



***INNOVATION,  
COMMUNICATION, AND  
COLLABORATION:***

Understanding Family Group  
Decision Making Models in  
Canada and Beyond

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# ACKNOWLEDGEMENTS

**"There is no power for change greater than a community discovering what it cares about." – Margaret J. Wheatley**

I would like to begin by acknowledging with respect the Ləkʷəŋən and W̱SÁNEĆ (Songhees and Esquimalt) peoples, the traditional keepers of the land where I have been living, loving, and learning, un-invited, for the last several months while working on this project.

I am a Red River Métis woman from Treaty 2, in Brandon, Manitoba, the traditional homelands of the Dakota, Anishanabek, Oji-Cree, Cree, Dene, and Métis peoples. I come from a long line of Red River Matriarchs who have guided me on a path that has led me to find a deep passion and purpose in this work.

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# EXECUTIVE SUMMARY

## BACKGROUND

The Ministry of Child and Family Development (MCFD) in British Columbia has used a Child and Family Services program called Collaborative Practice Decision Making (CPDM) for over 25 years now. CPDM is modelled after the Maori in New Zealand's Family Group Decision Making (FGDM) program. FGDM was initially adopted by the New Zealand Ministry in 1989 and has since been operationalized in various Child and Family Services organizations around the world.

Currently, CPDM within MCFD has four elements; (1) a Family Case Planning Conference, which is coordinated quickly when there is a high need for safety to be addressed; this process is usually social-worker driven; (2) a Family Group Conference (FGC); a collaborative and family-driven meeting to discuss a long-term plan for a family and their child(ren) by bringing together a wide network of supports identified by the family; (3) Youth Transition conferences, which bring together youth-identified supports to collaborate on a transition plan for independent living and set goals leading up to a youth's 19th birthday; and (4) Traditional Decision-Making Circles, which are specific to Indigenous community's approaches to the FGDM process. The aim of each of these collaborative meetings is to facilitate the generation of informed family plans that are empowering, culturally safe, trauma-informed, unique to each family, and inspire motivation toward achieving the plan.

## RESEARCH QUESTION

What evidence exists on the evaluation of Family Group Decision Making programs in Canada and internationally?



## METHOD

The above research question was investigated through an extensive literature review of both academic and grey literature pertaining to program evaluations of various Family Group Decision Making models. Once the literature was collected, key findings, general themes, and recommendations were interrogated and have been compiled into a set of key evidence.

## PURPOSE

The purpose of this literature review is to identify, synthesize, and critically analyze existing evidence on evaluations of FGDM programs in Canada and similar global contexts.

## KEY FINDINGS

### ***FINDING #1: EFFECTIVE MANAGEMENT***

The literature highlights the crucial role of effective management of FGDM programs in achieving family and facilitator satisfaction with the process, prompt reunification of children with parents, thorough implementation of family plans, and reduced involvement with child and protection services.

### ***FINDING #2: INSUFFICIENT PREPERATION & COMMUNICATION***

Many youth, family members, and community members who have participated in FGDM reported feeling a lack of preparation and communication for the process. Following an FGC, there was a noticeable absence in follow-up communications to assess the well-being of the youth and family and adherence to the family plan.

### ***FINDING #3: USE OF RESOURCES***

FGDM requires a significant use of resources, posing notable challenges for some governments who are unwilling or unable to provide the necessary funds for the FGDM process. Despite this, FGDM's success in re-uniting families and reducing involvement with child protection services has been recognized as cost-effective.

### ***FINDING #4: CO-OPTATION***

In some instances, the FGDM process was scheduled at the convenience of the agencies conducting them rather than families and youth apart of FGDM. Also, some families have expressed concerns that social workers and FGDM facilitators were coming into FGC's with a pre-concieved plan. These concerns undermine the core values of FGDM and point to the co-optation of the FGDM process away from the control of families.

## RECOMMENDATIONS: CPDM IN PRACTICE

### ***RECOMMENDATION #1: FOSTER BOTTOM-UP IMPLEMENTATION***

- Emphasize a bottom-up approach to implementation, where community voices and needs inform the design and execution of CPDM programs.
- Encourage reflexive practice among social workers and facilitators to mitigate the risk of co-opting the CPDM process and ensure alignment with the program's inherent values and objectives.

### ***RECOMMENDATION #2: ENHANCE COMMUNICATION AND FOLLOW-UP***

- Place a realistic cap on social worker and facilitator caseloads to ensure sufficient time for communication before, during, and after CPDM meetings.
- Mandate long-term follow-up meetings between CPDM facilitators and the social worker of the family in CPDM to ensure that engagement is being made to track the progress of family plans and that the outcomes of CPDM are working well for the family and child(ren).



### **RECOMMENDATION #3: STRENGTHEN FACILITATOR EXPERTISE**

- CPDM facilitators must possess a high level of child protection practice maturity and a deep understanding of strength-based practices to effectively guide the FGC process.
- Implement a standardized approach to facilitator training that focuses on strategies to manage potential tensions and risks that may arise during CPDM meetings.

### **RECOMMENDATION #4: PROMOTE CULTURAL SAFETY AND INDEPENDENCE**

- Ensure that sources of culturally safe support are readily available and utilized for families, children, and community members of diverse backgrounds.
- Facilitators of CPDM should operate independently from family social workers to avoid any threat to neutrality or potential co-optation that may arise.

## **RECOMMENDATIONS: MCFD PROGRAM EVALUATION**

### **RECOMMENDATION #5: ADOPT A MIXED-METHODS APPROACH**

- Incorporate both qualitative and quantitative methods into the evaluation process to gain a comprehensive understanding of CPDM outcomes.
- Utilize data analysis of statistics on child welfare indicators before and after CPDM interventions to assess their impact quantitatively.

### **RECOMMENDATION #6: PRIORITIZE PARTICIPANTS VOICES**

- Ensure that the voices of families, children, and youth who are/have been involved in CPDM are central to the evaluation.
- Conduct interviews with families, youth, and facilitators involved in CPDM to capture their perspectives and experiences.

### **RECOMMENDATION #7: ENGAGE INDIGENOUS COMMUNITIES AND STAKEHOLDERS**

- Consult with local Indigenous communities to ensure that their perspectives, needs, and cultural considerations are integrated into the evaluation.
- Engage with the Aboriginal Policy and Practice Framework to guide the program evaluation process and consider innovations for the future of CPDM at MCFD.

## **CONCLUSION**

The literature underscores the potential for success in re-uniting families and decreasing families involvement with Child Protection Services when FGDM is skillfully managed and effectively communicated. If each of these findings and recommendations are taken into serious consideration, there is potential for vital shifts in the way child welfare is approached and practiced. These findings highlight the necessity of ensuring that the voices of family and youth are not only heard, but valued and reflected upon in their experiences with CPDM. These findings further point to the need for a formal program evaluation of CPDM within MCFD.



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# GLOSSARY

**Ministry of Child and Family Development (MCFD)** – A government ministry in British Columbia that is responsible for child protection services across the province.

**Family Group Decision Making (FGDM)** - A family-led decision-making process within Child and Family Services originating from the Māori.

**Collaborative Practice Decision Making (CPDM)** - The British Columbia MCFD's model of FGDM that encompasses various family-led decision-making processes and programs.

**Family Group Conference (FGC)** - A key element of FGDM that is intended to hold family-led meetings and shared decision-making on a plan for the family and child(ren) 's future.

**Aboriginal Policy and Practice Framework (APPF)** - A framework within British Columbia's Ministry MCFD that is intended to improve outcomes for Aboriginal children, youth, families and communities through restorative policies and practices.

# INTRODUCTION

## THE HISTORY OF FAMILY GROUP DECISION MAKING

Child welfare agencies and legal courts have historically been the key decision-makers in child welfare planning. However, over the last 30 years, there has been a more active effort to include families, youth, and community members in the decision-making process when it comes to child welfare practice (Lalayants et al., 2021, p.377). To understand this phenomenon, we may turn to Māori protests in New Zealand following the 1974 *Children and Young Persons Act*. The protests called out the 1974 legislation that placed children in foster care, family homes, and sometimes institutional care, causing isolation of the child and emotional traumas, for being an unsustainable model of child welfare (Connolly, 1994, p.88).

Arising from these concerns came the Maatua Whangai program that used the Māori kinship network; whanua, hapu, and iwi, as a model of care. A 1986 Advisory Committee was established to advise the Minister of Social Welfare on the needs of Māori people. The report that resulted from the committee made several recommendations, including a review of the 1974 legislation. Eventually, the report influenced child protection services in New Zealand to reinforce the concept of children being retained within kinship networks and highlighted the need for wider family and community consultation in terms of decision-making (Connolly 1995, p. 89). In an attempt to address the negative consequences of the 1974 legislation, *The Children, Young Persons and their Families Act of 1989* was legislated, embracing Family Group Decision-Making (FGDM) in child welfare.

The FGDM model has since been adopted in Child and Family Service agencies around the world. A key component of FGDM is an Family Group Conference (FGC), that is intended to bring together a network of supports identified by the youth and family to engage in decision-making about the safety and welfare of the child(ren) (Ney et al., 2011, p. 185). Through this family-led and collaborative process, a plan that the family deems best for their safety and well-being is created. Various Child and Family Service agencies, including the Ministry of Child and Family Development (MCFD) in British Columbia, have adopted their own programs based on the core values of FGDM based on the Māori model.

## **CORE VALUES OF FGDM:**

- Emphasize and build upon the strengths and positive aspects currently present within the family;
- Resolving challenges within a family and a child's life is most effectively achieved when the social worker and FGDM facilitator empower clients to seek support from their social worker, rather than imposing decisions independently;
- Plans crafted by the family and youth are more inclined to honour and preserve the child(ren)'s connections to their family, community, and culture;
- The FGDM process hinges on fostering trust and open dialogue with family and support networks, while maintaining confidentiality (Bredewold and Tokens, 2021, p. 2174).

## **COLLABORATIVE PRACTICE DECISION MAKING & THE MINISTRY OF CHILD AND FAMILY DEVELOPMENT IN BRITISH COLUMBIA**

The MCFD in British Columbia has been utilizing a model of FGDM for over 25 years. In 1991, the NDP provincial government in British Columbia established 'The Community Panel for a Family and Children's Services Legislation Review.' The Panel published a report titled "Making Changes - A Place to Start" recommending that the British Columbia MCFD establishes alternative dispute resolution mechanisms (Markley, n.d, p. 4). Following this report, MCFD spoke firsthand with people in New Zealand about their recent child welfare legislative changes to adopt FGDM. As a result of this panel and report, MCFD has created the Collaborative Practice Decision Making program; modelled after New Zealand's FGDM programs. CPDM currently holds four elements within MCFD (Douglas, n,d, p. 1-2):

### **FAMILY CASE PLANNING CONFERENCE**

- A social worker driven meeting that is organized when there is a high need for safety to be addressed.
- Can be coordinated quickly, in as little as 48 hours, and typically lasts for 90 minutes.
- The primary outcome is a collaborative planning process that addresses more immediate family circumstances.

### **FAMILY GROUP CONFERENCE**

- A family-driven day-long meeting to address longer term planning for the child(ren) by bringing together a wide network of supports identified by the family.
- Entails private family time, allowing the family and their supports to create a plan to address the presented concerns.

## YOUTH TRANSITION CONFERENCE

- Typically youth-driven, with youth-identified supports collaborating on a transition plan leading up to the young person's 19th birthday.
- Often involve multiple meetings over a series of months to plan and set goals for a transition for independent living.

## TRADITIONAL DECISION MAKING CIRCLES

- Indigenous community and family driven with the CPDM facilitator supporting the family in coordinating and delivering a culturally appropriate meeting.

# RESEARCH QUESTION & PURPOSE

## GUIDING RESEARCH QUESTION

This report seeks to inform a potential program evaluation of CPDM at MCFD by generating general themes and recommendations in the literature on program evaluations of various FGDM models. Therefore, this report is informed by an exploration of the following research question:

**What evidence exists on the evaluation of Family Group Decision Making programs in Canada and internationally?**

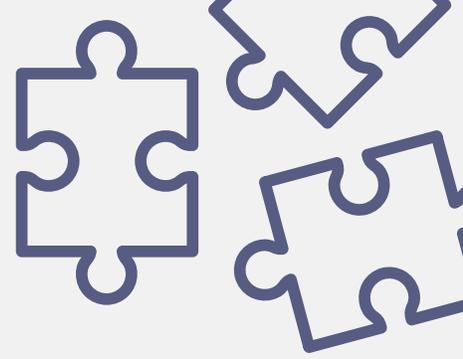


## PROBLEM & PURPOSE

The following literature review will lay the groundwork for the design of a formal CPDM program evaluation at MCFD. Since the adoption of the CPDM program into MCFD policy and practice over 25 years ago, there has been no formal program evaluation completed to assess its implementation and efficacy in re-uniting families and children and minimizing families' involvement with child protection services. The CPDM program seeks to enable collaborative decision-making between social workers, CPDM facilitators, and the families with whom they engage, yet no formal data collection and analysis has been completed to validate this assumption. With this in mind, the purpose of this literature review was to identify, synthesize, and critically analyze existing evidence on program evaluations of FGDM programs and models in Canada and similar global contexts.



# RESEARCH METHOD



## LITERATURE REVIEW

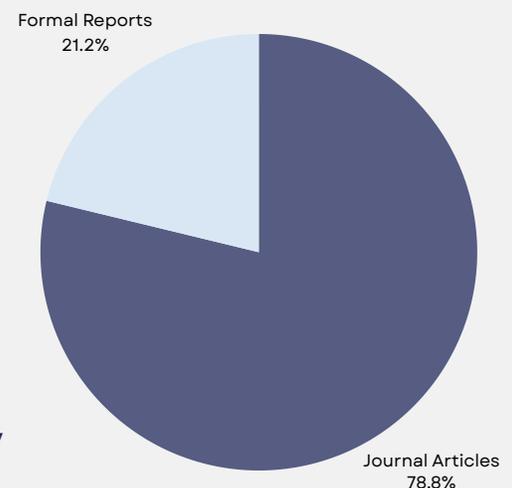
### COLLECTING THE DATA

The process of conducting this literature review began with a primary scan of academic and grey literature found through keyword searches. This was done on reputable databases through the University of Victoria library, Google Scholar, Google Search Engine, and the Canadian Child Welfare Research Portal. Keywords for this search included: “family group decision making” “family group conference” “collaborative practice decision making” “family-led decision making” “family team meeting” “shared planning decision making” within quotations and parenthesis, along with “child welfare” “child family services” in parenthesis, as well as “evaluate” and “assess” in parenthesis. Here is an example of how this looked in each search engine: (“collaborative practice decision making” OR “family group decision making”) AND (child welfare OR child services) AND (evaluate OR assess).

The findings that resulted from this search were a combination of formal reports on program evaluations of FGDM from Australia, New Zealand, the United Kingdom, Canada, and the United States and academic, peer-reviewed literature reviews on program evaluations from New Zealand, United Kingdom, Sweden, Canada, and the United States. From this search, a total of 33 pieces of literature were chosen to read in full to address the research question informing this project.

### ANALYZING THE DATA

Once I collected and saved the literature within Zotero, I collated a brief abstract, key findings, key words, quotations, and recommendations from each piece of literature within an Excel sheet. I then interrogates these general themes and findings and compiled them into a set of key evidence. The recommendations made below are informed by the findings within this literature. I communicated the research process and findings in weekly meetings with project sponsors Sarah Hunt and Ken Markley from MCFD.



### LIMITATIONS

This research project spanned twelve weeks, a duration that limited its capacity for comprehensive and exhaustive research analysis. Further, I conducted this research search exclusively in English, which may have restricted the breadth of insights available in other languages. A notable constraint of this project was the inability to attend an FGDM meeting In-person, which restricted the researcher’s firsthand experience with the process.

# FINDINGS

The following section explores findings from the literature review. Findings have been grouped into four categories that encompass general themes that consistently arose throughout the literature pertaining to existing evidence on the evaluation of FGDM programs internationally.

## **FINDING #1: EFFECTIVE MANAGEMENT**

A dominant finding within the literature highlighted the crucial role of effective management by FGDM facilitators in achieving successful outcomes within these programs. “Successful outcomes” as defined by various sources include family and facilitator satisfaction with the FGDM process, prompt reunification of child(ren) with their parents, thorough implementation of family plans created during an FGC, and the reduced involvement of child(ren) and their families with child protection services (Te Awatea Violence Research Centre, 2014; New Zealand Ministry of Social Development, 2012; Munroe et al., 2017; Foundations UK, 2023; NSW Government, 2022; Connolly, 2006; Cunning et al., 2006; Corwin et al., 2019; Raraport et al., 2019; Edwards et al., 2020; Berzin et al., 2007; Sheets et al., 2009). Further, there was evidence that a successful FGDM process empowers families and youth in the decision-making process (Munroe et al., 2017; Brown, 2003; Bredewold and Tonkens, 2021; Frost et al., 2014, Hart, 2021).

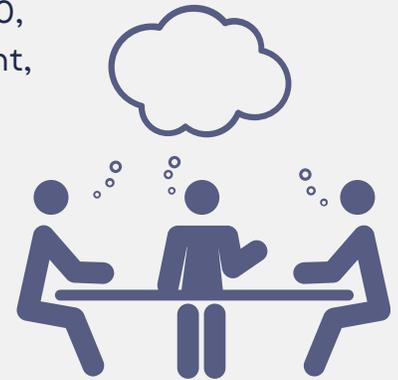
An essential aspect of proficiently managing the FGDM process involves thoroughly preparing children, youth, families, and community members prior to meetings. A recurring theme in the literature underscored the correlation between a social worker’s skill and capacity to prepare families beforehand, ensuring they felt comfortable and secure with the process and environment, and fostered active, respectful, and engaged communication among stakeholders during meetings, ultimately culminating in successful outcomes (Boxall et al, 2012, p.xii; Te Awatea Violence Research Centre,

“They came up with some very here and now plans in terms of safety... and there was a positive, and practical and workable plan developed. I think for me to see that was critical... drawing on the strengths of the family and finding strength and seeing that played out in front of your eyes is very powerful. It was really amazing.”

**-FGDM Facilitator**  
(Mitchell, 2020, p. 217)

2014, p.6; Munro et al, 2018, p.8; Connolly, 2005, p.532; Kim et al, 2016, p.262; New Zealand Ministry of Social Development, 2012, p. 1; Schmid and Morgenshtern, 2017, p.332; NSW Government, 2022, p.7). Positive outcomes correlated with a social worker's capacity to facilitate follow-up communications and meetings with youth and families (Boxall et al., 2012, p.xii; Munro et al.,2017, p.8; Sieppert et al., 2000, p. 387; Kim et al., 201, p.263; Schmid, 2017, p.332; NSW Government, 2022, p.7).

The last recurring theme within this set of findings revealed that the skill and expertise of the FGDM facilitator play a pivotal role in the FGDM process. Given the intricate dynamics often present in FGDM meetings, holding potential tensions among youth, family, and community members, the capacity and skill of social workers in mediating these complex relationships and discussions while upholding a secure and comfortable atmosphere was identified as being paramount for fostering active and respectful communication within meetings (NSW Government, 2022, p. 7; Boxall et al., 2012, p.xii-xiii; Dijkstra et al., 2017, p.258-261; New Zealand Ministry of Social Development, 2012, p. 2).



## FINDING #2: INSUFFICIENT PREPERATION AND COMMUNICATION

A second finding within the literature revealed consistent reports of families feeling unprepared for the FGDM process and a lack of adequate communication through the FGDM process. As mentioned in the previous finding, thorough preparation preceding FGDM sessions was identified as being essential to instilling a sense of comfort and security among youth, families, and community members, thereby amplifying their engagement during meetings. Many participants in the FGDM process reported a lack of the preparation leading up to a FGDM meeting, hindering the overall process of FGDM (Boxall et al., 2012, p. 18-19; Te Awa Tea Violence Research Centre 2014, p. 8-9; New Zealand Ministry of Social Development, 2012, p. 2-3, NSW Government, 2022, p. 56-58; Ney et al., 2013, p.18). Adequate preparation of youth who may be participating in a FGDM meeting was identified in some literature as being particularly important, as these meetings typically

“The engagement with the young person needs to be strengthened so they understand what is happening. There is so much going on for them at the time... I think the whole process could be done alot better especially for young people and children.”

**-Caregiver of family in FGDM program**

(Te Aware Violence Research Centre, 2024, p. 25)

carry sensitive conversations that could potentially be (re-) traumatizing for youth (Te Awatea Violence Research Centre, 2014, p.37-39; NSW Government, 2022, p.38-39; Holland and O'Neill, 2006, p.99-103; Edwards et al., 2020, p.325-226; Munro et al., 2017, p.24).

A recurring finding within the literature, alongside reports of inadequate preparation for the FGDM process, was a noticeable lack of follow-up communications with youth and families following the process of FGDM (Te Awatea Violence Research Centre, 2014, p. 25; Boxall et al., 2012, p.41-42; Ney et al., 2013, p. 194; Sieppert et al., 2000, p. 387, New Zealand Ministry of Social Development 2012; Schmid and Morgenshtern, 2017, p. 332). As mentioned in the previous finding, communication, both throughout and following the FGDM process, was noted as a crucial component for ensuring the well-being of youth and families and adherence to the family plan created in a FGC.

### **FINDING #3: USE OF RESOURCES**

The third recurring finding in much of the literature concerned the use of resources that FGDM programs may require of child welfare ministries. The resources typically required of FGDM include: the training of FGDM facilitators, renting a neutral and comfortable space for youth, family members, community members, and an FGDM facilitator to hold a meeting, and any travel accommodations required to attend a meeting in these spaces. Another crucial resource consideration in the facilitation of FGDM processes was identified as the availability of time, emotional capacity, and accessibility for a social worker or FGDM facilitator to potentially dedicate a full day outside the office or ministry to travel and facilitate an FGDM meeting.

The utilization of resources and funding necessary for the facilitation of FGDM programs has prompted concerns among ministries and child and family service agencies cited within the literature, some of which may be unable or unwilling to allocate these resources (Boxall et al., 2012, p.xii, Munro et al., 2017, p.8; Sieppert et al., 2000, p. 384,89; Connolly, 2005, p.536; Kim et al., 2016, p.262; Brown, 2003, p.335-226; Raraport et al., 2019, p.297; Schmid and Morgenshtern, 2017, p.329; Rauktis et al., 2017, p. 737). When resources are limited for the FGDM process, the result may be a decrease in the quality and value of FGDM, with minimally trained facilitators, a decrease in the accessibility for family and community member attendance, and

**FGC is expected to generate incremental social value... Every \$1 spent on the FGC program, society will recoup \$7.2 on average.**

(NSW Government, 2022, p.13)

holding FGDM meetings in spaces most financially convenient for ministries, which are typically government office spaces that may be associated with trauma for youth and families (Boxall et al., 2012; Munro et al., 2017; Connolly, 2005; Kim et al., 2016; Rauktis et al., 2017, Ministry of Child and Family Development, 2017).

Despite the significant use of resources that FGDM processes may require of ministries and child and family service agencies, some of the literature highlights that FGDM is cost-effective when the process is effectively managed to reunite families and lessen their involvement with child protection services (NSW Government, 2022, p.13; Foundations UK, 2023, p.3; Boxall et al., 2012, p.2; Munro et al., 2017, p.8)

## **FINDING #4: CO-OPTATION**

The final finding revealed within the literature review highlights various concerns expressed by families and youth who have participated in FGDM, particularly regarding the co-opting of the FGDM process. Some of the literature on FGDM program evaluations highlights that FGDM meetings are often scheduled at the convenience of the agencies that are conducting them, which typically fall during school or work hours, and within government office spaces (Connolly, 2005, p.530, 535, Kim et al., 2016, p.262; 66, 67; Ney et al., 2013; New Zealand Ministry of Social Development, 2012, p. 2-3). Scheduling meetings based solely on agency convenience can inadvertently exclude certain family and community members, potentially dissuading their attendance. Additionally, holding meetings at the government offices can evoke negative or traumatic associations for some participants, further discouraging their engagement (Connolly, 2005, p.530, 535, Kim et al., 2016, p.262; 66, 67; Ney et al., 2013; New Zealand Ministry of Social Development, 2012, p. 2-3; Ministry of Child and Family Development, 2017).

A recurring finding within the literature further reported concerns from families, youth, and their support networks feeling as though social workers or facilitators were coming into FGDM meetings with a pre-conceived plan for the family (Te Awatea Violence Research Centre, 2014, p.7; Frost et al., 2014, p.505; Kim et al., 2016, p.263, 66, 67; New Zealand Ministry of Social Development, 2012, p.2-3; Ney et al., 2013, p. 195; NSW Government, 2022, p. 41-42). A perceived dominance of the FGDM facilitator or social worker from youth, family members, and community members apart of FGDM meetings not only undermines the core values of

“I just felt like I was on trial, I suppose... they did put up on the board what they thought we were doing right, but there was more negative emphasis on it than there was positive. It wasn't here's what they're doing right and here's how we can support them in the things they aren't doing so well... it was sorry of like, ok here's our [Ministry's] solution to what's wrong.”

**-Parent in FGDM program**  
(Ney et al., 2013, p.195)

FGDM, but fosters a power imbalance in these spaces that are intended to be comfortable, respectful, and guided by the voices of family and community members.

While evidence supporting this finding may be limited compared to other findings within this research, the prevalence of reported feelings of power imbalances between FGDM facilitators and families and pre-conceived plans for youth and families within this literature remains a significant finding worth noting. These concerns reveal cases of the FGDM process being co-opted away from the control of the families and youth who they are for, which fundamentally stands against the core values of FGDM.

“I have seen where it’s a matter of, ‘we’ve got to tick this box because we have to ask them’. So, let’s just have one when they do have a pre-determined outcome. The children are going to remain in care or their direction is that there’s no realistic possibility of restoration.”

**-FGDM Facilitator, Australia**  
(NSW Government, 2022, p.57)

## **THE ABORIGINAL POLICY AND PRACTICE FRAMEWORK & COLLABORATIVE PRACTICE DECISION-MAKING**

### **A GUIDING FRAMEWORK FOR COLLABORATIVE PRACTICE**

The Aboriginal Policy and Practice Framework (APPF), is “an overarching framework intended to improve outcomes for Aboriginal children, youth, families and communities through restorative policies and practices” in MCFD (BC MCFD, 2015, p. 2). The Circle process identified in the APPF is a strength-based and holistic way to support policies and practice and ensures that the right people are brought together to collectively plan, make decisions, and commit to actions that ensure the well-being of Indigenous peoples. The APPF is well aligned with the underlying principles and purpose of CPDM and the findings of this literature review. In the following section, I use the Circle process from the APPF to demonstrate how CPDM can be a meaningful and effective program for working with Indigenous youth, families, and communities:

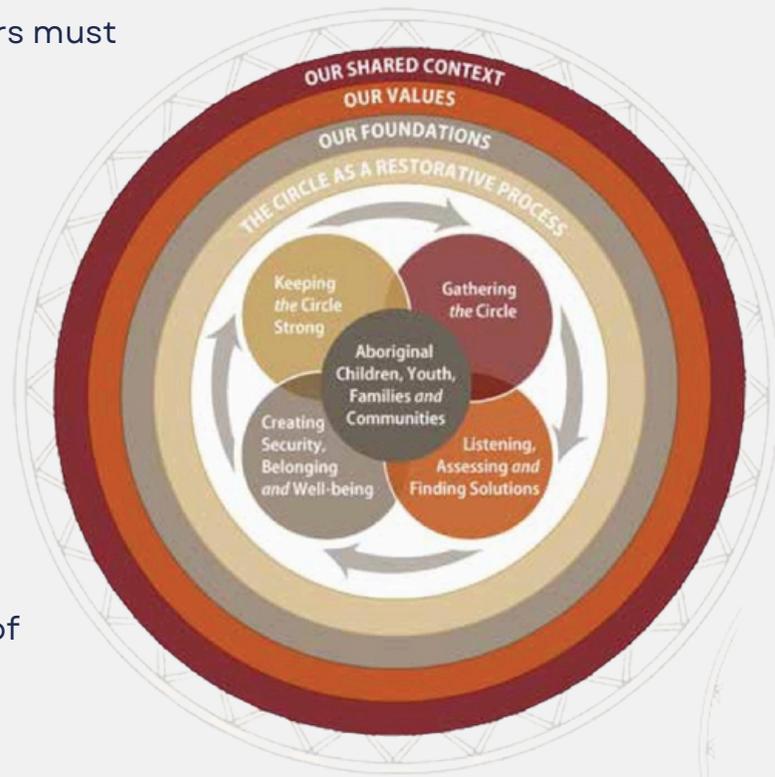
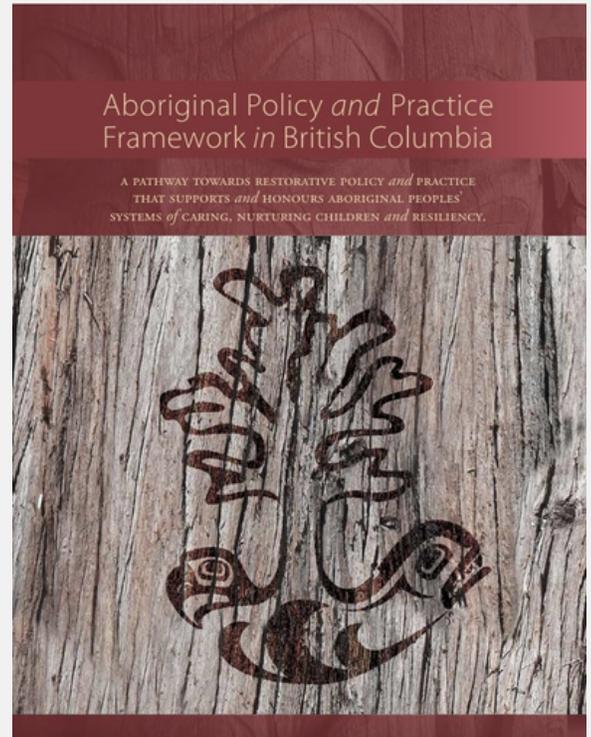
**Gathering the Circle:** Ensure that engagement with families and youth are appropriate by ensuring that the right people are involved in the CPDM process, the necessary knowledge and understanding are being sought, and the context for appropriate decision-making is set.

**Listening, Assessing, and Finding Solutions:** CPDM meetings should be guided in the spirit of collaboration, sharing, respect, and learning when working with Indigenous youth, families, and communities. The CPDM process should focus on ensuring that the most culturally safe approaches and solutions can be found.

**Create Security, Belonging, and Well-Being:** CPDM facilitators must ensure actions are planned in a manner that ensures Indigenous youth’s cultural connections are nurtured, maintained, and strengthened. This requires the inclusion of ancestors, Elders, community, family, and extended family in CPDM meetings and a trauma-informed approach to the process.

**Keeping the Circle Strong:** CPDM facilitators must recognize that the process does not end following a meeting. Trust, open communication, and maintaining connections are pivotal to ensuring the the wellbeing of Indigenous youth and families following CPDM.

MCFD has a responsibility to uphold the APPF in the implementation of their programs and practice. This extends to the facilitation of CPDM and its role in supporting and honoring Indigenous ways of knowing and being.



# RECOMMENDATIONS

In alignment with the MCFD service plan, the British Columbia Child, Family, Community Service Act, and the Aboriginal Policy and Practice Framework, the following recommendations can assist MCFD in their operating of CPDM programs. The following recommendations were developed in consideration of the above findings on general themes from program evaluations of FGDM models in Canada and internationally. The recommendations are two-fold, with one set providing recommendations for potential innovations to CPDM programs at MCFD, as well as recommendations for the process of a potential program evaluation of CPDM at MCFD.

## COLLABORATIVE PRACTICE DECISION-MAKING IN PRACTICE

### **RECOMMENDATION #1: FOSTER BOTTOM-UP IMPLEMENTATION**

Promoting a bottom-up approach to the implementation of CPDM programs entails the integration of essential values that align with the core principles of the FGDM model, which are integral to its efficacy. This necessitates a conscientious approach from social workers and CPDM facilitators, characterized by reflexivity in their coordination and communication with youth and families. Central to this approach is ensuring that the perspectives and needs of all participants - youth, family members, and community stakeholders involved in CPDM meetings - are not only heard but also actively influence the decisions and implementation of CPDM programs. By prioritizing empowerment, CPDM programs must ultimately reflect the voices and needs of the youth and families that they seek to serve, thereby enhancing their effectiveness (Boxall et al., 2012; Kim et al., 2016; New Zealand Ministry of Social Development, 2012; NSW Government, 2022; Schmid et al., 2017).



### **RECOMMENDATION #2: ENHANCE COMMUNICATION AND FOLLOW-UP**

The findings from this literature review underscore the critical importance of effective communication channels between social workers, CPDM facilitators, and families about this process. To enhance communication and subsequent

follow-up, it is recommended to establish a realistic limit on the caseloads of social workers and CPDM facilitators within MCFD. Doing so, it guarantees that CPDM facilitators have adequate time and emotional capacity to engage with youth and families before, during, and after the CPDM process. Additionally, implementing a requirement for ongoing follow-up appointments between CPDM facilitators and the family’s social worker is recommended. This ensures proactive engagement to monitor the progression of family plans and ensure these plans it is working well for the family and child (Boxall et al., 2012; Connolly, 2005; Hart et al., 2021; New Zealand Ministry of Social Development, 2012; NSW Government, 2022; Raraport et al., 2019; Schmid et al., 2017; Sundell et al., 2001; Te Awatea Violence Research Centre, 2014).

**RECOMMENDATION #3: STRENGTHEN FACILITATOR EXPERTISE**

As evident by the findings of this research, CPDM facilitators wield significant influence over the success of the CPDM process. To fortify their capabilities, it is recommended that facilitators possess a high level of maturity in child protection practice and a strong comprehension of strength-based approaches, enabling them to adeptly navigate the CPDM process. This recommendation arises from the potential tensions that may arise in CPDM meetings, underscoring the necessity for facilitators to be thoroughly equipped to manage such situations effectively. Implementing this recommendation could involve implementing a standardized assessment and training program for CPDM facilitators, emphasizing strategies to address potential tensions and mitigate risks that may arise during meetings (Boxall et al., 2012; Connolly, 2005; Hart, 2021; Munro et al., 2017; NSW Government, 2022; Schmid, 2017).



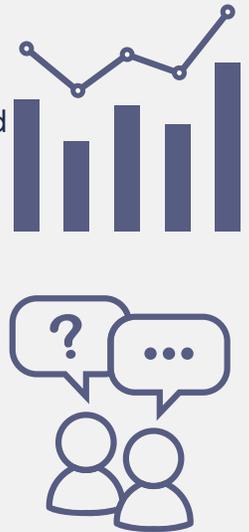
**RECOMMENDATION #4: PROMOTE CULTURAL SAFETY AND INDEPENDENCE**

Ensuring cultural safety is pivotal for the successful implementation of CPDM. CPDM facilitators must actively integrate the APPF into their practices, providing culturally safe support to families of diverse backgrounds within CPDM. To prevent the inadvertent co-opting of CPDM by social workers and facilitators, it is recommended that they maintain independence from each other. This autonomy helps preserve the neutrality of CPDM, particularly by avoiding pre-discussions about the youth and family’s situation (Boxall et al., 2012; Bruce et al., 2020; New Zealand Ministry of Social Development, 2012; NSW Government, 2022; Schmid and Morgenshtern, 2017; Sundell et al., 2001).

# PROGRAM EVALUATION OF COLLABORATIVE PRACTICE DECISION MAKING AT THE MINISTRY OF CHILD AND FAMILY DEVELOPMENT

## **RECOMMENDATION #5: ADOPT A MIXED-METHODS APPROACH**

Adopting a mixed-methods approach for a formal program evaluation at MCFD offers the most comprehensive means of assessing the achievements and limitations of CPDM. By integrating both qualitative and quantitative methodologies, this evaluation ensures a thorough examination of CPDM, incorporating participants' perspectives alongside quantitative data to gauge overall efficacy. A recommended quantitative assessment could entail analyzing statistical data on child welfare indicators before and after CPDM intervention in the lives of youth and families. Additionally, a qualitative assessment utilizing interviews, focus groups, and observations of CPDM in action would further enrich the program evaluation process (Boxall et al., 2012; Corwin et al., 2005; Cuning and Bartlett., 2006; De Jong and Schout, 2018; Kim et al., 2016).



## **RECOMMENDATION #6: PRIORITIZE PARTICIPANT VOICES AND REFLEXIVITY**

Echoing Recommendation #1, it is imperative that the voices of youth, families, and community members engaged in the CPDM process occupy a central role in any potential program evaluation. Their insights and recommendations should serve as pivotal components of the evaluation framework. In this regard, conducting interviews with CPDM participants - youth, families, community members, and facilitators - emerges as the most effective approach for capturing their perspectives and experiences of the process. Further, it is essential for those conducting the program evaluation to demonstrate reflexivity in their approach, acknowledging and mitigating their own potential biases and positionalities within the evaluation process (Connolly, 2005; De Jong and Schout, 2018; Kim et al., 2016; Mitchell, 2020; NSW Government, 2022; Sheets et al., 2009; Sundell et al., 2001).

## **RECOMMENDATION #7: ENGAGE INDIGENOUS AND COMMUNITY STAKEHOLDERS**

Pivotal to a potential program evaluation of CPDM at MCFD will be engaging with Indigenous and community stakeholders. Consulting with Indigenous communities and ensuring that their perspectives, needs, and cultural considerations are integrated into an evaluation is necessary. Further, the APPF and Circle Process is an excellent tool for ensuring that a potential evaluation is holistic and protecting the well-being of families and communities (Boxall et al., 2012; Griffore and Bethune, n.d; Hart and Robinson, 2021; NSW Government, 2022; Sheets et al., 2009; Te Awatea Violence Research Centre, 2014).

# CONCLUSION

The findings from the literature review highlight the transformative potential of FGDM in reuniting families and reducing their involvement with child protection services, provided the process is skillfully managed and effectively communicated. These insights underscore the importance of integrating FGDM core values into the broader framework of child welfare, and signalling a potential paradigm shift in how child welfare interventions are approached and practiced. By prioritizing the voices of families and youth involved in MCFD, we not only validate the experience but also pave the way for more inclusive and effective decision-making processes within the child welfare system.

The four identified findings: the power of effective management, insufficient preparation and communication with families, the use of resources required, and the co-optation of FGDM away from the control of families, offer valuable insights for enhancing the implementation of CPDM within MCFD. Through each of the provided recommendations for both the practical application of CPDM within MCFD and the imperative of conducting a formal program evaluation lies an opportunity to refine existing practices and ensure they align more closely with the needs and experiences of families and youth. Embracing these recommendations is crucial for fostering a culture of accountability, transparency, and responsiveness within MCFD, ultimately leading to improved outcomes for children and families involved in the child welfare system. This moment presents an opportunity for MCFD to reaffirm its commitment to meaningful engagement and continuous improvement in its effort to support and protect children and families through a formal program evaluation of CPDM.

“No one aspect of life takes precedence over any of the others, both within the individual, and with people and other life within this world. It also means that everything we do, impacts something else and that we are impacted by the actions of other life. In this way, life is a circle that moves in cycles. As such, when children are removed from the centre of the circle, it impacts the family, community, and nation.”

**-Ma Mawi Wi Chi Itata Centre, Winnipeg - Manitoba**

(Hart et al., 2021, p. 19)

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