

Mthoko Sampson | University of West London, UK

FAMILY GROUP CONFERENCING: CARE AND CONTROL

Can the Family Group Conferencing model alleviate tensions between social workers' dual responsibility of child protection and family support? Social work involves making decisions that may leave families feeling hurt and victimised or conversely supported and understood. Understanding the dual mandate of care and control is crucial to making decisions which best protect children







n the UK and internationally, safeguarding legislation has, in the past, tended to reflect an emphasis on the protection of the child, rather than the preservation and strengthening of the family. This has left social workers' professional judgement open to question. Applying the Family Group Conferencing model helps to alleviate this tension between care and control.

Introduction

The paradox of care and control has been one of the defining narratives in children's social work for many years. Social workers have a responsibility to use intervention to support children and their families to help keep children safe whilst also using legal provisions to enforce safeguarding and promotion of the welfare of vulnerable children. Having removed children from their families in response to a range of problems for the past 150 years, the wisdom of this approach continues to be challenged. In the past three decades, models of best practice in child welfare have reflected greater commitment to family empowerment and family participation in child protection processes and Family Group Conference (FGC) has become a model of decision making that has been adopted widely

An FGC is a child- and family- focused process where family members, professionals and any other relevant parties come together to make decisions in the best interest of the child. They are also known by a variety of other names such as Family Group

Meetings, Family Group Decision Making or Family Guided Decision-Making. For this paper FGC is used as a common term. Doel and Marsh (2003) highlight FGC as a decision-making process, not an intervention and suggest it should be judged on its contribution to good decision-making, including such factors as appropriate respect and the engagement of relevant family members.

Family Group Conferences originate from the indigenous people of New Zealand, the Māori, who, for many years, felt dissatisfied with the mono-cultural way in which decisions were made regarding the welfare of their children. The Māori were concerned about the impact these decisions had on their families and no longer wanted to tolerate legal or professional systems that did not give consideration to Māori customs, values, and beliefs. The Treaty of Waitangi (1840) provided for protection of the rights of the Māori people, specifically the right to have their concerns heard by the government. In 1985, this right was invoked, leading to the establishment of a ministerial committee by the New Zealand Minister of Social Welfare to investigate the concerns of the Māori people around child welfare. The resulting document, 'Daybreak—Puao te Ata Tu', called for a new system that would recognise, acknowledge and use Māori customs, values, and beliefs, and would take on board Māori methods of decision-making in relation to services for Māori children and their families (Pakura, 2005). Through this process the concept of FGC was introduced to the world.



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Care and control in the UK

In the UK, if the local authority identifies there is reasonable cause to suspect a child is suffering, or is likely to suffer significant harm. An assessment is made under the Children Act (1989) to determine if there is a course of action that needs to be taken to safeguard and promote the welfare of that child. If concerns are upheld and the child is judged to be at continuing risk of harm, an initial child protection conference should be convened within 15 working days. Hall and Slembrouck (2001, p.143) remark that 'it is no exaggeration to say that often the mandate for social work intervention comes from such meetings'. It is at this point that some local authorities may trigger the FGC process to run parallel to the child protection process. The aim of the FGC will be to alert the whole family network to the child protection concerns and to involve the family in making plans to keep children safe within the family network.

There are many complexities social workers face playing the dual role of child protection (control) and family support (care) and the FGC model can potentially help navigate these complexities. It is important to acknowledge that children are sometimes hurt by adults in the family, sometimes deliberately, other times by omission. It also important to acknowledge that if we are to effectively protect children, we need to do it in partnership with families. Children and young people have a fundamental right to maintain a sense of belonging and connectedness with their family and family group. Family criminality, drug abuse or violence may limit options for the safe placement of children within families; however, these factors do not disqualify families from planning and committing to safe outcomes for their children.

How the FGC model works

The FGC process aims to support the family finding their own solutions to their own problems. The process starts with a referral being made by the social worker to the FGC team – either in their local authority or an independent FGC provider contracted to their local authority. The referral is then allocated to an independent Coordinator. The referral outlines the local authority concerns, the decisions that need to be made, possible resources that may support the plan and the next course of action or bottom lines if the family is unable to come up with a workable plan. An independent Coordinator negotiates attendance and informs participants about the FGC process. All members of the family are invited to attend, but in certain exceptional circumstances it may be necessary to exclude a family member, e.g. evidence of violent behaviour or previously diagnosed mental incapacity. Absent family members can give input to the meetings in alternative ways, such as letters or recordings. The FGC Coordinator, where possible, and agreed by the main carers, contacts the child or young person who is subject to the FGC and explores their views on participating in the FGC to establish if they need an advocate to help them express themselves or speak on their behalf.

An independent Coordinator chairs the FGC meeting; they make sure that everyone is introduced, that everyone present understands the purpose and process of the FGC and agrees how the meeting will be conducted – including, if considered helpful by those present, sharing explicit ground rules. At the end of deliberations, the professionals leave the family to discuss and make decisions, this part is called Private Family Time. It is Private Family Time that sets FGCs apart from another such meetings. In

private, the family members can have realistic discussions about the strengths and weaknesses of the parents, alternative caregivers and the child's needs. The family must work together and decide without the interference or dominance of professionals who may be perceived by the family as thinking they know best. At the end of the private deliberations, the family presents their decision to the social worker and the Coordinator and the decisions are clarified and agreed. Once agreed the family is given some time – typically three months – for the implementation of the family plan. After this time the independent FGC Coordinator convenes another meeting with the family and the social worker to look at the family plan implementation and to explore progress. The family may decide to convene subsequent informal meetings to ensure the family plan implementation remains on track. The FGC process ends with the case closure a few weeks after the review – if the family plan implementation is going according to plan.



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Methodology

A systematic review was undertaken to assess the quality of research on FGC. Systematic literature reviews appraise literature with the purpose of giving a complete, exhaustive summary of current literature that can be reproduced and is relevant to a research

The review aimed to address the following research questions:

- Can the FGC model be used effectively in child
- How is social workers' dual mandate implemented in child protection?
- Can the FGC model be used to help social workers manage their dual mandate?

This structured narrative review of the literature was undertaken through searches of academic databases using a series of key words. Most of the literature identified on FGC dates back at least 20 years, when FGC was a new model. Less has been written recently as newer models emerged.

This paper looks at how the FGC model works and contrasts the feelings of social workers working with families involved in the child protection arena with those of the family members. It also considers the FGC outcomes and concludes by summarising key arguments and making recommendations for good practice. This paper reports back on three key themes found in the literature: the perspectives of social workers involved in child protection issues; the perspectives of families involved in child protection issues, and the outcomes of introducing the FGC model.

Social workers' perspectives on child protection involvement

In many Anglophone countries the right of parents and children, involved in child protection, to participate in decision-making has been increasingly recognised as best practice and incorporated into legislation and policy (Darlington et al, 2012). However, despite the demonstrated benefits of parental participation (Farrell, 2004, Darlington et al. 2012. Munro, 2011), factors related to the complex nature of child protection work make it difficult to translate the ideals of participation into reality (Farrell, 2004). Social workers have legal responsibilities to protect children from harm and pressures to do so within predetermined timescales (Maiter et al. 2006; Munro, 2002). Practitioners are expected to act in the best interests of their clients, but their complex roles can mean it is necessary for them to adopt an accusatorial stance (Darlinaton et al. 2012).

Connolly and McKenzie (1998) allude to the difficulties faced by child protection workers in balancing the rights and demands of parents with the protection of children. They acknowledge that much child protection work takes place under increasing public scrutiny and often involves ambivalent, if not adversarial, relationships with parents and families. Central to the debate about what constitute effective and ethical child protection practice has been 'public disclosure of high-profile cases involving deaths of children' (Ferguson, 2011, p.3) and negative reporting in the media. This has led to social workers' reputational authority being reduced. This reduction of authority has led to the diminishing of the social workers' sense of authority, voice, and skill and in their ability to exercise authority (Munro, 2002; 2011). To date, in all high-profile UK child deaths related to a child protection issue that the researcher looked at (Victoria Climbié, Daniel Pelka and Peter Connerly), there has been no indication that any of the social workers involved had convened an FGC or a similar meeting. Such a meeting would have alerted the extended family network and explored their concerns about the welfare of a child.

Ney, Stoltz and Maloney (2011) reflected on a 2005 study by Holland et al, which found that despite social workers' commitment to the ideals of FGC, social workers can find it difficult to change the power relations and to trust families to formulate their own plans. The authors concluded that 'there can be a fine line between a professional outlining her concerns at the start of a meeting and imposing an agenda and preferred solution on the meeting' (p. 61). Darlington and Healy (2009) have also explored the 'inherent tensions' involved in working from a participatory framework in child protection. Social workers have traditionally had a role where they control the direction of the work. In the case of FGC, social workers must release that control to allow families to direct what is best for them and the child under consideration.



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Families' perspectives on child protection involvement

It is the relationship between social workers and families that determine the level of involvement of families in the child protection process. When families have a positive relationship with the social worker, they feel encouraged to participate in the process. Many families report a fear and stigma of having statutory child protection services involved and of 'shuddering feelings' as they enter child protection conferences, where they feel they have no say (Dale, 2004). In previous studies on families' perceptions of social services, parents perceived social workers as being judgemental, uncaring, lacking in understanding, denigrating, labelling, or treating them as guilty until proven innocent (Maiter et al, 2006). This is in stark contrast to how families feel about being involved in FGC which 'in practical terms, feels different to participants when compared to other sorts of meetings. The difference stems from the principle that the meeting is for the families and it is their time rather than the professionals time' (Marsh, 1996 p.121). In a study by Fischer et al (1986, in Maiter et al, 2006) some parents felt social workers did not seem to understand the difficulties they were facing with their child's behaviour; and when social workers tried to normalise behaviour that parents found problematic, e.g. teenagers displaying very challenging behaviour, parents felt that they were being judged as incompetent. Having such feelings and perceptions in the child protection process disempowers families.

Munro (2011) echoed these negative feelings that some families have about social workers and the child protection process. While there needs to be a level of concern about serious abuse and neglect, there also needs to be awareness that many of these families are struggling with a problem. Often this is a problem of poor parenting but not necessarily at the level where the law and compulsion should be engaged. Further, Munro (2011) argues that the main challenge is that many families are terrified that they will be judged negatively instead of being given help.





FGC outcomes

There is no simple answer to the question of evidence of the effectiveness of the FGC model. The literature suggests that this depends on several factors i.e. the relationship of all the parties involved and the nature of the issues themselves. Principally it depends on the efficacy of professional practice in the FGC process, the time and commitment devoted to FGC preparation, how the FGC was managed and how the family was supported after the FGC conference.

As Pakura (2005) asserts, the success of the FGC process depends on many factors. When professionals are doubtful about the importance or competence of the extended family, they often fear losing control in decision-making and thereby disenfranchising the family. In such circumstances the FGC process is likely to fail or there will only be token agreement about outcomes. Child protection workers need to understand how parents experience and negotiate intervention if they are to help them engage with child protection plans. Policy makers also need this understanding if they are to design services that parents experience as valuable.

Conclusion

Children are sometimes hurt within the family network. Family Group Conferencing is an alternative model to work with families in these circumstances and has a democratising potential in that it gives families a chance to participate in decision-making. The FGC take place within a political context as does all social work. Decisions made in one context and time may be acceptable, but the same decisions taken in a different context may be called to scrutiny and challenge. Dominant discourses and ideologies (shaped by the current political system), as well as institutional arrangements (i.e. current discourse on child protection), shape how FGC is implemented. The child protection process power is very heavily weighted towards the state and its statutory authority, mainly due to the need for control to protect children. The concept of partnership is severely tested within this context. Shared decision-making can create considerable anxiety for social workers as they attempt to strike the right interceptive balance, and social workers know that getting the balance wrong can have serious safety implications for the child (Connolly & McKenzie, 1998). Social work is unlikely to ever be based on equal power relationships due to the nature of work in the child protection arena and the primary need to protect the children. But it is possible to positively engage with families in the child protection process through using emancipatory practice in the form of FGC.



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About the author

Mthoko Sampson, Lecturer in Social Work, University of West London

2004, Harrisburg, Pennsylvania, USA

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