

Community Work Approaches  
to Child Welfare

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*Peterborough, ON:* broadview press 2002

## part two

## BUILDING COMMUNITY IN WEST REGION CHILD AND FAMILY SERVICES

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*Introduction*

Community organization is not new to First Nations communities. It was first launched as a federal government initiative in the 1960s (Young, 2000). However, that program largely reflected the policies of assimilation in that its primary goal was to stimulate economic development initiatives borrowed from dominant society. Community work within a social development framework in Aboriginal communities has a more recent history, yet dates back at least three decades. For example, a community organizing approach was associated with the development of a locally controlled Child Care Centre in Sandy Bay, Saskatchewan, in the early 1970s (Pawson and Russell, 1985). This initiative, designed to prevent the placement of children in non-Aboriginal child-care facilities outside the community, was developed long before the devolution of child welfare services to Aboriginal communities.

The devolution of child welfare services to First Nations communities has resulted in a new emphasis on prevention and early intervention and these functions often have been associated with a community organizing approach within these agencies. Despite the principled commitment to local resource development and community-based services, successful implementation has often been affected by limited resources, an inability to use existing financial resources in a more flexible way to promote such initiatives, and the level of skills among local staff. At the same time there have been a number of important community-based initiatives in Aboriginal child and family services. This particular case study was selected because it represents an approach that evolved following the devolution of control over child welfare services to a First Nations agency where governance involves a form of local community control. As well, it was felt important to examine an agency with a significant history in implementing a community-oriented approach. In the case of West Region Child and Family Services (CFS), community organization was incorporated as a specific program when the agency first received its child welfare mandate in 1985. In addition, the agency's philosophy of service emphasizes a community-based approach.

Data from this case study were gathered during a comprehensive review of agency programs and services completed in 1999. The study (see McKenzie, 1999) involved a wide range of interviews, a survey of local Child and Family Service Committee members, document study, and observation of the agency's planning processes. Information was subsequently reviewed by agency staff for accuracy. Consultation with the agency's Executive Co-ordinator captured more recent changes.<sup>1</sup>

*Agency Context*

West Region CFS has provided a full range of child welfare services to nine First Nations communities in western Manitoba since 1985. While the agency provides regionally based specialized services for child abuse investigations and alternate (i.e., foster) care, it has developed a very decentralized community-based service model over the past several years. Each locally based service team has staff designated as child protection workers, prevention and resource development workers (community organizers), and treatment support staff (who provide more therapeutic and support services to individuals and groups). A locally based supervisor exists in larger communities, and in smaller communities a supervisor may be responsible for local workers in more than one community. Each community has a well-developed Child and Family Services (CFS) Committee composed of community volunteers who meet regularly with staff and play key roles in planning and decision-making. Careful attention to service quality has been reinforced by an emphasis on professional training for staff, as well as training programs for child welfare committee members and foster care providers.

Agency operations are guided by a mission and vision statement based on the teachings of the medicine wheel, and values based on respect, responsibility, authority, and accountability. The vision statement also emphasizes the agency as an extension of the kinship system where "everyone—elders, leaders, grandmothers, grandfathers, mothers, fathers, aunts, uncles, sisters, brothers, husbands, wives—is an advocate for children and families." Core values stress the importance of the following: preserving families and communities; the incorporation of traditional values and teachings in the programs and services provided; and the right of First Nations to self-determination and full jurisdiction over child and family services to all members of the tribal council living both on and off reserve. The agency articulates a philosophical commitment to the provision of holistic, community-based services that focus on heal-

ing individuals, families, and communities, and this principle is frequently identified as a guide to service and program planning.

In 1992, the agency negotiated a block funding arrangement for child maintenance costs with the federal government as a pilot project. This arrangement, the first of its kind for First Nations child welfare agencies, has been renewed on an annual basis since that time. Under block funding the agency can use funds, normally paid out only as per diem costs for children in care, to both meet the needs of these children and launch new resource development and family support initiatives. For example, funds that might normally be paid to a residential treatment facility in Winnipeg only after a child had been placed in this resource can be used to develop more culturally appropriate resources in West Region communities. While surplus funds can be carried forward for a reasonable period of time, deficits are not recoverable unless circumstances arise that are beyond the agency's ability to control. While the funding arrangement is limited to services funded by the federal government, this represents the largest proportion of the agency's overall budget for child maintenance. In 1998 the agency was the recipient of the Peter T. Drucker Award for Canadian Non-Profit Innovation for its use of block funding and the medicine wheel framework in service development.

### *Community Organization and Community-Based Services*

The agency's service model is based on its mission and value statements, and there has been a consistent emphasis on the development of community-based services and the use of a community organization process to program development. For example, in a unique approach to community-based planning, regional operational workshops, involving all staff and a wide range of representatives from each community, are held every two years to review agency programs and provide input to future plans. In addition, each community-based team holds a community planning workshop annually or every two years to identify local service and program priorities. Not only is this a form of community accountability, but it also serves as a vehicle for setting priorities, community education, and the recruitment of community volunteers willing to assist in implementation. Thus, it becomes one element in a more general strategy aimed at building a community-wide philosophy of caring. This approach to community planning is consistent with the developmental process used in establishing new resources and programs. For example, staff who undertake resource development initia-

tives began with a needs and capacity assessment phase. These activities include the active participation of community groups in the planning and implementation phase of project development.

Community-building initiatives that involve the development of new resources have been facilitated by the flexibility afforded in the block funding arrangement. One initiative has been to develop a therapeutic foster home program and a related training program that includes content on culture and identity. Another initiative has focused on the development of more specialized resources for youth with greater needs. Miiikanaa Centre provides culturally appropriate residential treatment services for adolescent males who have sexually offended or are at risk of doing so, and Oshki-ikwe, a facility with 10 furnished suites, provides residential prenatal and postnatal programs for adolescent mothers. The development of local resources for high-needs adolescents keeps these children closer to home and reinforces community responsibility for caring. In addition, more culturally appropriate interventions can be designed, and the teachings of the medicine wheel are used in the planning and delivery of services within these facilities.

Three other examples demonstrate the use of a holistic community approach to program development. One is the initiation of the Vision Seekers Program, a partnership program designed to develop life skills and educational upgrading for youth. Using financial resources from several sources, the agency hired community facilitators to undertake a circle consultation process with youth and other members to discuss how the program should operate. The consultation phase has generated a great deal of interest and the project has now entered the program design and implementation phase. A second is the agency's leadership role in the development and operation of the Mino-Bimaadizi Project ("To lead a good life"). This project, developed through a partnership arrangement with Chief and Council in one community, provided life skills, computer training, and related support services for 20 young parents with children in care or at risk of coming into care. Third, a developmental approach has been used to establish a community-based response to problems associated with fetal alcohol syndrome and effects (FAS/E) based on the teachings of the medicine wheel. The agency's response to FAS/E issues can be sharply contrasted with the medical model, which stresses a diagnostic approach to the problem, often leaving parents with an overwhelming sense of guilt and few instructions on how to respond. Instead, the agency's Children with Special Needs Co-ordinator has spent time providing information and education, and building a network of parents who can both

provide support to each other as well as help to support a broader community response to this important issue.

The agency's primary investment in community organization is reflected in its continuing commitment to the placement of community organization staff (called prevention and resource development or PRS workers) within each locally based team. Some of these staff are enrolled in the distance-education BSW program, or have a BSW degree, and some have other forms of training. All have a close connection with the local community. These staff have primary responsibility for the planning and implementation of outreach and prevention services, although they also provide backup protection services on an emergency basis. An additional responsibility is the co-ordination of early intervention services that involve homemakers and family support workers, although the direct employment of "case aides" has reduced the demand for short term family support workers.

Programs reflecting the early intervention and prevention mandate include education and support programs, the promotion of community healing through traditional teachings, and the development of workshops and group programs to address identified community needs. For example, sharing and healing circles to address issues pertaining to family violence and FAS/B are sponsored, and programs related to parenting, male violence, and cultural awareness for youth are organized. Cultural camps, suicide prevention programs, and parenting programs are but some of the initiatives organized by local community workers.

One of the purposes of the alternate programs is to provide resources that can support families and children where child protection is a concern. Yet participation is not limited to those who may be receiving child protection services from the agency, and this avoids the stigma so often associated with programs targeted at "problem families."

These programs are developed through a process best described as community-building. Local CFS Committees participate with community workers in developing an annual service plan with a specific focus on prevention and resource development. Expenditures related to proposed activities are then estimated and these plans are referred to a regional committee that includes at least one representative from each community. Local priorities are approved based on established agency goals and priorities as well as budgetary considerations. An approved community prevention plan, along with the budget allocation, is then provided to each local CFS Committee, and the Committee and community work staff are then responsible for implementation and accountability. While this process reinforces the need for community planning

and accountability, there is sufficient flexibility to allow community workers to respond to new needs or priorities that emerge during the course of the year. Direct expenditures for these community-based programs increased almost threefold over the five years between 1994 and 1999.

### *Assessing Effectiveness*

One perspective on the scope of the agency's investment in community-based prevention and resource development is gained by comparing the rate of staff resources devoted to community organization and resource development initiatives and those devoted to other child welfare functions performed by the agency. Seventeen, or 27 per cent, of the 63 professional staff employed as direct services staff or special development co-ordinators are involved in community work or new program development initiatives. One can also examine expenditures for child maintenance devoted to children in care and the amount used for alternate forms of community programs. In 1999-2000, approximately 68 per cent of the child maintenance allocation was spent on services for children in care, whereas 32 per cent of the block grant was spent on alternative programs that focused on resource development, community-building, and early intervention.

Despite the investment in alternate programming, this does not occur at the expense of child protection services. For example, service quality reviews by the province have indicated that agency compliance with service standards has been above average. This is consistent with the balanced holistic approach to child and family espoused by the agency where protecting children, supporting families, and building community capacity become part of the circle. Attention to child protection is reinforced by a community-oriented model of services, which includes a CFS Committee in each community that has received training in child welfare. Leadership in these committees is most often provided by respected women in the communities and they are actively engaged in both child protection and prevention programs. On child protection matters they meet regularly with local staff and provide advice and assistance, including active participation in family conferences, as appropriate. Because of the active involvement of community members, the provision of child protection services reflects a more consultative, collaborative approach with the community than that found in conventional child welfare agencies.

While it is difficult to quantify the effects of this more integrated approach to community work and community-building, there is no doubt that it has led to the development of more culturally appropriate resources for children closer to home. For example, 75 per cent of all placements of children in care in 1998 were made to resources where there was at least one Aboriginal caregiver, almost half of all placements were within the child's own community, and 44 per cent of all paid care days were with extended family members. By comparison, only about 23 per cent of the children formerly from West Region communities who were taken into care in Winnipeg were placed in culturally appropriate resources. It has also facilitated the development of culturally based programming both within these new resources and as a component of community outreach. Some positive effects on placement prevention and costs for children in care are apparent. For example, the rate of federal funding for children in care in West Region Child and Family Services over a five-year period declined from 7.3 per cent to 5.5 per cent of the child population in these communities. This rate was significantly below a comparison agency that as yet has been unable to implement a sustained community-building program. In addition, per diem costs for children in care in 1999 were below the provincial average and 17 per cent below the average costs paid in the city of Winnipeg. Block funding has enabled increased investment in community-building activities, and agency forecasts suggest that the termination of block funding and the range of community-based programs it supports would lead to a significant increase in children in care and related expenditures targeted specifically for these children.

While placement prevention and costs are important reasons for supporting community work and community-based services, the real measure of success is found in indicators of child, family, and community well-being. Although program initiatives earlier described are highly valued and there is anecdotal support for their effectiveness, more evaluation of the effectiveness of community prevention programs is required. Nevertheless, one indication is provided in the responses of local Child and Family Service Committee members to a survey on perceived changes in service delivery. When compared with four to five years ago, respondents "agreed somewhat" that the community was dealing more effectively with child welfare issues now and that child and family services had improved.

### *Discussion and Implications*

At the local community level, community organization in West Region CFS reflects a locality development focus where the emphasis is on strengthening community capacity and promoting community-based early intervention and healing initiatives. While all staff may initiate advocacy activities on behalf of an individual or family, group or system advocacy efforts receive more limited attention at the local level. In part this may reflect the training and skills of community workers, but it is also determined by local politics and current practices in the agency. For example, it is more likely that group advocacy actions, directed at either local or external systems, would be undertaken as an institutional response and carried forward by senior management.

Major resource development initiatives that have implications for the entire agency are often launched by staff with designated responsibility for these initiatives. While they become resource development "specialists" who incorporate a social planning approach, they work collaboratively with other staff and local community members.

The agency has made a conscious effort both to integrate a community-building philosophy into its operations and to promote community organization through staff with designated responsibilities for such activities. The integration of a community-building philosophy is reflected in the emphasis on community-based services. This community-oriented, developmental approach is an attempt to wrest child welfare services away from its history based on colonization to a future based on empowerment. In many respects this transformation is consistent with the philosophy and approach associated with the "patch" program in the United Kingdom (Hadley and Young, 1990), which was developed in an effort to create more responsive community-based public services. In an Aboriginal context, this includes an emphasis on traditional values and practices that support a community approach to caring and a more holistic approach to practice. In small but practical ways this includes linking developmental goals with child protection functions. For example, in one community, women with children at risk are enrolled in a parenting program open to all women where both social support and group activities are promoted. Younger children are placed in daycare; thus, the program provides both respite and opportunities for learning. One parent with six children who was receiving protection-oriented services described the program this way: "Child and family services has saved my life. They are the only ones that listen to me and this is the only place I feel safe."

A community-oriented approach to child and family services in First Nations communities is also driven by necessity in that new resources and programs must be developed if the political goal of self-determination in child and family services is to have any real meaning. And while it may be easier to establish an integrated community-oriented approach in a smaller or medium-sized Aboriginal agency, many other Aboriginal agencies have been less successful in this endeavour. Three factors appear to be important to some of the successes experienced by West Region CFS. One is the availability of resources to enable alternate investment in community-building. A second is the strength, commitment, and consistency of agency leadership to this model of practice. And a third is the willingness to invest in skill development and training to facilitate this model of practice.

Generic skills and knowledge are important to effective practice, and some of these were being acquired by staff through participation in the distance-education BSW and MSW programs offered through the University of Manitoba. However, other qualities were also regarded as important. One was a strong commitment to the agency's service orientation and its developmental approach to practice. Second was the knowledge and ability to integrate traditional cultural practices, as appropriate, in new programs and initiatives. Third was the ability to establish collaborative, respectful working relationships with community members. Two additional qualities were identified as important for staff members working in their community of origin. These were the ability to manage demands from community members, including family members, and a perspective on personal healing that enables them to respond appropriately to friends and neighbours experiencing personal problems.

While the extent to which a community organization philosophy and approach guide agency operations is encouraging, challenges remain. First, additional knowledge and skills for community workers could expand the scope and effectiveness of their activities. For example, there is the potential to develop a more co-ordinated service response by allied service providers within local communities, and the range of advocacy services could be expanded in some communities.

Second, as the agency decentralizes by giving more responsibilities to local communities, there is a risk that community-building initiatives may be replaced by other priorities set by local community decision-makers. In some cases these decisions can reflect an intolerance for diverging patterns of behaviours or narrowly defined political priorities, a problem described by Montgomery (1979) as "acute localitis." Other

potential risks include a tendency for governments to support decentralization as a means of offloading responsibilities. From an agency perspective inefficiencies in program management can occur if all child and family service functions are decentralized to each community, particularly where communities are quite small. While these risks need to be recognized, they are reduced by an investment in training for both staff and local volunteers, and by the demonstrated success of a community-building approach to child welfare practice. In this regard, evaluation of new and emerging approaches to the delivery of child and family services in First Nations communities can play an important role. For example, it has been generally demonstrated that social supports, including access to community resources, mutual aid groups, and supportive social networks, are associated with improved parenting (Cameron, 1995; Fuchs, 1995), but the specific characteristics and effects of programs that work in First Nations communities require more attention. Two other policy initiatives may be important to this issue. One is the development of a more coherent body of service standards for Aboriginal child and family services, and an accountability structure that will provide support in meeting culturally appropriate standards. The recent initiative of the province to extend Aboriginal control over child welfare services to those living off-reserve may encourage more attention to this. A second is the potential benefits in efficiency and effectiveness that may be realized through the integration of child and family services with other community-based human services. West Region CFS has demonstrated that new resources and a more co-ordinated community response can be developed in partnership with other formal and informal groups and organizations, and this could evolve into a more formalized single unit service delivery structure.

A "resource gap" is particularly apparent in First Nations and other Aboriginal communities because there is an absence of voluntary organizations and services that often play an important role in developing a variety of family and children's programs to supplement the formal child welfare system. In Aboriginal communities, community partnerships are possible, but they are more likely to involve a relatively small group of other publicly funded service providers and community members. In this context, First Nations child and family service agencies must have the capacity to invest more financial and human resources in community social work than those child welfare agencies that operate in a richer social resource environment. In this regard, block funding of child maintenance costs can provide some opportunities for alternate investment if funding levels meet the criterion of adequacy. Block funding arrange-

ments have been established with a few First Nations agencies across the country, but the federal government has not yet established a policy that would make this option more widely available. Such a policy will need to address criteria for establishing the level of the block grant, a formula for ongoing adjustment and factors that affect the agency's capacity to utilize the grant both to meet the required needs of children and families and to build community capacity.

note

1. The author wishes to acknowledge all staff and community members who so willingly shared their views on service development in the agency and in their communities.

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# 6 Searching for Common Ground:

## *Family Resource Programs and Child Welfare*

JANICE MACAULAY

As Chapter 3 made clear, many good things can happen when child welfare agencies and community-based programs work together. Case studies in this book and elsewhere (Schorr, 1997) describe efforts by child welfare services to embrace the principles and practices of community work and to collaborate with community groups to improve services and outcomes for families. However, even when support for these initiatives has come from senior levels within government and the child welfare sector, the inherent differences between traditional child welfare services and community-based services present significant barriers that require determination on both sides if they are to be overcome.

Community-based family resource programs currently offer a wide range of supportive programs and services to families that are involved (or potentially involved) with child welfare agencies. Although congenial working relationships between child welfare agencies and family resource programs certainly exist in some communities, many family resource programs have described their interactions with child welfare as problematic. This chapter will explore some sources of tension that exist between these two services, identify a number of common problems that arise and suggest some ideas for building bridges at the community level with the aim of serving families and children better. It is based on the findings of a project undertaken by the Canadian Association of Family Resource Programs (FRP Canada) on behalf of its member programs and in partnership with the Canadian Institute of Child Health and the Child Welfare League of Canada. The project objectives were to encourage a productive dialogue between family resource programs and child welfare services in their communities and to increase the capacity of family resource programs to work with families considered at risk of child abuse and neglect. The research involved nationwide