FAMILY GROUP DECISION MAKING:
IMPLEMENTATION IN CHILD WELFARE
IN THE PROVINCE OF ONTARIO

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FAMILY GROUP DECISION MAKING: IMPLEMENTATION IN CHILD WELFARE IN THE PROVINCE OF ONTARIO

BY

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ABSTRACT

The Ministry of Children and Youth Services has embarked on a Transformation Agenda that suggests a fundamental re-orientation of child welfare services in Ontario from an expert-led model to one which promotes family participation in child welfare decision making. Family Group Decision Making, also referred to as Family Group Conferencing, is an approach that encourages collaboration between child welfare workers and the family group (which includes the immediate family, relatives and friends). Alongside child protection mediation and Aboriginal approaches, Family Group Decision Making forms one of the Alternative Dispute Resolution (ADR) mechanisms advanced in the Transformation Agenda as outlined in Bill 210.

While Family Group Decision Making does facilitate conflict-resolution and will ideally significantly reduce the time spent in court over any one case, or even in some cases, successfully divert cases from court involvement, it's fundamental purpose is as a planning tool for the family to make decisions for the safety and well-being of a child designated as at risk or in need of protection. With the advancement of the Transformation Agenda in Ontario in November 2006, it is anticipated that Family Group Decision Making will be implemented as a service in many of the fifty-three Children's Aid Societies in Ontario, and that it will be particularly useful in high-conflict, high-complex cases, although it may also be utilized in other contexts where decision making regarding a child's future is needed.
The purpose of this study is to examine how Children's Aid Societies are implementing and carrying out the practice of Family Group Decision Making/Family Group Conferencing as one of the three approved Alternate Dispute Resolution methods required to be considered under Bill 210, and to examine the degree to which each of the programs studied provides a service that adheres to the Family Group Conferencing Model for Ontario.

The study is based on indepth, face-to-face qualitative interviews with approved Family Group Decision Making coordinators involved with child welfare agencies in Ontario. The interviews explored Family Group Decision Making program design and implementation factors. Findings indicate that programs are closely adhering to the Ontario model, and that overall the coordinators who provide the service are extremely positive about this approach to working with families. Issues of debate include whether coordinators located “in-house” jeopardize the neutrality of the program, and if identifying Family Group Decision Making as an Alternative Dispute Resolution mechanism to be utilized particularly in high-conflict, high-complex cases denies other families that would appreciate engaging in such a process as early on as possible in their involvement with child welfare.
DEDICATION

This thesis is dedicated to my sisters,
Betty and Janice,
who together were the catalyst behind my pursuit of post-secondary education,
and have supported me and encouraged me throughout.

For this, I thank you.
I love you both so much.

In memory of
Carol Elizabeth Ann Fyfe (Betty) December 24, 1943 – September 7, 2008
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INTRODUCTION TO FAMILY GROUP DECISION MAKING

Family group decision making, also known as family group conferencing is promoted as an alternative approach to working with and engaging families in the child protection context. The goal of this approach is to allow families greater control over the decisions and plans made to ensure the safety and well-being of their children, and to foster greater cooperation, collaboration, and communication between child welfare professionals and the families they work with (Merkel-Holguin, 2001). A family group conference involves service providers and the extended family group convening in a decision-making forum to plan for the safety and well-being of a child designated as at risk or in need of protection. It is a means of developing partnerships with family members in which the immediate family, relatives and friends are invited to present to the relevant service providers a plan for the child involved with child welfare (Burford and Pennell, 1994; Connolly, 2006 as cited in Schmid and Sykes, 2007).
Section 2

REVIEW OF THE LITERATURE

Historical Context

The concept of family group conferencing has its roots with the indigenous people of New Zealand, the Maori, who have traditionally used family meetings as a fundamental part of their culture. The Maori people were concerned with the overrepresentation of their children within child welfare and juvenile justice systems (not unlike Native people in Canada), and how once absorbed into these systems, these children were lost to their families and their culture. Excluded from participating in the decision-making process pertaining to their children, the indigenous Maori were successful in advocating for a child welfare and young offender system that had its core collective decision-making by the child’s nuclear, clan and tribal relatives. In addition to addressing concerns about the nature and number of out-of-home placements, the FGDM/FGC process is aimed at broader issues, such as empowering families and increasing community participation and accountability. Conferencing was legislated as a mandatory approach in New Zealand in 1989 (Children, Young Persons and their Families Act) and is now being used internationally in child protection, as well as a number of other fields (Ridgley and Bogue, undated).

There are two themes that have emanated during the worldwide emergence of the family group decision making approach: that children do better when they can maintain strong connections to their primary caregivers and family of origin, including extended family networks; and that child welfare interventions
that assume the primary responsibility for care of children can often be
disempowering to a family and do more harm than good (Connolly and

Ontario Context

In Ontario, Family Group Decision Making remains a relatively new
approach.

The Toronto Family Group Conference Project was launched in
September 1998, a collaboration of the Children's Aid Society of Toronto and the
Catholic Children's Aid Society of Toronto, along with the Etobicoke Children's
Centre, and The George Hull Centre for Children and Families. Native Child and
Family Services became a partner in 2001 and Yorktown Child and Family
Centre joined in 2005 (The George Hull Centre website, 2007). The Children's
Aid Society of Brant began offering this service in 2002. Sites were subsequently
developed in Algoma, Simcoe and Middlesex counties.

In 2004, the Local Directors Section and Zone Chairs for Ontario
Children's Aid Societies, in response to recognition that the Ontario child welfare
system needed to be transformed, approved a provincial project for a committee
to examine and recommend improvements to child welfare practice within the
province (Dumbrill, 2005). As a result, in 2005 the committee recommended a
child welfare policy and practice shift in Ontario toward a collaborative child
welfare intervention model. The model involves child protection agencies and workers utilizing, wherever possible, social work skills to engage families and communities into collaborative intervention processes focused on the safety and well being of children (Dumbrill, 2005).

Collaborative child welfare, advanced in what is referred to as the Transformation Agenda, shifts the way the protection of children is conceptualized and delivered from viewing child protection intervention as a micro service delivered by a Children's Aid Society, to seeing it as a community response coordinated by a Children's Aid Society (Dumbrill, 2005).

The model for collaboration, which incorporates the use of family group decision making, was recommended to be adopted by all Ontario Children's Aid Societies and used as the basis for transforming the delivery of child protection services within the province. Bill 210 became legislation in November 2006 and the Transformation Agenda was implemented. “The beginning of a new era in child welfare was signalled with the proclamation of Bill 210 – Child and Family Services Statue Law Amendment Act 2006 – on November 30, 2006. These changes in legislation provide new opportunities for permanency, for improved court processes, and for services that respond to family needs and strengths while continuing to ensure that children are safe” (Lewis, 2007, p.1).
The New Zealand Model of Family Group Conferencing

In New Zealand, family group conferencing is guided by legislation that sets out principles for implementing the model. The New Zealand law “enshrines the extended family’s responsibility for their young relatives, upholds the rights of children, acknowledges differences in culture, and mandates state-community partnerships” (Walker et al., 2000, as cited in Pennell, p.16).

Since the inception of family group conferencing in New Zealand, many programs have developed around the world that have used and adapted its principles. Subsequent models have many similarities to the original New Zealand foundation. They all seek in some sense to empower families to participate more fully than traditional child welfare practice, they extend the scope of what is considered family to include extended family and people close to the family not related by birth, and they involve cultural sensitivity (Mandell, Sullivan and Meredith, 2001).

Family group conferencing focuses on family strengths and capacity to change rather than a view limited to problems and deficits (LeCroy and Milligan, 2003). Merkel-Holguin (2000) describes an increasing national trend to adopt FGDM strategies as consistent with several philosophical shifts within the profession of child welfare. Specifically, the FGDM model embodies family-centered, strengths-based, and solution-focused interventions, and shared responsibility for child protection amongst agencies, community and family.
Although the structure of the family group conference developed as a result of conferencing experiences in New Zealand, the guiding principles of all family group decision making programs are similar: everyone involved or affected by the issue should be encouraged to attend; every participant is given an opportunity to speak and express his/her opinions on the issue; every contribution will be listened to and considered; no participant is allowed to prevent another from attending, speaking, or being listened to (Moore and McDonald, 2000).

There are two key distinct components to a family group conference: referral and preparation, and the family group meeting. The family group conference coordinator plays a critical role. In theory, the coordinator has a distinct, independent, neutral role in conferencing by supporting both the family network and the professionals involved in voicing their perspectives.

Thorough preparation is seen as critical to a successful conference. Preparation is the task of the coordinator who receives the referral, gathers pertinent information and "bottom lines" from the CAS worker(s) and manager, helps identify persons to be invited to the conference, meets face to face with each person (family members and service providers) invited to the conference, prepares them for the conference (where distance prevents direct contact, telephone and written communication is used), organizes the logistics of the conference, facilitates and makes sure the conference runs well through its
different stages, monitors the implementation of conference plans, and
reconvenes conferences as necessary. Some of the earliest New Zealand
research showed that preparation and the ability of the coordinator had the
greatest impact on the outcome of the family group conference (Merkel-Holguin,
u.d.).

Also key to Family Group Decision Making is the process followed during
the meeting. Merkel-Holguin (2001) outlines four distinct phases:

*Welcome/ Introductions:* The meeting opens with a family chosen ritual.
Conference attendees introduce themselves according to their relationship to the
child. The FGC coordinator reviews the process, clarifies his/her role and helps
the group develop ground rules.

*Information Sharing:* The case manager provides a concise and non-
judgmental presentation about the family’s involvement with CAS describing the
risks that exist for the child(ren) as well as outlining concerns and strengths
observed in the family. Other service provider reports are read and provided to
the family. A speaker may also give a short presentation about a particular topic.
Questions raised by the family are answered and concerns regarding the risk are
discussed, until the family is clear about the risks to the child.
Family Private Time: The family group meets on their own (all service providers and coordinator leave the room) to develop a plan of service that addresses the safety and concerns for their children, guided by the “bottom lines” set by the Children’s Aid Society. It is this phase that sets FGDM apart from other conference or consultative processes.

Plan Presentation and Evaluation: Service providers are invited back into the room and the family group present their plan to the child welfare workers for approval. The Children’s Aid Society needs to consider whether the plan adequately addresses its concerns. The plan may need to be fleshed out.

While the original model (the New Zealand model) has been adapted to fit the specific needs of different locations and populations, most programs have a similar structure. The international literature identifies differences in the ways that conferencing has been adapted and implemented in different locations. Merkel-Holguin (2000) cautions that adaptations from the New Zealand model should be undertaken “cautiously and reflectively” and advises that “what should remain intact is not the prescribed FGC stages as in New Zealand, but the philosophy that underpins the approach” (p.227).

Comparative practices discussed in Burford and Hudson (2000) address program design issues that include contracting out, adherence to the principles of the New Zealand model, funding, and locating the co-coordinator. Marsh and
Crow (2000) examine whether family group conference projects should be run by a state agency or contracted out to local private agencies. Among the benefits of contracting out are that contracts made with organizations outside of the local authority are seen as a way of setting standards that can be more easily maintained. Contracting out also brings the advantage that the project is perceived as being more neutral, enabling partnerships with other agencies to be negotiated more easily. The coordinators can also more easily maintain their neutrality, resisting pressures to fit into the status quo of the system, or being co-opted by the state workers. There is also more clarity between the roles of the coordinators and those of the referring social workers. Among the disadvantages of contracting out are the difficulties of integrating the conferencing project into mainstream practices at the child welfare agency, and the vulnerability of the project to state agency budget cuts (Burford & Hudson, 2000).

Merkel-Holguin (2000) refers to modifying the way FGC programs are implemented to fit with local circumstances, while contradicting the theoretical and philosophical spirit and intent of conferencing. She refers to this as “model drift” and states that “if the integrity of the process is affected, ultimately families are left vulnerable to the same interventions that have led to their dependency and failed attempts at permanency” (p.225). Sivak, Green, and Kook (2000) discuss how family group conferences can easily get converted into poor child protection practice, with a gradual decline in adherence to basic principles and the return to more familiar practices. Ban (2000) supports this concern when
reporting that in Western Australia, only one of four family group conference pilot projects remained loyal to design. Ban (2000) promotes family group conferencing as an integral part of statutory child welfare practice with detailed specification of the steps to be carried out to plan and hold conferences embedded in legislation. Merkel-Holguin (2000) argues for practice guidelines supported by formal or legislated policy to ensure the efficacy of family group conferencing.

There is consistency in the views about the importance of adequately resourcing conferencing programs. This refers to adequately funding and supporting the work of coordinators, providing the support of services called for by conference plans, reducing child welfare worker caseloads so workers can prepare for and participate in conferences, and allocating funding for the orientation and training of coordinators and referring workers (Merkel-Holguin, 2000; Keys and Rockhill, 2000; Sundell, 2000; Pennell and Weil, 2000).

There is no agreement on the best way to provide coordinators for family group conferences. There are questions about where conference coordinators are located and, specifically, whether they should be placed in the same agency as child protection workers who refer cases to conferences. The related issue is the extent to which the duties of coordinators are distinct from the responsibilities of workers. Where coordinators are located is likely to directly affect the extent to which they are seen as neutral and independent (Burford & Hudson, 2000). In
New Zealand, the conference coordinator is from the ministry delivering welfare services. "This model is quite popular in that child welfare agencies/ministries are able to maintain control over the program. For coordinators in this situation, it can be a challenge to remain neutral and to be perceived as unbiased and fair while working in the same environment as child welfare colleagues. Also, there is the danger that coordinators could be asked to adapt the model to suit child welfare needs at the expense of meeting family needs" (Schmid and Sykes, 2005, p.14).

The Ontario Family Group Conferencing Model

Pennell and Anderson (2005) discuss model fidelity as meaning that an intervention is implemented in a manner that is true to its key principles and their practices. "The use of a model's key principles and practices is a way to specify what the model is without making it rigid. Thus, programs can adapt an intervention without compromising its nature and outcomes. These same principles and practices can be used to evaluate the implementation of the model. Such assessment measures model fidelity, the extent to which practice stays true to the model's essential features and carries out its important activities in a flexible manner" (p.110).

A family group conference is essentially a partnership arrangement between the state, represented by child protection officials; the family; and members of the community, such as resource and support persons; with the
expectation that each party plays an important role in planning and providing services necessary for the well-being of children (Burford and Hudson, 2000). The process of family group conferencing “attempts to find a balance with respect to statutory intervention that recognizes the right of family, including extended family, to participate in decision-making in regard to their children, and the agency’s responsibility to protect the child from abuse and neglect” (Burbank, 2005, p.183).

Family group decision making, along with child protection mediation and aboriginal approaches, is one of the three Alternative Dispute Resolution (ADR) options advanced in the Transformation Agenda as outlined in Bill 210. ADR is defined in the Ministry’s Policy Directive as “a strategy to streamline court processes and encourage alternatives to court. It focuses on a more strengths-based, inclusive and collaborative approach to resolving child protection disputes, and encourages the involvement and support of the family, extended family and the community in planning and decision making for children” (Ontario Ministry of Children and Youth Services, 2006).

While family group conferencing facilitates conflict-resolution and will ideally divert some cases from court involvement, and significantly reduce the time spent in court in others, the fundamental purpose of FGC in child welfare is as a planning tool for the family to make decisions for the safety and well-being of a child designated as at risk or in need of protection (Family Group
Conferencing Project of Toronto, 2006). With the advancement of the Transformation Agenda in Ontario it is anticipated that Family Group Conferencing will be implemented as a service in many of the fifty-three Children's Aid Societies in Ontario, and that it will be particularly useful in high-conflict, high-complex cases, although it may also be utilized in other situations where decision making with respect to a child's future is needed (Family Group Conferencing Project of Toronto, 2006).

Schmid and Sykes (2007) discuss the possible implications for Family Group Conferencing being defined as an ADR tool, or an alternative to court. Although they agree there is an extent to which FGC conforms to this definition and expectation, they feel FGC “should be acknowledged as an alternative means of engaging with all families involved with child welfare where planning decisions need to be made” (p.6).

The Family Group Conferencing Manual for Ontario (2006) is a 138 page document that includes the model described succinctly in two pages (see Appendix C). The rest of the manual provides an overview of the Family Group Conferencing model for Ontario, along with practice guidelines for coordinators in implementing the model. The manual was created by the Program Coordinators of the Family Group Conferencing Project of Toronto, with input resulting from the Family Group Conferencing Provincial Consultation hosted by the Ministry of
Youth Services on July 14, 2006. The Ontario model is understood to be the same or very similar to the New Zealand model.

The purpose of this study is to examine how Family Group Decision Making/Family Group Conferencing is being implemented at Children's Aid Societies in Ontario, and to examine the degree to which each of the programs studied provides a service that adheres to the Family Group Conferencing Model for Ontario. Specific issues addressed regarding the FGC model include its organization, its coordination, and implementation of the service.

The data gathered from the research participants were in response to the research question: How is Family Group Decision Making/Family Group Conferencing being implemented at Children's Aid Societies in Ontario, and to what degree are the programs studied providing a service that adheres to the Family Group Conferencing Model for Ontario?
RESEARCH METHODOLOGY

Design

Qualitative research methodology formed the basis of this study. This type of approach "allows important analysis dimensions to emerge from patterns found in cases under study without presupposing in advance what the important dimensions will be" (Patton, 1990, p.44). Qualitative methods "are particularly oriented toward exploration, discovery, and inductive logic" in data collection and analysis (Patton, 1990, p.44). This type of approach seemed appropriate for my project as it fit well with the exploratory nature of a study intended to learn more about conferencing practices in Ontario. Data for the study were generated through personal interviews with family group decision making coordinators.

Prior to commencing the study, approval was granted by the ethics committee of McMaster University to conduct the research.

Sample

The target group studied was selected on the basis of purposeful sampling. The aim of purposeful sampling "is to select information-rich cases whose study will illuminate the question under study" (Patton, 1990, p.169).

Participants were recruited utilizing the Ontario Family Group Conferencing Coordinator Roster available on The George Hull Centre website. At the time, the site listed sixteen approved coordinators with an additional seven
coordinators in training. The approved coordinators were contacted at the e-mail addresses provided on the website. Note that this is a public website which made it ethically acceptable to approach the coordinators. Coordinators listing their names on the website along with their e-mail addresses gave implicit permission to be contacted by the public.

As a result of the promotion, six interviews were held and analyzed for the purpose of this research. One of the six interviews was a joint interview, as a Program Supervisor attended and participated along with the FGDM coordinator. This made a total of seven participants. All seven participants were Caucasian women.

Three of the participants (Margo, Jane and Mary\textsuperscript{1}) are full-time employees of the Children's Aid Society that they provide the service for. All three provide the service on a full-time basis. Two of these coordinators hold supervisory/middle management positions within the agencies. The third coordinator did not hold a management position. She remained part of the agency bargaining unit. Coordinators who are employed by the Children's Aid Society they provide the service for are referred to as 'internal' coordinators.

Three of the participants (Tanya, Pam and Martha) are employees of three different agencies that have been contracted to provide the service for a Children's Aid Society. These coordinators are considered to be 'external'. Two

\footnote{All names used in this study are pseudonyms.}
of these coordinators worked full-time for their agencies, but had other roles as part of their employment, providing the coordinating service on a part-time basis only. The third coordinator was a part-time employee whose only role at her agency was to provide the service. She worked approximately three days per week.

Background of Coordinators

Margo has an MSW degree. Prior to becoming a FGDM coordinator she worked first frontline and then in a management position at the Children's Aid Society. She was seconded to the full-time position of Family Group Decision Making Coordinator. She had been providing the service for two years, since 2005.

Tanya has a background in Alternative Dispute Resolution - she is a mediator and arbitrator, with "lots of training in that field". She has a certificate in conflict management mediation and a graduate degree. She has a counselling background in violence against women and advocating for women and children. Tanya had been doing conferences for about one year.

Pam is a Registered Social Worker with eight years of child welfare experience plus fifteen or so years in children's mental health. She had been employed by her agency for nearly two years as a wraparound facilitator. She gained training in the process of family group decision making, which she
described as her passion, and reason for coming to that agency. She had done five conferences through to completion.

Mary had one year child welfare experience prior to becoming a family group decision making coordinator. Prior to her work in the child welfare field, she had spent a lot of time in Justice, Social Services and Education. She was trained in justice forums by the RCMP and had worked as a coordinator for youth justice forums – a sister program to family group decision making. She has a degree in Corrections and a minor in Sociology, with a second degree in Conflict Resolution. She is registered for mediation. She was previously an addiction counsellor. She has Life Skills Coaching Training. Mary had done over 20 conferences in two and one-half years. Mary was seconded within her agency and started in the program as the first and only coordinator in January 2005.

Jane had been an employee of the agency she provided the service for off and on for 27 years. She had worked in nearly all of the departments including foster care, intake, family services and child care. For nine of those years she was a supervisor. She has a two year college diploma in social services, a BSW, and a certificate in mediation from a university. She was in hired July 2006 as a coordinator. She began doing the family meetings in December 2006. She had completed four conferences, with three more in progress.
Martha has a Bachelor of Education Degree. She had previous experience doing program coordination that is family centred. She does not have a child protection background. Martha was interviewed jointly with her program supervisor, Brenda.

Instrumentation

Qualitative data were collected through personal interviews. A detailed interview guide (see Appendix B) was used to form the basis of the information collected during the interview. It was provided to the participants in advance by e-mail at the time they were initially contacted to participate in the research. The interview guide “provides topics or subject areas within which the interviewer is free to explore, probe, and ask questions that will elucidate and illuminate that particular subject. Thus the interviewer remains free to build a conversation within a particular subject area, to word questions spontaneously and to establish a conversational style” (Patton, 1990, p.283). The interviews took the form of a conversation rather than a structured interview, with the interview guide being used as a reference to ensure that the areas of interest were covered, and providing some structure to the process.

The interviews were recorded in their entirety using a digital recorder. Full typed transcriptions of the interviews were obtained. The first transcription was done by me. Due to time constraints, subsequent transcriptions were done by two separate paid clerical services.
Data Collection

Qualitative data were collected during six interviews. Three of the interviews were held onsite where the coordinators' offices were located. One of the interviews was held at the agency that coordinated the program. These sites were all within a 90 minute driving distance of this researcher. One interview was held in a restaurant at the Toronto airport. Another interview was held at a restaurant in the city of Toronto. Both of these coordinators had travelled to Toronto for the purpose of attending a family group conferencing related meeting and had agreed to meet with me while they were there.

Each of the interviews was between one hour and twenty minutes, and two hours.

Written consent was obtained from each of the participants, and each participant was provided with a copy of their signed consent form (see Appendix A). Informed consent "emphasizes the importance of both accurately informing your subject or respondent as to the nature of the research and obtaining his or her verbal or written consent to participate" (Babbie, 1995, p.454). As part of the consent the participants were informed of their right to end their participation at any point during the interview. Additionally, they were advised of their right to refuse to answer any question.
Analysis

According to Patton, “the purpose of qualitative inquiry is to produce findings” (1990, p.371). “The challenge is to make sense of massive amounts of data, reduce the volume of information, identify significant patterns, and construct a framework for communicating the essence of what the data reveal” (1990, p.372). Content analysis is the “process of identifying, coding and categorizing the primary patterns in the data” (Patton, 1990, p.381).

The information obtained for this report was examined from a “cross-case” perspective. This strategy “means grouping together answers from different people to common questions or analyzing different perspectives on central issues” (Patton, 1990, p.376). The interview guide acted as the framework around which the data were organized, with answers from different people categorized under the topic headings.

I began this process by reading through each of the interviews, identifying key words and phrases (Patton, 1990), and making some preliminary notes in the margins. For example, one of the key phrases I identified at the outset was ‘external coordinator’. As a result of identifying this word I prepared a preliminary note ‘location of coordinator’. I read through each of the interviews again, and sorted the responses using the interview guide as the framework. I subsequently merged the responses of each of the participants together, again, using the
interview guide as the framework, and clustering the data according to the research guide questions.
FINDINGS

The data gathered from the research participants were in response to the research question: How is Family Group Decision Making/Family Group Conferencing being implemented at Children's Aid Societies in Ontario, and to what degree are the programs studied providing a service that adheres to the Family Group Conferencing Model for Ontario? The data obtained through the interviews with the participants are grouped under the following headings: Adherence to the Ontario Model, Training of the Coordinator, Benefits of Internal versus External Coordination, Concept of Neutrality, Maintaining the Neutrality of the Coordinator, Funding, and Measurement of Success. Quotations from the participants are used to support the data and to allow for their information and perspectives to be emphasized.

Adherence to the Ontario Model

All of participants interviewed clearly felt they were providing a service that was representative of The Ontario Family Group Conferencing Model (see Appendix C).

One participant (Mary) walked me through the process of a typical family group conference (although she states with respect to each individual conference “they’re never typical, they’re always different”).
The process starts with the referral from a children’s aid society worker who has consulted with a supervisor. Mary then meets with the initial family members (parents/caregivers of the child/ren of concern) along with the children’s aid society worker to describe the service.

Initially a Children’s Aid worker calls me and says I’ve talked to my supervisor – we think that this would be a really beneficial case – can you come out and talk to them? I don’t need to know anything about them. So I go out and give them a general spiel....I just give the information – I give them the pamphlet – I answer any questions – and the Child Protection Worker is there because I’m not going to answer child protection issues or things about the file.

Mary leaves the family with the consent form for her program, explaining that the service is voluntary. The parents/caregivers and children over 12 are asked to sign consents in order that information pertaining to them in the CAS file can be shared with the coordinator for the purposes of a FGC. The consent allows the coordinator to then share this information with other invitees to the conference (Family Group Conferencing Manual).

So I say to the families – here is the referral – the consent form for my program. This is voluntary so I don’t want you to sign it right now. I want you to think about it and make sure this is right for you.
The referral is official when the family signs consent. Family members (including immediate family, extended family, and whoever is considered kin to any of the family) are then prepared for the conference itself.

Mary discusses the three phases of the conference:
Prior to the first stage (*information sharing*) she describes the family's option of doing their own opening ceremony. This is a ritual chosen by the family group, such as lighting a candle, or saying a prayer (Family Group Conferencing Manual). Then as coordinator, she facilitates going around the circle of conference participants and establishing their relationship to the child/ren and the participants' hope for the day.

#### Even if the family opens the meeting whatever way they want to – I always do “what’s your hope for the day” and they introduce themselves in terms of what their relationship to the child is – the children are.

**Phase 1: Information Giving**

...the first part of the meeting is the sharing of the information from the Society, the family asking questions [of the service providers or the CAS about the information provided with respect to the family and situation], *clarification*, service providers giving information – answering questions...
If the family chooses, service providers are invited to this part of the meeting to present about an issue or issues relevant to that family.

And also they decide what service providers they want in that first part too. I've had different people come in from different agencies and talk about what it means to be bipolar, alcohol and drugs, domestic violence...

Guidelines for the second part of the conference, the family's private time, are also established during the first phase.

And then we talk about the second part [of the meeting] and how that could be respectful and what they need to happen for themselves to have it safe for them – or comfortable for them as best as possible. So the family comes up with their own list and then we're off to the second part. Just before the second part there is usually a meal...

Phase 2: Family Private Time

The second part is family private time, which we do not participate in - no professionals...

Private time is the time during the conference when the family group meets alone to develop their plan. Service providers do not participate in this family group caucus. Family group members meet privately for as long as they
need to, and inform the service providers when they are ready to proceed to the final phase of the conference (Family Group Conferencing Manual). Mary identifies that one of the reasons professionals are not included in the private family time is to ensure that the meeting and the plan belongs to the family.

...because you want them to make sure that it's their meeting and that - we're all wonderful as you know - service providers - but we like to direct things and the direction we think they should go so you know – I want that family to feel like at the end of the meeting it's their plan – not someone else's.

Mary also identifies confidentiality, the ability for family members to feel comfortable to say what they want to each other, and that family members know each other the best, as reasons that no professionals are present during private family time.

And also confidentiality right? They need to feel free to say what they need to say because they all know each other. They know what the ins and outs of that family are. They know what's been going on. They've been there 24/7 you know, so they should feel comfortable to say what they need to say at that meeting.

The professionals can re-join the family once the plan is made.
....Once they have the plan down then the Society is welcome to come back in and I come back in with them....I've had where service providers will come back and the family is okay with that – they've been in the first part and the family says we're happy to have them back in the third...

Phase 3: Review of the Plan

The third stage - the plan is presented. And then the Society says yeah we can live with that – good, good – or they can say, you know I don't think we can agree to that the way it's written up. You know you might have to clarify it or we don't understand what you mean by that, and then they may have some more private time to develop their plan and then hopefully by the end of the day we've got a plan.

In order to be accepted by the referring workers for approval, the plan needs to address the service providers' concerns (Family Group Conferencing Manual). After the plan is accepted and the conference is over, the coordinator is responsible for writing up the plan and ensuring it is distributed to the participants. Her role is then complete.

Then I write it up and send it out and my job is usually finished. And then it's up to whoever they've developed in their plan with the Society to get that going.
Training of the Coordinator

How the participants were trained differs depending on when they were hired to provide the service. All of the programs affiliated with the participants were set into motion prior to the implementation of Bill 210, when Family Group Decision Making/ Family Group Conferencing became one of the three approved Alternate Dispute Resolution methods required to be considered in child protection cases.

When engaging in family group conferencing, children’s aid societies are required to use conferencing coordinators who are on the provincial roster developed and managed by The George Hull Centre for Children and Families. Only family group conferencing coordinators who meet the criteria outlined in this directive are eligible to be on the roster. According to the policy directive, a family group conferencing coordinator on the provincial roster must have a post secondary degree or diploma in the social services or children’s services plus training, both basic and advanced, and mentorship in the principles and practices of family group conferencing provided by The George Hull Centre for Children and Families as the provincial training resource. In addition, The George Hull Centre requires that coordinators “subscribe to Family Group Conferencing philosophy” (The George Hull Centre website).

Margo (internal) has been providing the service for two and one-half years. She was mentored in by her predecessor at her agency (who was trained
by the Toronto project) and grandfathered in as an approved coordinator. Margo never actually took the two day mandatory training through The George Hull Centre. She has since observed the training, and is in fact a provincial trainer herself. Margo identifies the current training requirements to become an approved coordinator. They include attending a two day training curriculum and a mentorship. Once approved coordinators are listed on the roster on The George Hull Centre website.

To be a coordinator you need to take that two day training and you need to be mentored by somebody who’s approved as a mentor. So it’s like a field placement. Like a social worker program. So to be mentored come and observe me and a conference I do, then I will come and observe you and a conference you do. And to be put on the roster, I need to be able to say yes this person has completed a conference (Margo).

The goals of the basic training are for participants to develop an understanding of the history, philosophy and benefits of FGC; and familiarity with the conferencing process. The goals of the advanced training are for participants to develop an appreciation of role of culture in conferencing and to develop and enhance skills in preparing children, family members and service providers; facilitating safety for participants; anticipating conferencing challenges; and preparing reports. In mentorship, the apprentice shadows an experienced coordinator and is expected to attend at least three meetings with family
members and two service providers, including the briefing by the referring worker. The apprentice is also expected to observe a conference (Family Group Conferencing Manual).

**Benefits of Internal Versus External Coordination**

Coordinators who are employed by the Children’s Aid Society they provide the service for are referred to as ‘internal’ coordinators. Coordinators who work for agencies independent of the Children’s Aid Society that are contracted to provide the service are considered to be ‘external’ coordinators. Both the internal and external coordinators identify advantages to their location.

One external participant reported that she felt the decision to locate coordinators internally was related to cost effectiveness.

> *I think it’s probably, my guess and I don’t know for sure but it’s going to be based on cost. Right? And I think the way Children’s Aid, I don’t believe that they’re getting a lot of money from the Ministry as of yet. So they’ve had to absorb it into their current budget lines which has been very interesting* (Pam).

Another external participant identified two different philosophies as determining whether coordinators are employed by the Children’s Aid Society or contracted out. She suggested the advantage of having an internal coordinator
is cost effectiveness, while the benefit of having an external coordinator is in keeping with the philosophy of having an external neutral third party.

I guess there’s two different philosophies. One is that it is more cost effective to take care of it internally and so the children’s aid societies would do it themselves and have a staff that is dedicated to that function. But in keeping with the philosophy of family group it’s important to have an external neutral third party. So I don’t have a vested interested. I’m not in the child protection realm of that work. It’s not my mandate (Tanya).

The same participant identified gaining easier ‘buy in’ and trust from the families as a benefit of being an external coordinator.

My mandate is strictly coordinating conferences and I think it would probably be easier for me to get buy in from the families and to really get through my position of ‘this is what I am here to do’ and it is easier for them to trust me. And one of the things I start out by saying ‘I don’t work for the children’s aid’ and you can see everyone relax ...they are very curious but they are not as guarded because they don’t think that it is a conspiracy once you make it clear to them that it is a separate function (Tanya).

The internal coordinators see definite advantages to being located internally.
One of the internal coordinators identified that it is a big asset to have the experience of understanding first hand what the systemic issues are, and of having a background in child welfare.

*I think that one of the largest benefits of being an internal staff is that I understand what systems issues may be. You're able to recognize and identify what are the system's issues that need to be dealt with or recognized, talked about ok, figured out so there's a lot of I think good things being from that organization and also having a very good in depth knowledge of child welfare. I think that's very, very helpful* (Jane).

Being able to advocate for the process internally was identified by all three coordinators employed by the children's aid society. One internal coordinator identified that a big part of her job is PR (public relations) and that agency staff need ongoing education about the process and service, and being able to do this is an advantage of being an internal coordinator that the external coordinators don't have.

*That's one of the positives about being internal – I can go to the office and say and bug them about I haven't heard from you or I need this information or what dates are good for you and I'm setting up this meeting now. Is there any cases you might have that you might think you want me to go talk to your families for you? I mean I can be a big advocate for the process right?*
The internal coordinators identified that both the internal and external models work, and that both have positives and negatives. One participant suggested that each individual community needs to decide what model works best for them.

*I mean every community; every agency needs to figure out what works for them best. So there may be agencies that say I'm going to do internal and it doesn't work for them – or people that take it external and then say you know what – this isn't working for us. Maybe we need to do it different or it doesn't work for us....I think people have to be open-minded about it.*

One internal participant emphasized that from her perspective being an internal coordinator works, depending on the coordinator.

*In my perspective it works. I think it's really, I think it depends on the coordinator as well. I really do. And you know how they're able to maintain that distance and it's always something that I'm checking with myself. But even if I wasn't internal, because I've been in child welfare for a long time I would constantly be asking, "Am I case managing right now? Is this my role? Is this my responsibility? And it is something I do all the time. Whether or not I be internal or placed in another agency I think that because I've worn those different hats, so it's something to me that has more benefits than disadvantages,*
because of the knowledge I have, because of my background. I think it’s more beneficial than potentially harmful (Pam).

Concept of Neutrality

There are a number of issues related to neutrality.

One participant identifies a difference in how neutrality is understood in New Zealand, where the model originated, and in North America.

New Zealand understands the neutrality part, as being separate from the protection function...They understand it as you do not have and never have any child protection interactions or responsibility for decisions for this family. That’s what they understand neutrality to be. It’s independent from that child protection mandate.

The participant identifies power as being tied in to neutrality in North America, and appears to struggle with the idea that a coordinator can walk the middle line between two sides.

I think in North America we understand that word differently. There’s a whole power thing that’s around it and you’re not on one side of the fence or the other, well you always are. I don’t care who you are, we’re human so...
The participant further explains that the concept of neutrality was understood differently when the FGDM process came to North America, but the understanding has since come around.

So I think it’s been misunderstood what that meant when it came here compared to the way New Zealand understands it. We’ve come to understand it’s...you can’t be either totally aligned with the CAS or totally aligned with the family. You need to walk that middle road, but it’s that ‘no child protection authority’. You’re completely separate, independent of the child protection authority (Margo - internal).

Another coordinator equates neutrality with objectivity.

The distance from the child welfare agency. They have a position and they have a hope and they have a way that they would like to see the children cared for. Where they’d like them to go. And then the family has a position. And they have plans of their own. And to be a true neutral party it’s not to buy into either way. It’s not to really get caught up with wanting the children to end up in either place. And not having a real opinion on the matter...It’s just staying entirely objective and neutral (Tanya - external).

One coordinator identifies neutrality as a value and philosophy of the model.
It is important to stick to the values and the philosophy of the model which means you need to be neutral. You know – it’s hard for you – like when I was on the third floor – I never heard anything about what was going on – so I didn’t get involved in what was going on with families but I see where that could be an issue and the farther away you are the better it is for you (Mary).

The same internal coordinator goes on to discuss the importance of being perceived as neutral by families.

I want to be perceived as neutral – part of which I am – because I truly do not represent Children’s Aid in my role. I represent the process – and I don’t represent the family in the same way. My job is to get them together – to come up with a plan – develop a plan. So I’m not there to judge – I’m just there to give information – help them prep - that type of stuff right? And then facilitate that day.

Maintaining the Neutrality of the Co-ordinator

All three coordinators employed by the children’s aid society discussed how their programs are set up to accommodate and protect their neutrality, in order that they can maintain an ‘arms length’ relationship from the child welfare agency.
Key elements identified by one internal coordinator are working from an offsite location, having a separate phone number, using letterhead with a different logo, not having access to the Children's Aid Society database of client files, being in a management position (but not supervising any child welfare staff) and reporting to a Director of Service, and distinguishing herself from the CAS protection role, by not referring to herself in discussions as "CAS" to the family members (as she would those in the child protection role).

I work from home and I have a separate telephone number and I also set up a, created a logo, I mean I use that letterhead kind of thing. I don't have access to the front line system. To the Children's Aid data base, I don't have access to the files, and I'm in a supervisory middle management position. But I don't supervise anybody. I'm on my own and I report to our Director of Services. And so that's the arms length kind of relationship you know? And although I've known and worked with a lot of my colleagues for many many years, I'm learning to separate myself and when I speak to family members I'll use, it's funny I'll refer to my colleagues as Children's Aid, but I don't refer to myself as that (Jane).

One coordinator identifies Ministry directives that are required of children's aid societies who employ their coordinator. These include being located in a building that is not owned by the Children's Aid Society, and answering to upper management.
Since the directive came out, I moved to another building and there is other things that we’re moving towards. Meeting the directives – there’s one – you have to answer to upper management right. So that will be something that is coming as well and there’s reasons for that because you’re not dealing with a supervisor that is always also doing other jobs (Margo).

All three internal coordinators discuss being upfront with families in telling them they are employees of the children’s aid society. They also report explaining to family members how their roles as coordinators are separate from the child protection authority.

They know I am an employee; I let them know right off the bat. I’m employed, they’re the ones that pay my salary but I work from home and these are the boundaries and these are the parameters (Jane).

I’m very open. I work for the Children’s Aid Society. Because I do, that’s something I need to be upfront about. But I explain I have a different job. I don’t see files, I don’t...The thing that all families hear, I’m sure when I tell them my whole blurb, is that I will not tell the Children’s Aid what we talk about or other family members...And I can just see them relax and that’s the end of it...
The same participant goes on to explain that her goal is to separate herself from the child protection function, not to hide the fact from family members.

...So I'm not trying to hide it, but I am trying to separate myself from it. And those things help to separate me from the protection function of the agency. That legal authority, that child protection authority. But I'm very upfront that I work for them (Margo).

The importance of being clear with the family members that they do not work for the children's aid society in establishing their neutrality was reported by all three of the external coordinators.

I think if the coordinator is able to be very clear with the client that they are neutral and that this has been referred to them and they are responsible for just coordinating the conferences and are not involved in the outcomes or in guiding families on what their choices should be, then the family comes to understand that (Martha).

One external coordinator describes this as being an essential and critical element of the process.
We make it really clear right out of the gate that we are not Children’s Aid Society, we are asked by them to provide a service and contract with them to provide this service and that is extremely helpful. Once people really believe that, you know, you’ve got a different card, different address, different whatever you know. And I think that it’s essential, a critical element (Pam).

Funding

The participants raised a number of concerns related to the funding of their programs.

One of the internal participants identified that her agency began providing this service to families prior to Bill 210, just because the Society felt it was the right thing to do. The other two internal participants identified that their children’s aid societies commenced the service in anticipation of Bill 210, and were already providing this service to families prior to Bill 210. The funding of the service was implemented with Bill 210.

The Ministry funding was attached to Bill 210. And so that’s still very new. So it’s all getting figured out. So no, before that it was just something we did because we thought it was the right thing to do. And other agencies, there are a few of us across the province who were doing this kind of pre Bill 210. So we’re still waiting to see how that shakes out (Margo).
Two of the internal participants spoke of the uncertainty related to how the Ministry is going to provide the funding for programs depending on whether they are located internally or externally.

*I mean it's the Ministry really, and that's in flux as the Ministry struggles with how are we going to do this because there are different ways. I am in house somebody else is working for an external agency. So how is the Ministry going to manage all of that? They're still trying to figure it out (Margo).*

One participant identified controversy with respect to whether programs with internal coordinators will be funded at all.

*There is some controversy about that [the Ministry funding for her position] and what I'm hearing is that our regional office is saying that the funds will be given to non child welfare service provider agencies.*

The same participant identified that there is a communication breakdown and not all agencies were getting the same message with respect to funding.

*This is all just coming out now. In the past couple of weeks. So there's eleven of us I think in the province that are internal. And they're all not getting that message. So right now there seems to be regional differences. So we don't know where that communication is breaking down (Jane).*
One internal participant expressed upset with the uncertainty as to whether or not programs with internal coordinators were going to be funded by the Ministry at all.

Under the [Ministry] directives they said there were two ways you could do it [referring to locating the coordinator]. You could do it in-house or out of house... you could contract it out right to a different agency. Well that's the big debate because there's a hold on some of the things that are going on with my position because they are waiting for an answer... the thing is it's very upsetting because there are a lot of people trained like me (Mary).

Two other issues related to the uncertainty was loss of seniority and job insecurity. For coordinators located internally, if the decision is made that only external programs are going to be funded, and trained coordinators want to continue to coordinate conferences, they are going to have to leave their agencies to work as coordinators for independent agencies.

If it goes outside the chances of me doing it and my colleagues are slim to nil because they are going to be giving up all their seniority you know – within the agency and I'm not as bad as some people that have been there 20 years – they're not going to give that up right? Their pension and all that stuff. So because – initially they said you could do it either way and now things have kind
of started to change and they said oh now it has to be outside. So right now it’s put on hold (Mary).

The same participant expressed upset that a decision that had been made to fund programs with internal coordinators may be in jeopardy of being reversed.

Because people have already been put in place so you’re asking people that have already done the training – done all the work who are in-house right to all of a sudden now – well we’re not going to fund that anymore – we’re only going to fund it this one way – so you know you either work for another agency maybe you know and lose your seniority within your agency...But the thing that is upsetting to me is that you’ve come down with these directives that filters both ways and then you change it half way – you know down the pipe and you know within a year you’re changing things. And then you have agencies that have already done that ahead of time and were told it was okay once November [2006] came and now all of a sudden it’s not okay (Mary).

The abovementioned concerns related to funding were only identified by the internal coordinators. The concerns were not raised by the external coordinators.

None of the internal coordinators were able to explain how their programs were currently being funded.
Well the first year it was funded [2005] – there was no funding. We ended up just the agency picked up the slack. The second year [2006], I think there was some monies but not very much that they allocated for people. And then now there is funding. I don’t really know how exactly it’s – the funding is allocated and I think there is also some – like they are still working those bugs out somehow (Mary).

The external participants were clearer with respect to how their programs were being funded. One participant reported that with the implementation of Bill 210 the funding shifted from a fee for service agreement between the Children’s Aid Society and her agency, to the Ministry funding her agency directly for the service.

The first year when we launched it was purchase of service...So they [the Children’s Aid Society] purchased this service from us and paid it as a flat rate. We had the rate of if it went to completion to a conference it was ‘x’ number of dollars. If it only went part way it got reduced. If it was a non-admission in the end you just did some initial paperwork.

Then in December of last year [2006 – after Bill 210] the Ministry said we are going to fund the service provider directly and so they gave us a contract where they paid us and it became a funded program for that four month period. Now just this week we find out starting April 1st [2008], our funding is the same,
it's the Ministry who is funding us and they are giving us a lump sum of money which in exchange our targets are expected to be ‘x’ number of conferences...the money is all coming from the Ministry and within that money we are supposed to pay for all of the extra costs. So now it’s a fully funded government program (Brenda).

The other two external participants also reported funding based on cost per family/conference and number of hours.

The costs are based on the number of families. Cost per family...if it’s under 15 hours and it falls through, it doesn’t get to conference, we know it’s not going there then we don't bill them for that. If it’s 15 or over then we consider that we’ve fulfilled our obligation, our contract, whether it [the conference] goes or not (Pam).

Measurement of Success

It was unanimous amongst the participants that a conference has been successful if at the end of the day the family has come up with a plan that is approved by the Children’s Aid Society.

A successful outcome is that there's a plan the CAS accepts – that's the purpose of the conference – to make a plan that meets CAS bottom lines. That's
the purpose of a conference. To come up with a plan to keep the child safe that the CAS accepts that meets the CAS bottom lines (Margo).

Coordinators were also philosophical about other measurements of success that they view to be equally, if not more important than a plan being made.

This thing works, it really works. Like I say on a number of levels, it brings families together, it airs differences, it allows people to see each other in a different light, it allows families to learn about different problem solving, it helps youth and children understand that families value and are behind them and that’s what I meant about all the markers for success, not just the plan right? For the kids, wow all these people love me, all these people came here today for me, you know, little old me. In general they felt they haven’t, especially if they’re placed out of the home at the time (Pam).

Something you can’t measure is the people giving each other a second chance again. Families that are estranged because they, you know, the comments that each other has made about, like this would be assuming being separated families where they are no longer together or whatever and then coming together and then the evaporation of one sidedness is because you remember it is all for the sake of the children right (Brenda)?
Road Blocks

Co-ordinators were able to identify issues that they felt impeded the implementation of the Family Group Decision Making service. These included funding not being available to pay for resources required to implement a plan, systemic issues that are barriers to implementing plans, CAS not following through with plans, and lack of education of the workers in the child welfare agency.

One external participant identifies that the conferences she has seen through to completion have ended with a plan. However, it has come to her attention that some of the plans haven't come to fruition and actually been adopted.

*My understanding is that a part of that is a systemic issue that...it takes a long time so it is really hard to encourage a family to make the plan when you know that implementing that plan there is a lot of red tape involved and there is a lot of barriers for them. And in the mean time things may be falling apart – there are waiting lists for them to be on and if it doesn't work for them the plan doesn't come to be (Tanya – external).*

Two participants identified that family members have called them back saying that Children's Aid had not yet done things they said they would in the
plan. One of the participants pointed out how this risks losing credibility with families.

Another participant identified the need for ongoing training about the process to occur across the agency.

*Training has to be going on all the time across the agency. People misunderstand, turnover is high – people move. New workers don’t understand (Mary – internal).*

The same participant identified that a shift in how they practice is required of some workers.

*It is a big shift for CAS workers who have you know basically made the plans and developed them and have had the faith in the process right. Some of them it’s really hard to have that faith. Yeah – families have strengths and families have the ability to come up with plans where children aren’t going to be at risk, right (Mary)?*

**Family Group Decision Making as an Alternative Dispute Resolution Mechanism**

There is some difference of opinion amongst participants on the fit for FGDM to be considered an Alternative Dispute Resolution Mechanism under Bill 210, with some coordinators supporting it, and others being ambivalent.
One participant, who also facilitates mediation, thinks it fits as an ADR and is thrilled that it exists.

In my training in mediation it's almost akin to circle processing in mediation aside from the fact that in their actual decision making I'm not there to facilitate it. But it's very much in line with other forms of alternative dispute resolution in that it's a voluntary process, it's the family's option to exhaust their own resources, and draw within their own strengths and make their own decision and communicate with each other versus our judicial measures that we are typically using. I find it an easy fit. And I'm thrilled that it exists (Tanya – external).

Another participant, who has also facilitated mediation, feels torn.

So does it – you know – so I'm kind of torn there. I think it is a way – an alternative way of dealing with things which is less intrusive, it looks at the strengths of families which is important and that – it's a different way of – it's a shift in philosophy and empowerment and that kind of stuff and it's you know – it's a wonderful process but is it really – should they be under the same umbrella? I don't know? I don't believe – and treated the same way (Mary - internal).
One participant questioned whether if Family Group Conferencing is labelled an alternative dispute resolution mechanism if children’s aid societies will be inclined to use it only for ADR purposes.

*If it’s labelled ADR will agencies be more selective in how it’s used rather than opening it up to the whole branch of families’ problems* (Brenda – external).
Family group conferencing in Ontario has been greatly influenced by the development of the practice in New Zealand. The design of Family Group Conferencing Model for Ontario is based on the New Zealand model and is understood to be the same or very similar to this core model. Based on their familiarity with Canadian policy development, research, training, and their professional contacts across the country, Pennell and Burford (2008) found what they state appears to be considerable model fidelity of Family Group Decision Making in its child and family welfare application across Canada. However, they note that detailed studies have yet to bear out their perspective, and that “the diffusion of this innovation in Canada is worthy of careful study” (p.3).

This study addresses the research question: How is Family Group Decision Making/Family Group Conferencing being implemented at Children’s Aid Societies in Ontario, and to what degree are the programs studied providing a service that adheres to the Family Group Conferencing Model for Ontario? The findings of this research indicate that programs are in fact being implemented according to the Ontario model, and that all of the participants clearly felt they were providing a service that is representative of the Ontario model with respect to referral and preparation for a conference, the process of the actual conference, and post conference tasks (see Appendix C). However, the research findings also indicate the model seems to be lacking in several ways.
FGDM in Ontario: ADR Mechanism or Planning Process?

In Ontario, between 1998 and 2005 four family group conferencing projects were developed in various locations around the province. These programs were introduced as decision-making processes for families involved in the child protection system. Since 2005, in anticipation of, and in response to the implementation of Bill 210 and the child welfare Transformation Agenda on November 30, 2006, family group conferencing programs are being developed and launched across the Province of Ontario. Under Bill 210, it is now a requirement of children's aid societies to consider methods of alternative dispute resolution "as a strategy to streamline court process and encourage alternatives to court (MYCS, 2006)". Family group conferencing has been legislated as one of the prescribed ADR methods to resolve disputes between the children's aid societies and families involved in the child protection system.

The family group decision making process was not intended to be a conflict-resolution approach. FGDM is a process that was designed as a planning tool that actively seeks the collaboration and leadership of family groups in crafting and implementing plans that support the safety, permanency and well-being of their children (American Humane Society website).

The research identifies that in the Province of Ontario there is a debate about the use of family group conferencing as an alternative dispute resolution
mechanism, as opposed to a decision-making process for families. There are differences in the Ontario child protection legislation and the New Zealand legislation. In the Ontario legislation, it is only required that one of three alternative dispute resolution methods are considered. In New Zealand, the legislation states that if, following an investigation a child is in need of care or protection, a family group conference must be convened. It is not considered an alternative dispute resolution mechanism. In Ontario child welfare case managers and their supervisors, perhaps with legal consult, determine which families they want to offer family group conferencing to, and there is no prescribed time that the conference is offered to any given family.

In the consultation draft, Child Welfare in Ontario: Developing a Collaborative Intervention Model, that formed the basis of the Transformation Agenda, the use of Family Group Decision Making was proposed as a collaborative approach to working with families in the child welfare context. It was not described as an ADR. However, in Ontario, if child welfare agencies want the funding for FGDM, it needs to be identified as ADR because that is what the funding is attached to.

There will be a difference in philosophy if agencies are looking at Family Group Decision Making as an Alternative Dispute Resolution Mechanism than if they are looking at it as a collaborative process for families to make plans for their children. If the idea of transformation is to work collaboratively with families,
and from the outset to have the family's voice in the decision making, a conference will be offered to every single family where the child has been identified as being in need of protection. The children's aid society will call the family together – people can decide if they want to come. That's how it works in New Zealand. Bill 210 did not go far enough. It has taken a collaborative planning process recommended for working with families, and turned it into an alternative to the use of the judicial system for families.

Schmid and Sykes (2007) express their concern that “FGC may result in a resolution of conflicts, but identifying it as a conflict resolution tool dilutes the power of the approach. We fear that by understanding FGC's purpose primarily as dealing with conflicts undermines what the measure is essentially about. Ultimately, casting FGC as an ADR mechanism leaves the fundamental way that the child welfare system engages with families unchallenged” (p.10).

The Coordinators

The Ministry policy directive (CW005-06) requires that ADR be conducted by an impartial facilitator with no decision-making power. The policy directive states that where possible, ADR resources must be sponsored by and located within an organization other than a children's aid society. What makes this “possible” or “not possible” is not defined. There is some disagreement in the province with respect to where the coordinators should be located (internal or external to the CAS), and if programs with internal coordinators are in fact
adhering to the “original philosophical framework” that “allows the model to sit in a neutral space” (The George Hull website). External coordinators firmly believe that they are in a more neutral space than internal coordinators. Internal coordinators believe it is possible to maintain their neutrality, and that there are advantages to being internal.

This research identifies a difference in status identified amongst the internal coordinators interviewed. Two were in middle management positions, outside of the collective agreement of their agencies. The third was in a front line position. It can be assumed that this would be reflected in the pay of the coordinators, with middle managers receiving a higher salary than the front line staff.

The Ministry policy directive outlines the required qualifications and experience of persons facilitating alternative dispute resolution methods recognizing the “child protection disputes are complex and difficult to resolve due to the high level of conflict and significant power imbalances that may exist amongst participants”. Although the training program required to be taken by the coordinators is consistent, there is a range in what is acceptable in level of education entering the training program, diversity in professional backgrounds, and years of professional experience. These can all lend to inconsistencies in the quality of the programs offered.
Whether the coordinator is located internal to the child welfare agency, or in an external agency may also lead to inconsistencies between programs.

**Funding**

There were concerns identified in this research about how funding was going to be allocated depending on where the coordinator is located, and if programs with internal coordinators were going to be funded at all. Some internal coordinators were concerned about their future in this role if only programs with externally located coordinators are going to be funded. Seniority and job security were the issues.

Funding can influence the number of conferences that can be offered to families. Block funding is per conference; therefore, agencies that receive this type of funding will have a set number of conferences they can offer, putting a cap on the number of families that can utilize this service per fiscal year.

Funding can also influence the way conferences are organized and structured. There is concern that the philosophy and principles behind FGDM will be compromised when funding is provided per conference, and if coordinators are pressured by agencies to cut corners to stay within budget. For example, block funding of conferences has the potential to limit the number of people that a coordinator can meet with face-to-face in preparing for the conference because of the time involved. In addition, there is a difference
between preparing for conference in rural regions where there is so much more
time involved in driving to reach people, than in urban areas. The coordinator's
time costs money.

Measuring Success

All of the coordinators identified the goal of the day is to come up with a
plan that meets the bottom lines of the children's aid society, and deem the
conference successful if this goal is met. However, there are a number of
concerns with this being the only evaluation of success:

The plan is supposed to belong to the family; however, the plans are
shaped by what the CAS determines its bottom lines to be. There is a possibility
the plan can appear as if it was developed by the family, but it may have been
influenced by the expectations held by the CAS. Or it may be the Society is
already aware of a plan being formulated by members of the child's family, and
the case is brought to FGDM in order to have the plan come forward and be
endorsed by the entire family circle. The presence of the Society's position with
respect to bottom lines leaves the balance of power with the Society.

It is assumed that at the end of the day, the plan belongs to the family,
and that everyone (professionals, individual family members, and the family
group as a whole) are in agreement with the plan, feel it is the best plan for the
family, and that the family is going to buy into it. However, "within the family
structure, the assertion of power is inevitable as each member tries to get others to comply with his or her requests" (Berg-Cross, 2000, p. 464). Thus, members of the family group may not be in agreement with the plan, but feel outnumbered or pressured to agree. And in reality, the plan may work initially, but may breakdown in the long run. How the power dynamics play out in a family may contribute to the family group members not following the plan, or sabotaging the plan. If things don't work out, it can be deemed the family's fault because they came up with the plan. Ultimately, a failed plan delays permanency for the child.

The plan may not be the best plan overall for the child. Again, the plan may delay permanency for the child. For instance, if the plan is for adoption by a particular family member, there are processes involved with approving any particular family for adoption that may take months to determine. At the end of the day, if the family does not meet the approval standards for adoption by the Ministry, the adoption cannot proceed. Alternatively, the family may change its mind during the process. Both of these possibilities can put planning for the child back to square one, ultimately delaying permanency for the child.

The model does not incorporate follow-up by the coordinator once the plan is made and the conference is over. There is no place for the coordinator to check in to see how the plan is going; his/her role is finished once the conference is over. The plans may or may not be implemented by the child welfare agency,
or there may be systemic barriers that prohibit implementation of a plan. There may be an assumption that plans will be implemented quickly.

The model does not incorporate a method for paying the costs involved for the implementation of plans. A plan or parts of a plan can be delayed or not implemented if the funding is not available to pay for resources required to implement a plan, or if funding needs to be approved.
LIMITATIONS OF THIS STUDY

There are a number of limitations to this study. One limitation is sample size. The data from seven participants were used in this study. This limits data obtained. Another limitation is that all of the participants that volunteered to be interviewed can be considered seasoned coordinators working in established programs. All of the participants had a passion for family group decision making. A different perspective may have been obtained from participants in programs that are in the process of being developed. In addition, the data obtained in the study are limited to the Province of Ontario. Thus, the results of this study cannot be generalized and point to areas of future research.

An area of future research will be to look at who in the child welfare agencies are making the referrals to the family group decision making programs, and to what extent and under what circumstances is this discretionary? Are all families able to access Family Group Decision Making, or is it strictly being used as an Alternative Dispute Resolution mechanism?

Another area of future research will be to look at the success of the plans made including the degree to which the plans are being carried out, but also if the plans are not only successful in keeping children safe, but also in ensuring permanency and stability.
A practice implication identified in this study is the importance of educating the frontline staff and managers agency wide, about the importance of the family group decision making process.

In summary, family group decision making is a good example of one model of a practice that promotes the partnering of child protection authorities with the families they are mandated to serve in order to make plans for children that ensure their safety. The success of how FGDM programs are run will be influenced by many factors. These include how programs are funded, if the program is located internal or external to the child welfare agency, which families will be referred to the program, how closely the original model is followed, the amount of resources that are available to support family plans, and perhaps most importantly, the degree to which every person involved in the conference process embraces the philosophy and spirit behind the process. It is also based on the fundamental unifying hypothesis of restorative practices:

“That human beings are happier, more cooperative and productive, and more likely to make positive changes in their behavior when those in positions of authority do things with them, rather than to them or for them” (International Institute for Restorative Practices website).
Appendix A

May 22, 2007

Letter of Information/ Consent
A Study of Family Group Conferencing in Ontario

Student Investigator: Loralin Tansley
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School of Social Work
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Purpose of the Study:
I am interested in exploring how Children’s Aid Societies are implementing and carrying out the practice of family group decision making / family group conferencing as one of the three approved Alternate Dispute Resolution methods required to be considered under Bill 210.

Procedures involved in the Research:
I would like to ask you questions about family group decision making and the program that you are affiliated with. I anticipate the interview will take about 1½ hours. With your permission, I would like to audiotape the interview. In addition, I may take notes during the interview.

The interview will take place at a location of your choosing. In making arrangements we will take your privacy and the confidentiality of your participation into account.

Potential Risks:
It is not likely that you will be harmed in any way as a result of your participation in this study. Some of the questions may lead you to reflect on experiences or feelings that you find stressful. Also, you may worry about how others would react if your views were to become generally known. You do not need to answer questions you would prefer to skip. Below I discuss the confidentiality of your participation and the steps I am taking to protect your privacy.

Potential Benefits:
This research will be valuable in providing insight into how FGDM / FGC services in the province have been implemented to date, and will contribute to the body of Ontario and Canadian research in this area as Children’s Aid Societies across Ontario look to implementing Family Group Decision Making as part of child welfare reform and the 2006 Transformation Agenda.
Confidentiality:

I will treat your participation in this study and your responses confidentially. I will not be using your name in my study. I will not be using any information that would allow you to be identified. Nor will I be identifying the Children’s Aid Society for which you are coordinating conferences. Your privacy, as well as the privacy of your organization, will be protected.

Any data I collect will be accessible only to me and my supervisor. It will be stored in a locked filing cabinet at my place of residence. Once the study has been completed, it will be destroyed.

Participation:

Your participation is voluntary. If there is a question that you do not wish to answer, you can decline. You may withdraw from the study at any time with no consequence. If you choose to withdraw, your data will be destroyed immediately, unless you indicate otherwise.

Information about the Study Results:

If you would like a copy of the results of this study, please let me know and I will send you a summary once the study is completed, in approximately October 2007.

This study has been reviewed and approved by the McMaster Research Ethics Board. If you have concerns or questions about your rights as a participant or about the way the study is conducted, you may contact:

McMaster Research Ethics Board Secretariat
Telephone: (905) 525-9140 ext 23142
 c/o Office of Research Services
 E-mail: ethicsoffice@mcmaster.ca

CONSENT

I have read the information presented in the information letter about a study being conducted by Loralin Tansley of McMaster University. I have had the opportunity to ask questions about the study. I understand that I may withdraw from the study at any time, if I choose to do so, and I agree to participate in this study. I have been given a copy of the form.

_____________________________  ______________________
Name of Participant               Date
Appendix B

Research Interview Guide

“Family Group Conferencing in Ontario: A Comparison of Implementation Practices”

1. Organization
   Funding:
   1. Who provides the funding to pay for the coordinator(s)?
   2. Who provides the funding to pay for the costs associated with running the conference?
   3. Who provides the funding to pay for the resources required as an outcome of the conference?
   4. What are the costs associated with running the conference and the resources required as a result of the conference plan?

2. Coordination
   1. Who coordinates the service?
   2. i.e. Is the coordinator an employee of the Children’s Aid Society or contracted out?
   3. What is the criteria to become a coordinator?
   4. What training is available for coordinators?
   5. What supports are in place for the coordinators (i.e. organizational, emotional)?
   6. Where is the coordinator located physically?
   7. What are the roles and responsibilities of the coordinator?
   8. How is the neutrality and independence of the coordinator maintained?
   9. Is the conference coordinator and program coordinator the same person?

3. Service implementation:
   How closely does the program follow the Ontario model for Family Group Conferencing with respect to the:

1. Preparation phase
   1. How are families identified?
   2. What cases are referred? What cases are screened out?
   3. Who makes the referrals for a conference?
   4. What information is gathered from the referral source?
   5. How are conference participants (family members and service providers) identified and contacted?
   6. What information is gathered from the service providers?
   7. How are participants (family members and service providers) prepared for the conference?
2. **Conference**
   1. How are participants invited?
   2. Are the children invited to the conference?
   3. Where are the conferences held?
   4. What resources are available for participants i.e. transportation, child care?
   5. What are the stages of the actual meeting?
   6. How long is a conference?

3. **Post Conference phase**
   1. What follow-up occurs after the conference with the participants including family members, the referral source and the service providers?
   2. Who ensures the plan the family developed in the conference is carried out?

4. **Other**
   1. What are the road blocks to implementation of the service?
   2. How are conferences evaluated?
   3. How are outcomes of the service measured?
Appendix C

THE ONTARIO FAMILY GROUP CONFERENCING MODEL

Referral:
The conferencing process begins with referrals made by child welfare workers, in consultation with their supervisors and with key family members.

Preparation:
The effectiveness of a Family Group Conference depends on this stage of the process. The goal is to prepare prospective participants by providing them with information about the conferencing process, as well as the strengths and concerns identified by the service providers involved with the family. By widening the family circle and ensuring broader participation in making a plan for the child, the coordinator ensures the family’s support of the plan.

There may be relatives that live in other countries, other provinces or other parts of Ontario. It may be necessary for FGC to bring such family members to the conference as their input has been demonstrably valuable in the development of the plan for child. Further, the presence of the extended family at the conference increases the proximity, despite geographic distance, to the immediate family through a new understanding of the circumstances surrounding the child. This, in turn, may lead to more relevant and timely contact following the conference to provide ongoing support and guidance to all members of the family.

As well, the coordinator meets with all service providers who are engaged with the immediate family and invites them to the conference.

The time for preparing all participants for the conference typically extends from 25-50 hours. This depends on family needs, the complexity of the case, the number of children being planned for and the number of persons being invited to the conference.

The Conference:
The coordinator hosts the meeting. The conference itself is made up of three discrete stages.

Phase 1: Information giving
   a. The meeting begins with a ritual chosen by the family group.
   b. Service providers begin by outlining the strengths observed in the family and provide a concise and non-judgmental description of the risks that exist for the child. The child welfare team will also note their bottom lines.
   c. Questions raised by the family are answered.
   d. The family group may choose to invite a speaker/resource person on a topic that is useful to them in their planning.

Phase 2: Family Private Time
The family group then has a time on their own where they develop a plan to address the safety and well-being concerns for their children. The family group takes as much time as is needed to craft their recommendations.
Phase 3: Review of the Plan
The plan is then presented to the referring workers for approval. In the case of child welfare, the plan needs to address the service providers’ concerns for it to be accepted. The coordinator writes up the plan utilizing the family’s language.

The conference typically takes anywhere from 3 to 8 hours.

Post Conference:
The coordinator distributes the plan to all participants within ten days. The child welfare worker works with the family as defined in the plan and maintains regular contact with the family. Should the matter be before the court, the child welfare worker will ensure that the family’s plan is submitted to the court as part of the Plan of Care, stating clearly that this has been developed by the family and is supported by the Children’s Aid Society.

Another family group conference can be reconvened at a later date at the request of the family or the child welfare worker.
REFERENCES

American Humane Association website. www.fgdm.org


The George Hull Centre website. [www.georgehullcentre.on.ca](http://www.georgehullcentre.on.ca)


