The Family Group Conference: A mainstream approach in child welfare decision-making

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Abstract

The presentation outlines the growth of family-led decision-making practice in child welfare administrations over the last 15 years and locates the development within modern social policy objectives such as the right to participate, the right to social inclusion and the pursuit of practices that support independence and promote service effectiveness. The practice philosophy is described and key contrasts are drawn with professionally led decision-making constructs. Mainstreaming the approach is impeded by an uncertain mandate for the practice, compounded by worker concerns about safety and the difficult context within which statutory social work is practiced. The family group conference is a decision model at odds with the dominant professional and managerial paradigm and is thus a challenge to current power alliances in child welfare. The presentation traverses what might need to happen if the family group conference is to become the mainstream decision model in statutory child protection and care services.

Introduction

Since its introduction as the formal decision-making process for New Zealand child protection, care and youth justice services in 1989, the family group conference has excited interest around the world. Interest was initially generated by what appeared to be a fresh and unique approach in a field of professional endeavour where systemic and practice failures were high and results not encouraging. There was undoubtedly interest generated also by the fact that a minority indigenous people had been instrumental in calling into question, social work practice models that had developed in the United Kingdom and the United States of America and which were buttressed by a substantial literature. Despite the fact that the family group conference is a challenge to professional power and dominance, the approach seems to resonate with the core values of social work that have had a tendency to become submerged in the somewhat adversarial and coercive climate characterising statutory child welfare and child protection social work.

As the practice was embedded in New Zealand and was introduced elsewhere as an alternative approach to mainstream decision-making constructs involving professionals, the results of evaluations heightened interest. Legislative mandates have been introduced in South Australia, New South Wales and Queensland in Australia, and in the Republic of Ireland and in Northern Ireland. Family group conferencing, and variants of this approach, are being used in child welfare and youth justice settings in Australia, the United States, Israel, The Netherlands, and all the countries of Scandinavia and the United Kingdom. The approach has been adapted to work with adult victims and perpetrators of domestic violence; with adult offenders and their victims; with powerless and dependent communities; in schools where children face school failure or school exclusion; and with older persons facing a loss of independence or requiring sheltered care.
In many countries, realisation has dawned that intrusive social work practices that often result in removal of children from home and the replacement of their family and community with stranger care and institutions, has not produced good outcomes for children. Research and practice has highlighted that out of home placements are frequently unstable, with children growing up with a sense of loss and displacement. In England and Wales\(^1\) for example, a series of research studies looking at outcomes for children revealed an inadequate child care system, with lack of contact, placement drift and lack of concern given to childcare planning.\(^2\) Those who left care were ill prepared for family and community life. The evidence on the potential harm that children could experience by being in the care system was made clear in the new government guidance at the time of the arrival of the England and Wales Children Act 1989. Being in care was a risky business for children. ‘Admission to public care by virtue of a compulsory order is in itself a risk to be balanced against others. So also is the accommodation of a child by a Local Authority’\(^3\)

Many States have developed children’s law with principles accenting the importance of families for children and these closely match those underpinning the New Zealand Children Young Persons and their Families Act 1989. However, there seems to have been greater urgency in New Zealand about the need for a practice change around decision-making in child welfare, without doubt as a result of Maori influence in the reform process. While the NZ Act provided, in the form of the family group conference, a mechanism ensuring extended families a leading role in the decision-making process, the laws of other State’s are often silent on the issue of method. This has resulted, one could argue, in a continuation of professional method, but with attempts made to include parents in the process as a response to emerging notions of partnership. Few practitioners in these administrations would argue that there has been substantive change for families at the centre of child protection and care concerns, but rather an intensification of professional prescription despite the family participation principles embodied or implicit in their laws.

Apart from the evidence gathered by evaluations of family group conference decision-making around the world, there appear to be some strong social policy drivers for a change in decision-making practice affecting citizens of modern western democracies:

- Increasingly, *participation* by people in decisions that affect them is seen as a *right* rather than a professional option. This is often referred to as working in partnership, but too often partnership is experienced as being on professionals’ terms. True participation includes the right to information and knowledge held by professionals, the opportunity to identify solutions within a supportive familial and community context and the right to self-agency supported by respectful professional services. All these are key tenets underpinning the family group conference approach to decision-making. This right has been more substantially achieved in matters like resource management, property, and adult health services than it has in children’s services generally. In children’s services, participation is blocked when the right is not defined and when there are pervasive belief systems.

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\(^1\) Rowe et al 1989

\(^2\) Millham et al 1986; Packman et al 1986; Fisher et al 1986; Berridge and Cleaver 1987

\(^3\)
about the inherent dysfunctionality of “problem” families that drive the design of practice policy.

- There is strong social policy rhetoric about supporting independence and promoting self-determination and autonomy amongst the disadvantaged, the damaged, the demoralised and the disillusioned. This can only be achieved when people are trusted and empowered to take control over aspects of their lives that have brought them to professional scrutiny. Family decision-making constructs have seen energy released in seemingly hopeless situations and the growth of hope and self-respect in the clients of social services agencies. While people who have been systematically dis-empowered over generations of contact with professional systems may appear to want professional lead and domination, what they should have are experiences of problem solving that equip them for future events. Each experience of decision-making in child welfare services should move a family towards greater self-reliance and independence. The experience of self-determination is strongly linked to the achievement of self-actualisation, in individuals and in families.

- The social inclusion agenda incorporates notions of valuing diversity, eliminating institutional and personal prejudice and promoting equity of access to services and support. Families may suffer as a result of professional processes that do not make sufficient allowance for varying values, customs and beliefs. When professionals control the processes that define risk and need and determine service responses, families can be excluded from lines of support and strength available in their familial and communal networks. Agencies working within tight fiscal parameters can establish service access thresholds in order to control expenditure, with the result that they insulate themselves and the families they work with from the strengths, knowledge, supports and resources of the community. The family group conference experience is inclusive. The process reflects the mores of the family involved. Families can identify issues and plan a response within their own familial, cultural and community contexts. They are no longer reliant totally on the inadequate and sometimes inappropriate resources of the state in addressing problems but have opened up an access to resources usually unavailable to professional workers.

- Service effectiveness is a key issue in assessing the impacts of government expenditure. When people are involved in the decisions that affect them and have the opportunity to apply solutions that are relevant to them and their needs, they are more committed to the plans and more focussed on the outcomes to be achieved. When resources are limited, there is a need to ensure that those available are achieving maximum impact, and this is more likely when people are engaged in a central way in planning the appropriate service response for them and their circumstances. Responses to problems that use both agency and family resources in a planned and monitored way are more likely to be cost effective in the long run.

**The practice philosophy**

The family group conference is an outward sign of a commitment to inclusive, empowering practice by professionals who work with families. It is the mechanism
that enables the formal state and professional systems to interact in an open and respectful way with informal family and community systems. The model shifts activity from assessment and intervention based on a professional view of the best interests of the child, to exchange and action as partnering activities. It recognises that informal systems have knowledge and strengths that are usually unavailable to the state and professional systems, and that people need to own the solution to their problems if these solutions are to work.

The approach contrasts significantly with current professional orthodoxy in children’s services:

- Orthodox approaches to child welfare and child protection place heavy reliance on the decisions of trained professionals working in inter-agency committees. Professionals are the holders of expert knowledge and specialist skills and occupy the central position in interactions with clients. The workers apply recognised diagnostic and treatment models, which are based on positivist research. Such practice is based on a belief that there are known, objective, scientific methods and all expert workers need to do is apply the methods properly for their clients to experience improvement. In contrast, the family group conference decision-making model relates more with solution-focused, narrative therapy and strengths-based practice, all of which promote notions of collaboration, partnership, personal agency and active participation in social work practice. These approaches incorporate values that clients are experts on themselves, that their strengths are the starting point for helping services and that clients themselves, with their communities, contain the resources to solve their problems.

- Orthodox practice focuses narrowly on parents and their immediate household. Family participation is sought but can be experienced by family members as witnessing a meeting of professionals. In such environments participation can be promoted as a means by which parents (and often only mothers) can help professionals do their job. Families have to fit into decision-making processes that are conceptually and physically dominated by professionals. It is not surprising that when parents have intervention plans imposed on them in such ways, they evince very little commitment to them, a situation that can lead to an assessment that they have little commitment to their children. In contrast, empowerment practice with families recognises that children and families see their families in broad terms, with family and friends regarded as natural networks and sources of support, and ‘has developed around the notion of the family as a system, the strengthening and maintenance of kinship bonds, cultural relevancy, and the use of community

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5 Parton & O’Byrne, 2000, cited in O’Donoghue, 2003
6 O’Donoghue, 2003:35
7 ibid:36
9 Rowe et al, 1984; Millham et al, 1986; Ryburn, 1997)
and state resources to support families, concepts that resonate strongly with the core values of social work”.11

- Families caught up in statutory child welfare systems have little influence on the nature, type or amount of services provided for them, or on defining their preferred outcomes of professional interventions12. For those on the receiving end of “help” this lack of control can reinforce a sense of powerlessness and lack of any responsibility for the solution. In contrast, the family group conference approach rests on the premise that given the opportunity, given the right information and appropriately supported with resources and the professional expertise they require, families will make and implement safe and protective plans for children. Moreover, when families define their own services needs, the service mix thought appropriate by professionals will undergo change and will over time begin to reflect what works for families.

**Family group conferences in a professional system**

There is a growing body of promising research and evaluation evidence about the family group conference approach to decision-making. There is no evidence that children are any worse off under this approach. This practice achieves far higher levels of participation of parents and children than are achieved by standard professionally managed decision-making forums, and there are far greater levels of satisfaction and agreement about plans for children. All this is linked in the studies to better outcomes for children13. Families provide the most enduring relationships for children, and the importance of the maintenance and promotion of links is well documented14. The use of family group conferences is linked to increased use of kinship care as a placement option for children who cannot live with their parents and kinship care is itself increasingly connected to better outcomes for children15. It seems a little strange that, in the face of a growing body of knowledge about the effectiveness of the family group conference approach to decision-making and problem resolution in child welfare, it still faces official and professional opposition. The roots of this probably lie in the rather uncertain mandate for family group conferences; the anxieties and mindsets of the professional community; and in the context within which statutory social work is carried out.

**Issues of mandate**

Social workers will not mainstream family group conference practice until there is an explicit mandate for them to do so. Where there is no legislative provision for a decision-making mechanism the methodology vacuum is filled by structures designed by bureaucrats. Child Protection Committees and Adoption and Fostering Panels are the prime decision-making models currently operating in England and Wales, for example, and these are professional decision-making constructs. Attempts have been

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made to include families in these processes, but the levels of participation are not encouraging.16

There are three approaches to this issue of mandate:

1. **Legislation** – the principles of empowerment practice are enshrined in law, and there is procedural law to ensure these principles guide practice. The law conveys rights and obligations, powers and entitlements. Any action is subject to judicial review. The law, and not the professionals, sets the rules.

2. **Procedure** – the principles of empowerment are contained in guidance, and there is procedural requirement to act in certain ways. There are review mechanisms and failure to follow the procedures or apply the principles can be challenged.

3. **Good Practice** – the principles of empowerment practice are introduced to staff who are encouraged to work within a refocused practice paradigm. Professionals set the rules by and large, and control the gateway to this different practice approach. There is no appeal against a failure to apply the principles in day-to-day practice.

The good practice approach faces significant barriers. It takes years to make small inroads. It relies on enthusiasts maintaining their drive in the face of seemingly insurmountable odds. Of the three approaches to mandate, it is the most susceptible to reverses in support and right to resources when anything goes wrong. To be successful, it needs to traverse three distinct phases:

- **Deconstruction of the child protection discourse.** Use new language, promote new concepts, educate, debate and enthuse. Focus on changing professional attitudes and behaviours.

- **Deconstruction of the dominant processes.** Replace models of professional decision-making. Shift from assessment as a professional activity to exchange and action as shared activities. Involve users in developing strategy, planning services and assessing results.

- **Wider structural change.** The practice becomes entrenched as the preferred way of working. There is a response from policy makers and legislators. Professionals relinquish their gate-keeping role. There is entitlement and obligation.

In countries pursuing a good practice approach, no enthusiast would claim to be beyond phase one and most would say that stage one has not yet produced significant results. Pursuing a procedural mandate has some merit, but as the nature of child welfare and child protection work requires both multi-disciplinary and multi-agency engagement, achieving such a mandate across all the disciplines and agencies will not be easy and considerable resource will be needed to maintain and monitor any such agreement. This suggests the legislative mandate as the favoured option and the one

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that is likely to have the most pervasive and enduring effect. However, there are risks even with legislative mandates, as we will see later.

For reasons that had to do with fundamental changes in the New Zealand social, cultural and economic context in the 1980’s, the three stages described above occurred in reverse order. Wide community, cultural, professional and political debate led to a deconstruction of the former child welfare system, leading to new language, new concepts and new practice.

**Concerns about safety**
A reductionist concept of what constitutes family contributes to agency and professional hesitation about embracing family-led decision-making. Concerns about child safety are often rooted in pervasive belief systems within helping agencies about the functionality of “problem” families. How can this process be safe? How can families in which abuse has occurred be relied on to protect children into the future? How can notions of rights and strengths be reconciled with patterns of intergenerational violence and abuse? Such debate can lead to the professional conclusion that working to empower this family is not possible because the family is abusive or dangerous. Yet research is clear that working with children’s networks is pivotal to achieving good outcomes for children: “Protection is best achieved by building on the existing strengths of the child’s living environment, rather than expecting miracles from isolated and spasmodic interventions”\(^{17}\)

In examining the safety potential of family-led decision-making practice, we need to recognise that professional intervention is not without its own risk of significant harm to children. Agencies take risks when they intervene in families without seeking wider family involvement. The risks multiply when children are removed from their families. When agencies procure a child’s safety by sacrificing their familial and community connections, they act in ways that confound nature. Family remains of central importance to even the most abused children. Safety must be considered against the backdrop of the failures of the current professional decision model. Children risk alienation from their birth family and loss of their extended family connections. They experience grief and trauma as a result of loss and separation, denial of their cultural and familial heritage, higher rates of re-abuse, higher rates of placement change and a constantly changing stream of professionals who fail to form relationships of any real significance with them. It is a sobering reflection on the professional paradigm that a key motivation for family members who undertake kinship care is their awareness of the poor outcomes achieved for children in the public care system, and that some kin care-givers feel the need for advocates to help them defend children from their social workers\(^{18}\).

Professional and institutional concerns about the safety of the family group conference process may also reflect concerns about loss of control over decision-making. The achievements of traditional child welfare and child protection practice are not particularly inspiring, but traditional practice approaches are defended fiercely. One might argue that a family-inclusive approach to decision-making in child welfare only need be as good as the professional model, for it to be the method

\(^{17}\) DH, 1995
\(^{18}\)
of choice. In one English study\(^\text{19}\), however, social workers assessed the plans emerging from family group conferences as being better than would have been achieved in the traditional approach in two-thirds of the cases, and as good in one-third. Significantly, no plan was rated worse. The same study assessed re-abuse rates for children who were involved in an FGC were 6% compared to 16-25% for others. Another study\(^\text{20}\) reported that 78% of professionals thought FGC plans successful after 18 months to two years, a result that traditional practice might envy.

It is true that much of the abuse children endure occurs within their care-giving family. We also know that abuse perpetrators work to maintain a shroud of secrecy around their behaviour. Family-led decision-making seems to make these situations transparent. Informal knowledge within the wider family system when combined with professional knowledge and understanding seems to get to the core of household pathology, and lifting the veil of secrecy is, in itself, a strong protective factor.

Research has shown that when family members become aware of safety issues for children they themselves move strongly to protect children from further abusive experiences\(^\text{21}\). Seeing the family as multi-faceted with lines of strength and support rather than problems and deficits is not minimising risk, but placing it in context.

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**The practice context**

Statutory child welfare systems in the western world are in a state of perpetual crisis: child protection failures resulting in child abuse panic; loss of political confidence in agency capability; problems with attracting and retaining competent staff; rising rates of child abuse and neglect notifications outstripping agency response capacity; and burgeoning numbers of children entering, and remaining, in the care system. As a consequence, there has been a growth in agency prescription of the social work task and a growing aversion to risk as agencies seek to limit risk and have a means of allocating blame. Social workers are increasingly pushed towards socially controlling, defensive and conservative practices, creating a climate that limits innovation and creativity. The evidence of this is the continued use of stranger care, the growing numbers of children coming into public care, and the difficulty of achieving family re-unification in a conservative legal system.

Where once those who managed child welfare services had significant practice histories, today, services are likely to be managed by persons without practice experience or even practice understanding. The performance criteria set by politicians and bureaucrats have become the drivers of agency performance. Social work has been colonised in state child welfare agencies. Not only has it lost the right to lead and manage, it has lost influence in determining goals and has lost control of the means to achieve them, because of increased agency prescription of activity. Contemporary social work is increasingly fragmented, being shaped through managerial approaches that emphasise the desegregation, separation and quantification of the social work task. *Commodification* (Dominelli, 1996) has seen instrumental reason - an approach preoccupied with achieving efficiency and specific measurable goals - replace communicative reason at the heart of social work (Blaug, 1995). Compartmentalizing social work into the discreet measurable activities has

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\(^{19}\) Crow and Marsh, 1997  
\(^{20}\) Lupton and Stevens 1997  
\(^{21}\)
undermined holistic and integrated approaches to practice and weakened professional commitment to work collaboratively.

The very terms “social work” and “social worker” are being driven out of agency environments, replaced by terms more acceptable to managers. State agencies today fail as environments conducive to best professional performance, but rather are environments that feature high levels of anxiety and the fear of making a mistake. The puzzling thing is that no administration seems to have made an explicit connection between the crisis in its statutory child welfare agency and how it insists it is best managed.

It is difficult to introduce family empowerment ideology into practice contexts like this. Indeed, it has been difficult in New Zealand to maintain the ideology in the face of similar pressures. Under neo-liberal economic theory, the rhetoric of family responsibility is easily translated into a reduction of resources from the state. Managerialism not only colonises professional activity but also colonises ideologies that constitute a threat to control and performance. Increasingly in New Zealand we hear the family group conference process officially described as “shared decision-making” or “partnership practice” – terms which have a meaning for agencies and professionals in a number of other settings and which render the process understandable, and more importantly, manageable for them. In the process fundamental empowerment principles can be undermined. The integrity of the family group conference rests on agencies and professionals accepting that families will lead the process; that their role is to create the environment within which this is possible; and that they support and trust the process. This is a risky proposition for many bureaucrats and managers in today’s practice context.

Some things we could do

Social work and family group conferencing share the same ethical and conceptual foundations. The mindsets of professionals and the context within which social work is practiced in statutory services can create tensions between them, particularly when practice policies are set on the basis that serious problems are the domain of professionals. The family group conference is a development in child welfare that must be regarded as inevitable in a world where people and peoples have signalled they intend to take control of the decisions that affect their lives. It is one of a growing range of user involvement and user ownership mechanisms that should not have to be justified any more. It is precisely at those points where individual and family liberties and freedom of choice are in jeopardy, that we should make the greatest effort to ensure real participation and involvement.

Dominant power alliances in child welfare that seek to preserve professional and bureaucratic control over decisions that affect families have to be challenged. Indigenous and ethnic minority populations who are over-represented in agency statistics may become the catalyst for change, just as Maori were in the New Zealand context. Alliances of visionary politicians, bureaucrats and professionals can do much to reverse the worst trends of current orthodoxy, by releasing social workers to work
in ways they have been trained to do and by providing practice settings that support and affirm them.

Many social workers today feel like strangers in their own agencies. Social workers in hierarchical and disabling structures will not easily practice principles that require trust, flexibility and respect for people’s skills, if they themselves are not treated in this way. Social workers will not be able to work in an enabling way with families unless they themselves are enabled by the systems and structures within which they operate. Enabling social workers to move away from procedure bound and conservative practice will encourage the participation of families. To achieve this social workers need to be given greater autonomy and flexibility, which will ultimately provide the space for negotiation with, and support of, family networks as primary agents in the protection and care of their vulnerable young. Creating this sort of practice environment should be a major focus of management endeavour.

We have an obligation to involve families and communities more in defining means and ends. How can children and families influence the dominant child protection system for example? Do we have an adequate understanding of the perspectives of children around such outcomes for them as care by strangers or adoption? The participation of children is a key challenge for social work, where children are often bystanders while adults negotiate about them. How do we involve children, families and their communities in defining the way we work with notions of “risk” and “safety”? How can we promote systems of professional accountability for the experiences children and families have of our interventions and the outcomes that are achieved, instead of accounting against managerial standards and constructs of social work? In short, how do we use our positions of privilege in relation to families and their communities, to advocate for their right to involvement and participation in the design and operation of systems that affect them? Social workers have an ethical obligation to challenge power and structures that work against the interests of their clients. We are obligated to work through our professional organisations, in our practice settings and with our clients to bring about change. How can we continue to allow children to enter public care, to be placed with strangers, to be adopted with dispensation of parental consent, without involving their extended family as their right? There is surely a human rights issue for families here, let alone the children themselves.

Almost 60 years ago, in that period of massive social dislocation at the end of the second world war, British social work professionals aided in the despatch of thousands of children to the former British dominions of Canada, Australia and New Zealand. In their best interests, these children were told their parents were dead or missing and that they needed to take this chance to create a new life for themselves with a loving family in a new country. Now in their 60’s and 70’s, these former child migrants have discovered that much of this was artifice and deception. While many have achieved family reunification in their latter years, the anger and the bitterness remain for many also. I have no doubt from my reading of the files that social workers of the time thought they were doing the right thing and were willing partners with their agencies in a child maltreatment scandal which haunts all four countries today. I ask myself what we are doing today that in 50 years time our successors will look on with similar horror and disbelief? Will it be our adherence to professional control and power? Our belief in the effectiveness of our professional technologies? Our limited
concept of family and our ignorance of family network strengths and potential? Our
despatch of children in their thousands to the care of strangers? Or will it be adoption
from care, that seductively beneficent policy that seems well on its way to creating
another generation of stolen children we will mourn for in the future?

Makes you think, doesn’t it?

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