact numbers, but it's say 25% of the province is Indigenous, but 90% are in care. Someone want to explain that to me? Oh yeah, that's very explainable. Is it preventable? Yeah, it's absolutely preventable. So, we've had some movement, theoretical movements, federally and countrywide in our province right now. Indigenous nations are taking back control under Bill C-92 of governance and self-governance and delivering their own services and so on. And we've actually just offered to support some, offered because we are invited, not because we think we're smarter than or in a position, but we want to walk in lockstep with them and support what they want to do. So, and I'm not sure what kind of hope I hold there given history, but I'm to hold some and instead of sitting passively, see what I and we can do through HEERO to be a verb in that process.

Yasmine Yeah. I think also the process that you've developed, you were saying people are assessing the person's need, but it's from the person's perspective, not from the system's perspective. It sounds as though you've tied into that a process of responsiveness and a flexibility. So it's an acknowledgement that what someone needs now is not what they're going

to need in six months time or what they want. So there's ability to reassess, which in the child welfare system, at least in Australia, that's not necessarily the case. You do an assessment, you have your outcomes and that's the case until maybe 12 months and then you reassess. But it's also providing significant confidence to the care leavers that are helping to support this program to, coming back to that vocational rehab piece, I guess, around so many of these people are told it's too hard or you're too hard or you've started from nothing. What makes you think that you're going to be able to achieve what you want to? But you're giving people the opportunity to prove their capacity, and giving them the confidence to say, no, I can do more. I want to train. I want to study. And this person who works for you is a perfect example of that. So it's creating capacity, not just for the younger people, but for the older people who are then being the future leaders in this program.

Dan Yeah, and a great example is next week, where when we started in Ottawa, it was a very disjointed group. Because it wasn't a group, it wasn't a community of young people, where fast forward in less than a year, oh my goodness, I could go on about the things that have happened, and they've happened. So the kids, when they started to commune and were able to connect and have relationship and feel good, they said, this is missing for us, we want more of this. But they said, just not here. Don't bring us to this building. This building, like, you know, it's not where we want to be, the building being the child welfare building. And so we, separate from them, talked about, I wonder what we could offer them. And someone mentioned the Y, YMCA, as a possible place for convening, because access to health and intentional attention to health and so on. And so I said to them, this is like months ago, that's a great idea. Bring it to the youth. Don't decide for them, bring it to the youth and ask them what they would come up with. Anyway, so they talked with the youth and they said the youth were really excited about the idea. It was like, yeah, it's not here and it's bus accessible and lots and lots of good reasons. And then radio silence for months, nothing, like nothing happened. I would talk with them, do coaching, virtual coaching, cause I'm about 600 kilometers away. And I do virtual, you know, where are you at with this? What is the barrier, what are the worries, needs, barriers that are standing in the way of and frustration, frustration. So I finally got in my van, drove back up to Ottawa and said to the youth, how's that going for you? And they said, yeah, same old, same old blah, blah, blah. I said, fine, get in the van. And they got in the van and we drove to the Y and we created that day. They can do it. And now. There's a memorandum of understanding between these two organisations and how they're going to support it and so on. And they came together to do that. And I said, which youth did you bring? I said, none. I said, you're wrong. Get out of their way. Give it back to them. Give it back to them. They can do this. And that's what's at the core of this. And there's such a change management piece in terms of the thinking. And staff will say, well, we can't do one more thing. You don't have to do one more thing. That's the whole point, is shift from a doer of all things to brokering the relationships. They're capable. Create the opportunity for them to do the doing and they will do the doing. And then bask in the glory of health that flows from that, where you can move up the chain and help these kids achieve further. And it's there. Why do I share all that? Well, because now these same youth who are all over the place have the deputy minister of this province, coming to meet them at the ground on their turf. And god bless the deputy minister for actually doing that. Now, proof will be in the pudding, but these kids are going, like part of what we talked about is, you know, they're going to come with an agenda. So what is our job to do with their agenda? And the answer is throw it out and bring your own agenda. Like, come in with, you know, what are your needs? And where we've landed at is, no, they will have an agenda and that's okay. How is our agenda your agenda? And how are we going to do that? You know, and am I telling them how to do it? No, because they can do it and they're going to do it and they're going to do it great. And some things will come out of their mouths that may be a little unsavoury and some will be absolutely brilliant. They both will be brilliant. It's just some will be a little less tolerable.

Yasmine Yeah.

Dan But they will make their point. And I guarantee you good things will come from that. Why? Because we got the hell out of the way.

Yasmine Yeah.

Dan And so, yeah. And that's been my journey in social work where I was taught to get in the way through child welfare, go do this. And oftentimes it was doing to, and no, now how can I help them help each other? Just the way in my family, if X needs to be done, I reach out to whoever's important and can do that. And some things certain people in my network of people can't do. I don't care. I don't care what they can't do. I care what they can do. How can we bring them in? Where very often, you know, we'll chop them out. In a hospital setting where there's a young mom who is a middle aged mom, a mom who's given birth, dad's there, dad's not there. I don't know. And, but there are some issues. Well, let's hold a shower. Who would you invite to your shower? Then let's invite them in right now and let's figure out and put in front of them what these worries are and how can, what can you do? Well, I can do this, I can do this and I can do this, and we will build a, oh, someone's, who's missing? Who can invite them? Who can bring them in? And then have them build and build and build around. We don't have to be the experts on other people's lives. It's hard enough to be the expert on my own.

Yasmine Yeah.

Dan And that's what I'd learned over years of, I think, you know, trial and error. And I think it's ours. So to your point about the Indigenous communities in Australia, why are we not listening to the elders, the grandmas? Because they know. They know. And I think that's to me, and I worry, I've acted as a TA in university or I've gone back to do talks. And I worry about people who are coming into social work who are thinking about, like, I'm going to become a counsellor. And I do think personally, I've sought out, you know, therapeutic intervention to help through and work through, you know, different circumstances. I think it's very, very healthy, but I'm going to come with the knowledge to solve your problem kind of thing, and it's going to be taught in a certain way and then I'm to learn that and I'm to do that on or with you. I worry about that teaching. So, well, what's predictable is preventable in an academic context. And I think the academic context all of us social workers need to consider is one like this, where we can share, like some of the stuff that you were sharing about voc rehab. And I was just in my head, yes. Yes. I lived it. Like, I walked it and I learned how to be the good client. And that's true story. I learned how to appease and manipulate to figure out how to navigate the system, because I otherwise could get in the way and instead it became an avenue. So the more we share this stuff, the greater the discourse, I think the greater we'll get closer to feeding the hungry, giving them the apple they need, if that makes sense.

Yasmine Sure, yeah. And how do you make sure you get the apple you need? How do you make sure this work is sustainable? What supports do you need? Because I feel like this could completely encompass your everyday. Your thinking, your doing, you could spend all of your time doing this.

Dan Yeah, there is definitely. And it's interesting because my staff, who again are young people, we have an arrangement that is, we keep each other in check and they know that they have full permission to say whatever they're thinking to me about me. We have a very, very interesting kind of working relationship. And they don't have responsibility for me, let me be

clear, but it's, you know, through this kind of group supervision kind of process. The truth is, is that it is all consuming. It is at times almost pathological, because there's a serve and volley sometimes that you put in and you get back and that's really cool. So you, you, want to follow that momentum. But in the meantime, like I have three younger boys who play rep soccer. They're all in the middle of tryouts right now. Last night I was at three different tryouts at three different times in two different parks. And it is absolutely fall down exhausting at times. And so what I have taken to doing is, going back to HEERO, like I said, we talk, there are two primary areas of focus, intentional attention to relational health and intentional attention to health. And so my intentional attention to health, I can't run. So I walk. And I have like different, you know, issues and challenges from the fall. And so I have, it's not, you walk? It's how can you walk? And so I've taken up kind of a program of doing that and very intentional around specific times. And what I did was, and it came from the young people I work with, they said, Dan, you teach kids how to use a calendar as a tool, as the x-ray of their life to look at and to use, to give them information about where they can be intentional about health, and yet you don't do it yourself. And so they called me out. And I schedule it. I structure in, that no matter what time, this is when I, and the whole key word to all of that is intentional. You have to be intentional about tending to relational health and scheduling things in, because when you don't, so when I train, I will ask staff to come up, be courageous, like, be vulnerable and be courageous, and give me your day timer. Give me it and let me look at it. And they will do it. And to a person, I have never been given one that has anything scheduled in it other than intentional attention to health for everybody but themselves. Again, so it's walking that walk and trying to do that. And I admit, I very openly admit it's been pretty wearing. So the next stage, the next hope for stage for me is, because I'm the accountant, I'm the janitor, I'm the trainer, you know what I mean? The supervisor and so on, is to just get to that stage where we could have a reliable revenue stream such that I can then hire people, and people who can do stuff better than I can, to do this task or to do that task. And that will be an intentional attention to health thing for me, because it will relieve, you know, those pressure points. So those are the key next steps in the process. And I'm also trying to teach and train the young people, if they choose. I'm 61. I will never punch the clock on doing the work. I will continue to do the work, but will I retire and withdraw from doing it in a primary way? Yes. And so, but I don't want it to be until this can go forward. So who's going to carry it forward? But okay, well, how do I build a network around that to have that, how do I continue to build the community around that, which is happening in pockets where we're, bringing the work. So yeah, I think that's, those are some of the keys for me.

Yasmine Yeah. No, that's great. You've really had to think about it as you're getting closer to retirement age, I guess.

Dan Yeah. During COVID, I was a classic example and still am of the post COVID 30 and having to, like I put on some weight, and so really, you know, paying attention to that and doing it in a methodical way. See, case management needs to be, I think, more about, so I am a case. We were talking actually in a conversation yesterday. We all have our own caseloads. And so asking, you know, one person to be, you go onto their caseload, just can overwhelm them. And that's one of the beauties of HEERO is that's not what it's about. It's assembling a whole bunch of people could be three people. It could be 20 people, whoever your people are and whoever you choose to invite in. But them taking just one thing on that needs to be done that the person can't get done. And then the fight flight kicks in and they get angry and frustrated and throw a book or they just run away from it all and withdraw and, you know, close the curtains and, and slide into a, you know, depressive type state or whatever. It's about, you know, building your home team. Everybody has a home team. And what I've learned is that intentional attention to health is about a lifestyle. It's about choosing a way of living and also then having the resource to be able to do that. And that's the part of the missing link for these young people.

And so for me, it was being intentional about methodically attending to health, not getting on a bike and riding, you know, for two hours a day that I can't sustain and that'll break me down and I can't do that. But what can I do and how can I commit to doing that over time, and slowly whittle away at the problem while increasing my sense of health. And that theory, I think, is applicable to our work, no matter what field.

Yasmine Yeah, it's a discipline as well. Well, I guess I am mindful of your time as well, but you've been so generous in communicating so much of your experience through all this. And I'm so glad that you had some really wonderful mentors as you were going through your social work training and your placement experiences. And that community development that you had access to in schools and really meeting the needs of people and identifying, not assuming, but identifying what people might be needing at that time, and helping to move through systems while really impacting change. I'm very grateful for the transparency around the difficult stuff and the things that were really challenging for you, and just setting boundaries and feeling as though you're responsible for everyone and everything all at once, and really then harnessing that experience and knowledge and energy into hopefully, what I'm hearing, is making child protection safer for everyone. Safer for the kids, safer for the families, safer for the workers, and just trying to be an important person, or even just finding who the important people are for these young people or young adults that are going through the systems. And hopefully then through HEERO expanding that process to other areas and countries in future and impacting even more systems and more workers so that it can be sustainable, and so we can continue to do the work that's really important, instead of having people burn out at an early stage. And even if they don't burn out, perhaps they're negatively impacting the people that need the support because they just can't cope. So, thank you again so much for all of that and sharing it and being so vulnerable at the same time, and just giving us a bit of an insight into the Canadian experience and context as well, which I think is really insightful.

Dan Thank you. I wonder if I could just make a quick comment before we wrap.

Yasmine Please.

Dan Because I am very overtly critical of the child welfare system and I believe we need to be. We need collectively to be. That doesn't mean I'm critical of the people for the most part who work in it. I think that there are incredible human beings who step up to the plate every day. And I've met a lot of people across the world. I've worked directly with a lot of people across North America who are doing this work. And part of the work when we were in a couple of states in the central part of the US, was really about building allies in the child protection system, but they needed permission to be able to tell the truth and their truth. I can remember people just breaking down in training. And one person said to me out in front of everybody, I had to write a hundred plans of care to meet the timeframes for compliance, but I never met with one person attached to those plans I wrote for them. Like, what courage it took for that person to put that out there. And she did, she put it out there because she wants better for her families and she wanted better herself. And so I want to acknowledge the goodness of the people in these various systems. We did a lot of work with young people in the youth justice system in the United States, just showing how cross-sectoral it is, and there's people who work hard within that system and want nothing different than to never see those kids again, because that would be a measure of, you know, success for them. So people are trying hard. I just believe we're working in some bad systems, some systems that were poorly designed. Some of them were intentionally poorly designed, I believe. But I want to acknowledge those people. And the last thing, and I remember when you sent the note about this, you were talking about, you know, are there any resources? And there have been really important people, like Heather I talked about,

that taught me in real very real context. Dr Bruce Perry's work, I want to say that out loud, has been really, you know, motivational for me. Dr Gabor Maté's work, Dr Maté who says, don't ask the question why the addiction, ask why the pain. And there's a group of people that I've worked with through my career, Kevin Campbell and Liz Rendell, very influential people. I encourage people to follow Pale Blue Dot. But most importantly, listen to the kids. Listen to the kids, they've been my best teacher. And one of the young people I met recently, she said, I want to take my experience. She's 27 now, and I want to take the pain and use it for purpose. She said, so my life is about being moving from pain to purpose. Man, that's going to live with me forever. Pain to purpose, from pain to purpose. We need to listen to those who are pained, who are in pain and who we have pain, and turn into purpose. And so I wanted to personally end at that, because the voices of youth has been the greatest teacher for me. And the voices of parents who have been involved with the system as well. But intimately, the voices of youth have been powerful. So I thank you so much for inviting me. I appreciate, I know I told you I was verbose.

Yasmine I think this is wonderful. Thank you.

Dan I appreciate the time you've taken to spend with me. And share the word about HEERO in Australia. Encourage people to reach out.

Yasmine Absolutely. And if you've got any other resources that you'd like me to pop in the show notes, please send those through and I'll make sure they go in.

Dan That sounds great. Sounds great. Enjoy the rest of your trip. Be prepared to be bedazzled.

Yasmine I'm sure I will. Thank you.

Thanks for joining me this week. If you would like to continue this discussion or ask anything of either myself or Dan, please visit my Anchor page at anchor.fm/socialworkspotlight, you can find me on Facebook, Instagram and Blue Sky or you can email swspotlightpodcast@gmail.com. I'd love to hear from you.

Next episode's guest is Harleen, a social worker from India, awarded the Master's of Social Work university Gold Medal, with more than five years of experience in the community development sector.

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