CHAPTER 8

# A Sacred Family Circle: A Family Group Conferencing Model

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The development of "A Sacred Family Circle," family group conferencing (FGC) model in north central Alberta, emerged out of a need to engage in a collaborative research inquiry project that addresses the over-representation of Aboriginal children requiring Child Intervention Services (CIS). This chapter explores FGC as a means to work effectively with Aboriginal children and families involved with CIS, and to discuss this in the context of the work being carried out by Region 7, North Central Alberta Child and Family Services (CFSA). In particular, the chapter:

- reviews the history of FGC and how this concept is understood within the Region 7 CFSA,
- illustrates why policy makers and practitioners need to understand why our Aboriginal population is so "unhealthy" and in such a dependent position in Canada,
- describes how the FGC program was developed,
- overviews the FGC process from referral stage onward, and

- discusses the potential of the Sacred Family Circle to offer a decolonization journey for Aboriginal children and families involved with CIS.

## THE CONCEPT OF FGC AS UNDERSTOOD WITHIN THE REGION 7 CFSA

According to Burford and Hudson (2000), FGC offers a new approach to working with families involved with CIS. It is a collaborative dispute resolution process that empowers families to make and implement decisions regarding the care and protection of children experiencing or at the risk of maltreatment. In Region 7 CFSA, a family conference involves a formal meeting, where members of the child's immediate family come together with the extended kin and members of the child's community who are, or might become, involved in order to develop a permanency plan. Permanency, as defined in Alberta's Child, Youth and Family Enhancement Policy, refers to a placement other than in the care of the director, where, either the child is returned to his or her legal guardians, or placed under a private guardianship or adoption order (Alberta Ministry of Children's Services, 2005). The family's plan, once approved by the referring caseworker at the conference, is incorporated into the service plan, and, if required, presented in court. Subsequent review meetings are held over the course of several months, until the planned goals are achieved. A home coming celebration is often planned by the family after the child's file is closed.

Objectives for FGC, as listed in the FGC Region 7 CFSA Manual (Desmeules, 2004), are to:

a. ensure children, youth, and families have a voice in decisions that affect them,
b. prevent the occurrence and reoccurrence of child abuse and neglect,
c. prevent children from experiencing multiple placements, either in or outside the family,
d. achieve permanency for children in a care placement other than in the care of the director,
e. successfully transition a youth to adult independence,

    f.   maintain a child's connection to his or her family, culture, and community,

    g.   expedite the court process, either by presenting agreed upon plans in court, or diverting cases from court, and

    h.   break the cycle of intergenerational abuse in Aboriginal families, stemming from the residential school system and colonization. (p. 4)

Conferences can be referred by the caseworker if a case meets one or more of the program objectives mentioned above. In addition, the FGC facilitator will also incorporate family members' expectations regarding what they hope to see accomplished.

## HISTORY OF FGC AND UNDERSTANDING ROOT CAUSES OF THE PROBLEM

The use of FGC in child welfare originated in New Zealand with the *Children, Young Persons and Their Families Act*, 1989. According to Wilmot (2000), the creation of this Act "was a result of the concerns raised by the Indigenous Maori population over standard child welfare practices and their implications on tribal families" (p. 1). In the early 1980s, the Maori leadership became aware of the actions taken by the New Zealand government, which, due to concerns regarding the protection of Maori children, were removing them from their family homes at excessive rates. These children were primarily placed in non-relative state care. Consequently, the Maori people lobbied for legislation to incorporate traditional tribal practices. These practices involved Whanau Hui meetings, which became known as FGC, and were used to resolve issues related to the care and protection of their children.

Prominent persons, such as Mike Doolan, Chief Social Worker for the Children, Young Persons and Their Families Agency in New Zealand, strongly supported this type of legislation. This is evidenced by his 1988 paper, *From Welfare to Justice*, which "urged that legislation be framed that gives Whanau/family real status in the decision-making process of the judicial system" (Doolan, 1999, p. 2).

According to Barbour (1991), this legislation enables and empowers families to make and implement decisions in cases of

abuse, neglect, and delinquency. The emphasis placed on FGC grew out of a number of political concerns, including:

- the perceived disintegration of the traditional family structure and the growing number of youths, particularly minorities, living in out-of-home care; the increased length of time in these settings; the multiple nature of these placements;
- a shift toward reducing government interventions;
- increased emphasis on community participation and accountability; and
- decentralization of government services to local solutions. (p. 17)

The Aboriginal experience with colonization in Canada mirrors the Maori situation. To better understand why Aboriginal children and families are over-represented in child welfare caseloads today requires one to revisit the past.

The Royal Commission on Aboriginal Peoples (RCAP) reported on how Aboriginal people are, as it describes them, the first peoples in last place. By all measurements of the human condition, Aboriginal people lead in the statistics of suicide, alcoholism, family violence, family breakdown, substance abuse, poverty, and school drop-out (Indian and Northern Affairs Canada, 2006). The central question that needs to be understood is: Why are Aboriginal people in such a vulnerable position in Canadian society? Smith (1999) proposed that this condition is primarily due to the effects of "ethno-stress," caused by colonization of Aboriginal peoples. Ethno-stress, according to Antone, Miller, and Myers (1986), "occurs when the cultural beliefs or joyful identity of a people are disrupted" (p. 7).

Prior to European contact, much like the Maori's experience in New Zealand, Aboriginal people in Canada were living a healthy communal lifestyle. Elders, parents, and tribal members all shared in the responsibilities of teaching their children tribal values and cultural ways for community survival. This harmonious lifestyle was eroded with the arrival of Europeans, through centuries of colonization and assimilation policies. The following two quotes offer a framework to begin this discussion:

> The relationship that has developed over the last 400 years between Aboriginal and non-Aboriginal people in Canada… has been… built on a foundation of false promises—that Canada was, for all intents and purposes, an unoccupied land when the new-comers arrived from Europe; that the inhabitants were a wild, untutored and ignorant people given to strange customs and ungodly practices; that they would in time, through precept and example, come to appreciate the superior wisdom of the strangers and adopt their ways; or, alternatively, that they would be left behind in the march of progress and survive only as an anthropological footnote. (Report of the Royal Commission on Aboriginal Peoples, 1996, as cited in Henry, Tator, Mattis, & Rees, 1995, p. 119)

Further,

> Policies and practices that evolved between Aboriginal peoples and White society over the past 400 years have been based on the assumption that Aboriginal people were inherently inferior and incapable of governing themselves. Therefore, actions deemed to be for their benefit could be carried out without their consent or involvement in design or implementation. (Henry et al., 1995, p. 119)

This line of thinking was reflected in the *British North American Act* in 1867.  In 1874, Prime Minister John A. MacDonald introduced the *Indian Act*, including the following rationale:

> Indian children should be taken away from their parents so as to eliminate their barbarian influence and expose children to the benefits of civilization. The teacher has been sent out as an educational missionary to introduce cultural changes in Indian societies. (Green, as cited in Makokis, 2000, p. 17)

In the 1800s, the Canadian government and Christian churches established the residential school system, which according to Bird, Land, and Macadam (2002), was one of the most "insidious tools of assimilation," which, in effect, "formalized family breakdown as a matter of national policy" (p. 94).

According to the Aboriginal Healing Foundation (2003), from the

mid-19th to the late 20th centuries, there were more than 150 residential schools operating across Canada. In Alberta alone, there were 33 residential schools in operation. Indian, Inuit, and Métis children were compelled to attend these schools. The Aboriginal Healing Foundation proposes that many generations have suffered from the legacy of residential schools even though they did not personally attend the schools. "Children of residential school survivors, in response to their parents' unresolved trauma, developed the same or new defense/coping mechanisms and behaviours that, in most situations, are as unhealthy as the behaviours of those who experienced the original trauma" (Aboriginal Healing Foundation, as cited in Ma'mowe Child and Family Services Authority, 1999, p. C-14).

The loss of culture, community, and family caused by the residential school system was devastating. Those who survived residential school and returned home often found that their family members had migrated or died. In other cases, the returnees were rejected because they were seen as outsiders, raised by the "White" world, and no longer Indian. The term "apple," meaning white on the inside and red on the outside, still exists in conversation today.

A Cree Elder and residential school survivor, George Brertton, eloquently sums up the occurrence of child abuse by saying, "hurt people, hurt people." In more specific terms, the Aboriginal Healing Foundation (as cited in Ma'mowe Child and Family Services Authority, 1999), explained that:

> Various forms of abuse, low self-worth, anger, depression, violence, addictions, unhealthy relationships, fear, shame, compulsiveness, lack of healthy parenting skills, body panic and panic attacks are passed on from one generation to the next. (p. C-14)

From the 1890s to the 1970s, the number of Aboriginal children needing substitute care escalated. The negative and devastating impacts of residential school on community life resulted in a dramatic increase in the need for children to receive protective care. The reason for this is explained by Honourable Murray Sinclair:

> You cannot take a child and separate that child not only from his or her mother and family but also separate that child from his sis-

ters, his brothers, his aunties, his uncles, any adult of any impor-
tance to him; and put that child in an environment where they
don't see a loving and caring family environment, and then ask
that child to return, become a parent, and expect them to be able
to function properly. (Sinclair, 2000, p. 7)

Subsequent to the residential school era, child welfare workers
took on the role of apprehending Aboriginal children in need of child
protection services. Large numbers of children were removed from
their homes and placed into non-relative care, disconnected from
their families and culture. For some, this resulted in the severing of
their ancestral ties. Many stories were told about child welfare work-
ers coming onto the reserves and apprehending children who were
then adopted by persons of non-Aboriginal ancestry. A graduate stu-
dent had such a story to share. She discovered that her mother was
taken from a reserve in Saskatchewan, and placed in a very affluent
English home in Victoria, British Columbia, where she said she was
raised with all the luxuries, learned how to play piano, etc. She was
brought up and expected to behave as a "White" person. Before her
death, she shared with her daughter her anguish about not really
knowing who she was. After the passing of her mother, this student
obtained a copy of her mother's records from social services, in
search of her ancestry. One sentence revealed the identity of her
mother; she was a Cree woman from Saskatchewan. The student was
then able to reclaim her Aboriginal heritage, and became a member
of the Métis Nation in British Columbia.

A basic question in life, and what every human being wants to
know is: Who am I? This leads one to ask other questions, such as,
Where did I come from? Why am I here? and What is my purpose in
life? The Cree woman from Saskatchewan was not afforded the
"privilege" of knowing who she was. This has significance in current
practice. For example, when a caseworker is approving a permanen-
cy plan, and dealing with other matters to be considered in the *Child,
Youth and Family Enhancement Act* (CYFE), they are required to
respond to the question: What is in the best interests of the child?
Caseworkers often place the child permanently with extended family,
even when family ties have been disconnected for years. In such
cases, transition planning takes place, and the child is reintroduced

(repatriated) to his or her home community and family. However, in situations where the child has formed significant attachments to foster parents who are willing to be permanent caregivers, some caseworkers still support placement of a child outside of extended family options. This debate is layered in shades of grey, because deciding what is in the best interests of the child varies dramatically from case to case. Historically, placing Aboriginal children outside their extended family and culture has proven unsuccessful in reducing the over-representation of Aboriginal children in CIS. Bird et al. (2002) wrote that "Canada's attempts to assimilate Aboriginal people (so they become just like other Canadians) has been disastrous in the past, and will not work in the future" (p. 133).

By the early 1980s, the "child rescue" approach was falling under heavy criticism. In Alberta, a moratorium on First Nations adoptions was put into place in the early 1990s, due to lobbying First Nations communities who "called for the end of the sixties scoop practice of apprehending children and placing them in non-Aboriginal homes" (Alberta Ministry of Children's Services, 2001, p. 9).

It is essential for practitioners and policy makers to recognize the levels of mistrust, resentment, and fear experienced by Aboriginal families who have a history of involvement with CIS. Historical reflection reminds policy makers of the need to rebuild relations. Adopting a Euro-centric service delivery approach has led to inter-generational cycles of abuse. Practices such as FGC reflect a necessary shift in the crafting of policy. It works on the principle of building and strengthening relationships, and provides the opportunity to honour traditional decision-making and healing practices.

> FGC has always been there, it came from our forefathers, which was taken away hundreds of years ago… this practice goes back to tribal ways, when members sit together in a circle and determine what to do. (Desmeules, 2003, p. 72)

## BUILDING CAPACITY—A PARTNERSHIP MODEL RESPECTING ABORIGINAL VALUES

The development of the FGC model in north central Alberta was informed by a Participatory Action Research (PAR) project, spon-

sored by Region 12 Sakaigan Asky CFSA (now known as Region 7 CFSA). Using a qualitative research methodology, community residents were encouraged to work collaboratively to find new ways of knowing. PAR emphasizes meaning-making and discovery, and involves gathering and analyzing data in a systematic way and following a continuous improvement model. The key principle in PAR is that organizational and community members are involved from the very beginning in the design, execution of the research, production of conclusions, and implementation of recommendations. To oversee this PAR project, a mentorship collaborative was developed, comprised of Aboriginal children, youth and families, Elders, Ministry of Children's Services, Native Counselling Services of Alberta, and Blue Quills First Nations College. The principal question was how to deepen our understanding of Family Group Conferencing, partnerships, and our collective capacity to support Aboriginal children and families involved with CIS? Other questions included whether it was possible for an established culture of service delivery (children's services) to change in a significant manner and how could FGC honour the principles inherent in self-determination, and achieve Alberta Ministry of Children's Services outcomes?

The collaborative inquiry revealed that FGC was seen as more than merely being a decision-making process. The participants felt that the process afforded the opportunity for building positive relations, reconciliation, healing, collaborative problem solving, forgiveness, visioning, and strengthening the family and community system that supports the child needing intervention services. It was perceived that FGC is not a one-time event; it entails a journey the family undergoes until balance is restored, and permanency achieved for the child in care. Mentorship committee members deliberated on how FGC offers a leverage point that facilitates the paradigm shift from that held by conventional CIS, to one that is more respectful of Aboriginal traditions. Table 1 depicts this paradigm shift.

FGC is a solution-focussed process that requires caseworkers to see families as valuable resources in developing a plan. This is a vision-building process that asks family members what they would like their family to be or look like. The family is considered the expert in determining what needs to be included in the plan for the children to be happy, feel secure, and be successful. Everyone has a

**Table 1. From conventional  CIS to FGC**

| From... | To... |
| --- | --- |
| Problem focus | Solution focus |
| Families as problems | Families as resources |
| Reactive | Proactive behavior |
| Fault finding | Claiming responsibility |
| Consultation | Collaboration |
| Professionals | Everyone |
| Crisis management | Vision building |
| Despair | Hope |
| Controls | Consent |
| Prescriptive | Creative |
| Service centred | Care centred |
| Fragmentation | Collective effort |
| Poor relationships | Relationship building |

Adapted from various sources by Sharon Steinhauer, Blue Quills First Nations College; and Kim Kelso, Consultant.

role in the process, and everyone's voice is heard. FGC is a creative process, and it is not prescriptive. By using this creative, collaborative problem-solving approach, unexpected outcomes transpire.

From a capacity-building perspective, FGC represents an opportunity for Aboriginal families to practise self-determination, meaning Aboriginal people have "the authority to make their own choices as to how they are governed" (Frideres, 1998, p. 359). This process allows the family to establish its own rules regarding how to govern itself in addressing the child protection issue. By virtue of fully engaging the Aboriginal community in the design, delivery, and evaluation of the FGC model, a true partnership is created. Cultural values and practices can then permeate how the model is governed. Taking a collaborative approach offers a liberating opportunity for Aboriginal people to partner with CIS, to bring about a better reality for themselves, their families, their communities, and their Nations.

The study concluded that FGC, as adapted by this project, is Indigenous in origin and universal in its application for families from different cultural, ethnic, and religious backgrounds. According to Scheiber (1995), the roots of FGC trace back to traditional Aboriginal cultures, in which "the care and decision making for children was

considered the natural responsibility of the extended family and community as a whole" (p. 153). The majority of referrals in Region 7 CFSA involve Aboriginal families. Interestingly enough, non-Aboriginal families referred to the program express no difficulty with the program, but rather appreciate its values and philosophy, and the way in which the conference is conducted. Participants are seated in a circle, signifying equality and interconnectedness, with an Elder or spiritual leader present. Everyone has a voice, and is respected. There are nine value categories commonly used across many Aboriginal cultures (Gaywish, as cited in Hart, 2002), which underscore the FGC model. They are:

1. Vision/wholeness, spirit-centred,
2. Respect/harmony,
3. Kindness,
4. Honesty/integrity,
5. Sharing,
6. Strength,
7. Bravery/courage,
8. Wisdom, and
9. Humility.

The intention of FGC from an Aboriginal worldview is important to consider when infusing this traditional practice into mainstream delivery systems. Rupert Ross (1996), Assistant Crown Attorney in Ontario and a leading scholar on exploring Aboriginal approaches to justice, maintains that conferencing derives its power from the worldviews that shape them. As Burford and Hudson (2000) explained, "If Western justice professionals don't understand what shaped them in the first place, we'll quickly bend them out of shape. If that happens, if we westernize them, consciously or unconsciously, I suspect that their power will be substantially eroded" (p. 6). Thus, the intention and process of the FGC needs to be shaped by the community, with Elders serving as chief advisors.

## THE FAMILY GROUP CONFERENCING PROCESS

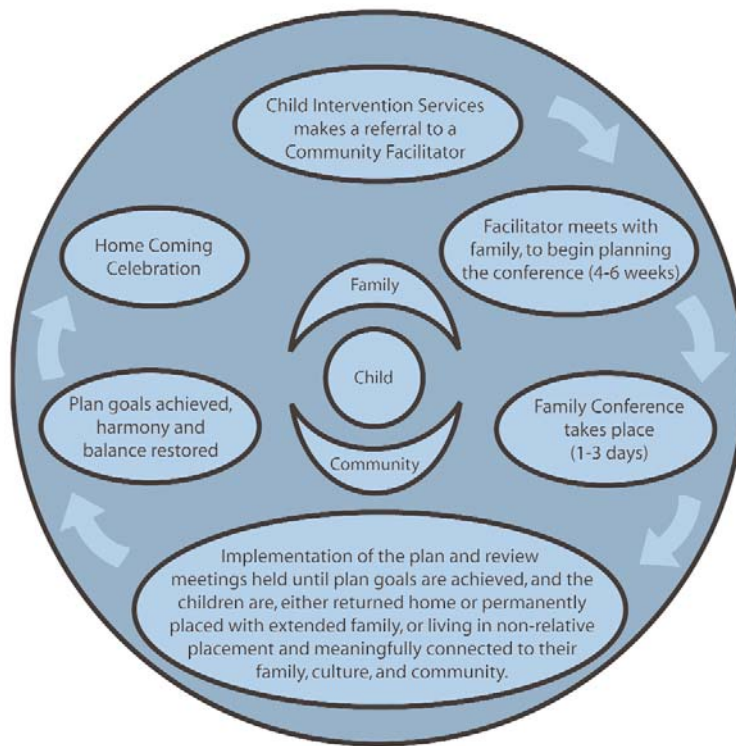Figure 1 provides a conceptual overview of the FGC process.



**Figure 1. A Sacred Family Circle: A family group conferencing model**

In Region 7 CFSA, a referral can be made at any time of involvement with Child Intervention Services. Typically, this referral is sent to a community-based facilitator who is responsible for facilitating the process from this point forward, although some CFSAs provide their own facilitation services. Available academic literature recommends an outside third party facilitator be used. This is thought to avoid conflict of interest since social workers are responsible for carrying out maltreatment assessments and any subsequent service. This "inevitably means that there are positions to defend, and work atti-

tudes and histories that affect the view of the service needed" (Marsh & Crow, 1998, p. 45). A third party community-based facilitator has no vested interest in the outcome since he or she is not involved in the assessment of the problem, or responsible for service delivery. Families are more receptive to this process if they believe the facilitator is neutral and unbiased.

The role of the facilitator is to prepare family, professionals, and children for the conference. They actively engage the family in planning the conference. They are responsible for dealing with barriers to participation, ensuring everyone's safety, and minimizing any problems participants might have working together. Facilitators are "neutral guides who take an active role in process management" (Justice & Jamieson, as cited in Alberta Community Development, 2001). They are not content experts, and those who engage in content issues often lose their power to manage the group—a power given to the facilitator by the group members.

Shortly after a referral is received, the facilitator begins engaging family members in planning the conference. Pre-conference planning is when the bulk of the work takes place. On average, community facilitators in Region 7 CFSA spend 40 to 60 hours over a 4- to 6-week period on pre-conference planning. The widest net is cast by inviting all family and kin, regardless of whether they have been estranged from the child and family for years. Adequately preparing family, professionals, and community-members can make the difference between the success or failure of a conference. Reinforcing the family's role as the primary decision maker helps promote family ownership and accountability. For example, key family members set the date, length, and location for the conference, type of food to be served, along with cultural and spiritual aspects to be included. They share with the facilitator their expectations for the conference, and ways to ensure that the children are meaningfully involved. For example, parents or foster parents can help a child make invitation cards or name tags to hand out as people arrive at the conference, or perhaps plan a social activity for the children to spend quality time with their family.

A Family Group Conferencing manual (Desmeules, 2004) was created as a resource guide for referring caseworkers and community facilitators working in Region 7 CFSA. To facilitate common under-

standing and consistency in practice, a conference agenda is included in the manual and encompasses the six main parts, detailed below.

## 1. Conference Opening

The conference usually begins by giving the families, professionals, and Elders present some unstructured time to connect with each other. An opening appropriate to the family's culture and chosen by them is then initiated, such as a prayer or smudge. The facilitator reviews the conference objectives and agenda, and helps the group to establish guidelines. Meeting guidelines attend to the emotional and physical safety for all participants, and set out what the group considers acceptable and unacceptable behaviour. In addition, the group is asked to predetermine what corrective action(s) should be taken in the event that a group member engages in unacceptable behaviour. Transferring the responsibility for establishing and enforcing meeting guidelines promotes individual and collective responsibility for a positive and productive conference experience.

## 2. Information Sharing

This part is dedicated to sharing information so everyone in the circle understands the history and nature of the problem, along with the support services available to the family. Information sharing may begin with a presentation by the caseworker regarding the history of involvement with Child Intervention Services, and the current child welfare status. Other professional members such as a First Nations/Métis designate, addictions counsellor, or peace officer may be invited to give information about his or her involvement with the family and services available. The role of the information providers is to provide information only. The information provider is not there to direct how things should go, influence the outcome by giving advice, or skewing the outcome in any way by providing selective information. An opportunity is provided for parents, youth, children, and other key family members, such as grandparents, to share family history and their views regarding the history of the problem. Sometimes, family members will speak before the caseworker and

other professional members present. The order is pre-determined by consulting with the key parties, either before or on the day of the conference.

An important element added for Aboriginal families, with their consent, is to invite an Elder to offer a teaching on the historical impacts of colonization and residential schools. The Elder may also provide information on traditional healing practices. This Elder then leads a sharing circle to give the family an opportunity to speak, to better understand the source of the family dysfunction. This is when the process of reconciliation truly begins to emerge. Often, this sharing circle will lead into a healing circle. Typically, at this point in a conference, a break is provided to allow family members to retire for the evening and to process and reflect on what they have heard. This is a highly emotional process for some family members, as they may be hearing and sharing things for the first time. A night's rest allows for reflection and recovery, before moving into planning and decision-making.

The next day, the family reconvenes. If the conference only lasts one day, then after all the information is presented and everyone has been given an opportunity to ask questions, the caseworker, professionals, and possibly the facilitator, leave the room.

## 3. Visioning

The family is given the choice of having the facilitator to lead them through a visioning exercise. Questions asked at this stage include: How would you like your family to be in one year's time? What does the plan have to include for the children to feel happy, safe, and to be successful? This is "where the full panorama of possibilities is expressed, considered through debate, consultation, and building dreams on further dreams, which eventually become the flooring for the creation of a new social order" (Battiste, 2000, p. 155). Family strengths begin to emerge, offering a solid foundation in the development of a plan. The visioning component of the FGC generates a lighter atmosphere and offers a renewed sense of hope.

The facilitator prepares the group for private family time, before leaving the room. He or she may distribute a planning template to help guide the family in their discussions and, for everyone's safety,

once again references the meeting guidelines. Also, the facilitator may need to help the group decide who should be involved in this process. For example, foster parents may be considered "family," given the presence of significant attachments with the child. In this instance, the biological family may invite the foster parents to stay during private family time. They can either accept or decline this invitation. Sometimes, the family may want to meet by itself first, and then invite the foster parents back into the circle. Foster parents will often accept an invitation to participate in family time if they are interested in being a permanent caregiver for the child through private guardianship or adoption.

## 4. Private Family Time

During this stage the family is responsible for developing a plan for the safety and well-being of the child that takes into account both short- and long-term considerations. In Region 7 CFSA, this may include the development of a concurrent permanency plan, or a transition to independence plan, per the Child, Youth and Family Enhancement Policy of Alberta Children's Services. For example, when a child is apprehended, the caseworker is required to develop a concurrent permanency plan, as follows:

| Plan A | Plan B |
|---|---|
| Reunification plan that outlines the tasks and services required to assist the parents/guardian in making the changes needed to create a safe and secure home for their child and facilitate the return of the child. | Alternative permanency plan developed for the care of the child with an alternative caregiver, preferably other family members. This plan comes into effect should reunification of the child with the guardian not occur in a timely manner. |

The benefit of developing a concurrent plan is that the child does not have to wait in a foster care placement while the parent(s) are working on making the changes required before the child can be returned. By involving other family members early in the process, a permanent placement can happen soon after the child is apprehended. Families have also been involved in making permanency plans for high-needs children who have been living in group care for years. In such cases, the primary conference objective is to connect the child to his or her family, culture, and community. Given the creative and

often unpredictable nature of this process, a family placement option sometimes emerges and the child is placed upon successful completion of a home study. During private family time, the group becomes self-facilitative and family leadership begins to emerge. The facilitator remains in close proximity to provide support, if needed, in the communication process.

## 5. Reviewing the Plan

Once the family has reached consensus on a plan, the caseworker is invited back to the conference to review the plan. The plan is approved if it satisfies the protection and permanency planning requirements of the CYFE Policy (Alberta Children's Services, 2005). There may be further negotiation and clarification required to reach an agreement. It is expected that the referring social worker will make a decision regarding approval or disapproval of the plan at the FGC. The majority of plans have been approved by the referring caseworkers since the inception of the program in 2003. Positive outcomes for the child occur even in cases where family members are unable to agree on a plan, or where the caseworker does not approve the plan. Caseworkers often share how helpful it was to meet with the family in a natural setting and to observe family interaction, communication patterns, and the level of emotional connection between the parents and children. This provides the caseworker with helpful information, when required, to make permanency planning recommendations. In cases where the review is complete and the plan has been approved, the facilitator will ask the family to select a family monitor. This person is considered a respected leader within the family. They are responsible for helping the caseworker in monitoring the completion of the planned goals and activities.

## 6. Conference Closing

Once the plan is reviewed by the caseworker, the facilitator will commence with closing activities. A sharing circle is convened for participants to reflect on how they felt about the FGC process and outcome. Written evaluations are distributed. The closing is done through a

prayer, or any other ritual in accordance with the family's religious and spiritual beliefs. Quite often, pictures are taken as a keepsake. Before everyone departs, a follow-up review meeting is set. The purpose of the review meeting is to monitor the completion of goals listed in the plan, make any necessary adjustments, and maintain a sense of joint responsibility with the family. Meeting the planned goals may take from six months to a year. A homecoming celebration often occurs after the child's file is closed.

A vital component in FGC is focussing on the needs of the children, and planning for their future. For this reason, it is important that they attend the conference. This is a significant event in a child's life. Children are encouraged to attend, to share their views, to listen, learn, and be allowed to reconnect with their families. For some, the conference gives them an opportunity to connect with family members who they have never met, or seen in a long time. After one such conference, a teenage girl shared with her caseworker that she now understands why she can't go back to live with her mother. She said she has reservations about going to live with her father, because she doesn't know him, but she is interested in setting up visits at this point. Attending the conference offered her an important learning opportunity, which enabled her to make an informed decision. Early in the referral stage, a support person is identified for the child or youth. This person is responsible before, during, and after the conference for attending to the child's emotional needs and well-being. The presence of the child(ren) at the conference, regardless of their age, is a powerful reminder for family members to put aside their differences, and work together to develop a plan.

## FGC—A DECOLONIZATION JOURNEY FOR ABORIGINAL CHILDREN AND FAMILIES

FGC is broader than a permanency planning strategy. It provides a way for Aboriginal families to break the cycle of intergenerational abuse stemming from colonization and residential schools. The critical questions that need to be asked when implementing this model in children's services are: Whose interests are being served? What is the intention? Who owns it? Who will benefit from it? What outcomes are being sought? These questions emerge as a result of judgments

people are trying to make when determining whether the authority in question has "pure" intentions, or a hidden agenda. In addition, these questions often arise due to the tremendous distrust Aboriginal people have of Child Intervention Services. Smith (1999) maintained that Western researchers (outsiders) have sought to "extract and claim ownership of Aboriginal ways of our knowing, our imagery, the things we create and produce, and then, simultaneously reject the people who created and developed those ideas and seek to deny them further opportunities to be creators of their own culture and own nations" (p. 1). A review of FGC models practised in Alberta and across North America suggests that there is a lack of articulation regarding Indigenous knowledge. In places where there is a large Aboriginal population, the absence of Indigenous knowledge in the design and delivery of services, like FGC, weakens the foundations of these services considerably.

Thus, FGC is one pathway for Aboriginal families to move forward in their decolonization journey. Understanding and valuing the process of FGC helps those involved to ensure that it is indeed a useful pathway. The following statements by participants illustrate some of the ways that they understood and valued the FGC project.

## Objectives of the FGC

To heal people, to live in peace, kindness to share with each other, and form a functional family.

To build a relationship that is in harmony with others, to grow, learn and change through relationships.

To bring us from harm to harmlessness as best that can be accomplished within that relationship.

To strengthen families. Healthy families are dependent on our tradition of strong healthy women. Our women's power has been negated. FGC allows everybody's voice to be heard once more. Right now the children's voices are not heard that often. FGC puts the balance back into families. That is the way to become self-determined people.

I see FGC as being a way of affirming the intent and purpose of child welfare services to protect children and keep them with family. Despite families being wounded and in pain, all children want their families to stay together.

## Advantages of FGC

By having family—extended family—come together, we can find creative solutions.

FGC demystifies the issues, and brings the problem out in the open; it opens the door for further help. Some family members in the circle may not even realize what is happening for the child, and will give accountability.

FGC increases accountability and desired changes in behaviour. It is easy to walk away from a relationship with a therapist as there is no relationship lost there, but to face people that you have to live with everyday, it is harder to walk away.

FGC circle is more respectful, since there is no time limit. A therapist is time restricted and a circle is not.

## Timing of the FGC

FGC should happen early in the child protection process. If you haven't been around your parent for awhile it's harder to re-build that relationship. Sometimes, if we can do this earlier, then maybe child protection services don't have to be involved.

## Making the Journey on Our Own

FGC is intended to swing the pendulum from professionally-based services, to family and other informal community supports. In doing so, it seems appropriate to make it more "our own," beginning with what it is called. Desmeules (2003) wondered, "Is FGC an appropriate name for Aboriginal communities? Conferencing is a business term; perhaps it should be called a family grounding circle. This is a warm, powerful process that's about family, in a family context" (p. 76). In response, Elder George Brertton of the Saddle Lake First

Nation, suggested "A Sacred Family Circle" be added to the FGC title, which eloquently captures the spirit of this experience for families.

## Moving Forward

In an Aboriginal context, the process of empowerment is rooted in how we as individuals are connected to everything around us. It is about restoring relationships, which is a spiritual and emotional journey, rather than a cognitive or behavioural one. Parents engaging in harmful behaviours need to connect or reconnect themselves, with their family and community to understand their pain, and the impact they are having on others. For example, Battiste (2000) talked about colonization and decolonization at the social and spiritual levels. Her perspectives were based on her experiences working with the United Nations on the issue of decolonization or liberation of Indigenous thought. She submits the following:

> One of the most destructive of the shared personal experiences of colonized people around the world is intellectual and spiritual loneliness. From this loneliness comes a lack of self-confidence, a fear of action, and a tendency to believe that the ravages and pain of colonization are somehow deserved. Thus, the victims of colonization begin, in certain cases, to blame themselves for all the pain they have suffered. (p. 7)

She maintained that the antidote is for colonized people to connect with other colonized people who share the same experiences and feelings. For the rehabilitation and healing process to begin, Aboriginal people need to learn about the impact that colonization has had on their lives, their family, and their community, to make sense of things and put things into perspective. This awareness stage represents a first step in offering a decolonization journey, and is incorporated as an option for Aboriginal families referred to FGC in Region 7 CFSA, through the sharing by an Elder, as detailed in the FGC process earlier. These stories by Elders are very well received by Aboriginal and non-Aboriginal family members, foster parents, and caseworkers. People in the circle begin to view the nature of the

problem and how to deal with it through a different lens, from a cultural historical perspective. They generate new insight, at a greater level of acceptance and forgiveness.

A Sacred Family Circle, then, is a modification of the more generally understood FGC. This modification for Aboriginal families encompasses the first two stages in the decolonization process offered by Battiste, namely rediscovery/recovery and mourning. Storytelling is the primary methodology and the first step in the healing journey. "The healing journey of individuals often begins when they come face to face with some inescapable consequence of destructive pattern or behaviour in their life or when they finally feel safe enough to tell their story" (Lane, Bopp, Bopp, & Norris, 2002, p. 59). For example, during a family conference, a mother took a courageous step by sharing her story. She explained how the abuse she had experienced growing up in care had affected her ability to take care of herself and her children. Later she said, "I finally felt heard." Sharing her story made her feel validated. It diminished feelings of blame and shame the family felt towards her. They were then able to focus on ways to support her and the children.

A sharing circle is an effective way to help individuals who have spent a significant part of their lives unaware of, or denying, that their pattern of behaviour is harmful to themselves and others around them. In conference settings, family members are able to share with each other the impact of their behaviours in a respectful and honest way. Storytelling allows participants to grieve and to mourn, and offers "a time when people are able to lament their victimization" (Battiste, 2000, p. 54). For example, while observing a family conference, a youth commented, "I didn't think so many people cared about us; I didn't think anyone would come." The mother had passed away a year before, and the boys were living with their stepfather. They had been getting into trouble with the law, using drugs, not attending school, and showed signs of neglect. In his own words, the youth shared his grief over the loss of his father, and his family relations, whom he and his brothers had not seen in over 10 years. Mourning is an essential phase in healing. It provides the family concerned with an opportunity to emotionally process and to release, in order to move forward in one's healing journey. In the example mentioned above, the boys' father, and family too, had travelled from their

First Nation community in Saskatchewan because of the loss they felt and the desire to reconnect with the boys.

Incorporating a sharing circle in the family conferencing process affords participants with a renewed sense of hope. True change is more than a cognitive process. It is a deep emotional process that can be painful. According to Elder Victoria Whalen, who resides in Edmonton, Alberta, and is currently working with incarcerated women on their healing journey, "Intellectualization is a defense coping mechanism" (personal communication). Thus, viewing FGC primarily as a decision-making process has ramifications when trying to restore harmony and strengthen family relations.

With mourning comes forgiveness. "Unless people learn to forgive (not forget), they are still holding onto feelings that hurt them" (Lane et al., 2002, p. 46). In the previous example, the father and family members were able to explain, as best they could, the reasons for their absence, and apologized to the boys. Forgiveness laid the groundwork for the boys to reconcile with their father. They began to understand why they were disconnected, which helped them let go of the pain they were holding onto. The boys ended up returning to the care of their father, an outcome that was not anticipated at the time of referral. The family was then able to move forward into a new way of being, which encompasses the third decolonization phase as cited by Battiste (2000): dreaming and shared vision. The last two decolonization phases are: commitment and action.

Family conferencing embraces the principle of inclusion and shared leadership through consensus decision-making. It offers a model of service delivery that promotes family empowerment and self-reliance. The family system, once mobilized, is more powerful than professional services. It is the participation process that makes the plan created by the family come alive as a personal reality. Family members will then commit themselves and act on making their shared vision a reality.
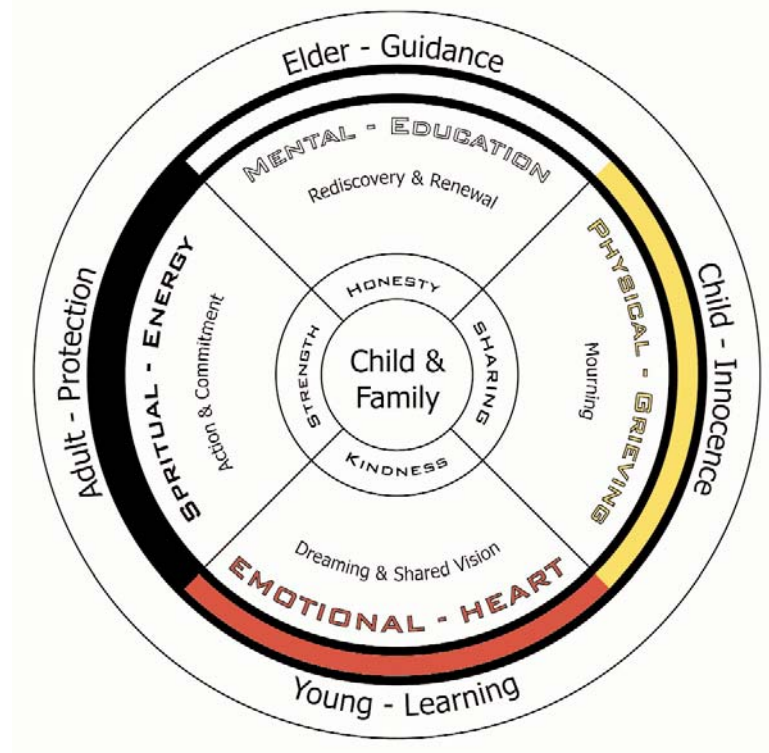
FGC offers Aboriginal families a decolonization process. To return to the earlier example, the boys and their family were empowered by the FGC process by being allowed to make decisions for themselves. They were allowed to mourn, to forgive, to regain a renewed sense of hope, and move forward into a new family social order. In other words, they were provided with a healing process by

which they could address the internalized oppression caused by ethno-stress. Internalized oppression can be described as a feeling of helplessness, loss of hope or sense of despair, which is often manifested in behaviours that are destructive and harmful to self and others. The boys in this case expressed loss of hope and a sense of despair, in thinking that they had no family who cared about them, which contributed to their destructive behaviours. Family group conferencing provided a means by which to cross old boundaries, and a safe place for the boys to be reconnected with their father and to their First Nation. The person who supervised the care of the boys felt that without the family conference, there would not have been such positive outcomes for them. FGC can break the cycle of maltreatment, by recognizing that true healing comes from within, with the love and support of people who genuinely care.

In the words of Chief Jean-Charles Pietacho and Sylvie Asile, of the Mingan First Nation:

> The process of healing must be based on our traditional spiritual values of respect, pride, dignity, sharing, hospitality, and mutual aid… Self-reliance begins with the individual, then is built by the family, then by the community, and finally, by our relations with other nations. (Indian and Northern Affairs Canada, 2004)

Acknowledging FGC as a capacity-building model, based on traditional spiritual values, will produce positive outcomes for Aboriginal children needing protection services. To illustrate the merging of Aboriginal worldviews with the FGC process, this writer presents Figure 2, which meshes the FGC process with Battiste's (2000) decolonization phases and medicine wheel teachings. This guide depicted in this illustration is offered as a starting point for readers and practitioners working with FGC to conceptualize and further refine how their model can offer a decolonization journey for Aboriginal families. The stages are fluid, cyclical, and interconnected but lead us forward in the decolonization journey.

Note: Outer circle represents four stages of life. Inner circle represents four natural laws.

**Figure 2. Decolonization journey guide for Aboriginal families and communities**

## CONCLUSION

Every day offers new insight regarding the intention of Family Group Conferencing as shared by Elders, social workers, families, and children who participate in the circle. I have come to appreciate the depth of Family Group Conferencing. The process starts by meaningfully engaging family and reinforcing them as the primary decision-maker. From there, it moves into restoring relationships, healing, recovery, a renewed sense of hope, commitment, and action required to imple-

ment a sustainable permanency plan. On a larger scale, the role that family conferencing can play in reducing the over-representation of Aboriginal children involved with Child Intervention Services remains to be seen. Though research in this area is only preliminary, there is optimism that FGC can offer a powerful decolonization journey. Partnerships between CIS and the Aboriginal community that work to break the cycle of intergenerational abuse are worthy of future research. Broadening the cultural lens and embracing traditional processes offer new ways for everyone to work together in restoring harmony and balance.

## AUTHOR'S NOTES

1. This chapter is a synopsis of my master's thesis, combined with what I have learned from coordinating the Family Group Conferencing program in Region 7, North Central Alberta Child and Family Services (CFSA). Given the impact that colonization and residential school has had on my own life and the lives of my family members, I am committed to understanding the decolonization process. As a social services worker, as a mother, and as a Métis woman, I have been afforded an opportunity to develop a service delivery model to positively impact Aboriginal children and families involved with Child Intervention Services.

2. I would like to extend special thanks to the Aboriginal families, social workers, and Elders who took part in the collaborative research inquiry and development of the Family Group Conferencing program. Special acknowledgement to my parents, Larry and Ann Desmeules, and Elder George Brertton, for their guidance, and to my children Kendra and Cora for showing me the way. My sincerest appreciation to Blue Quills First Nations College, the Ministry of Children's Services, and Native Counselling Services of Alberta, for their generous support.

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