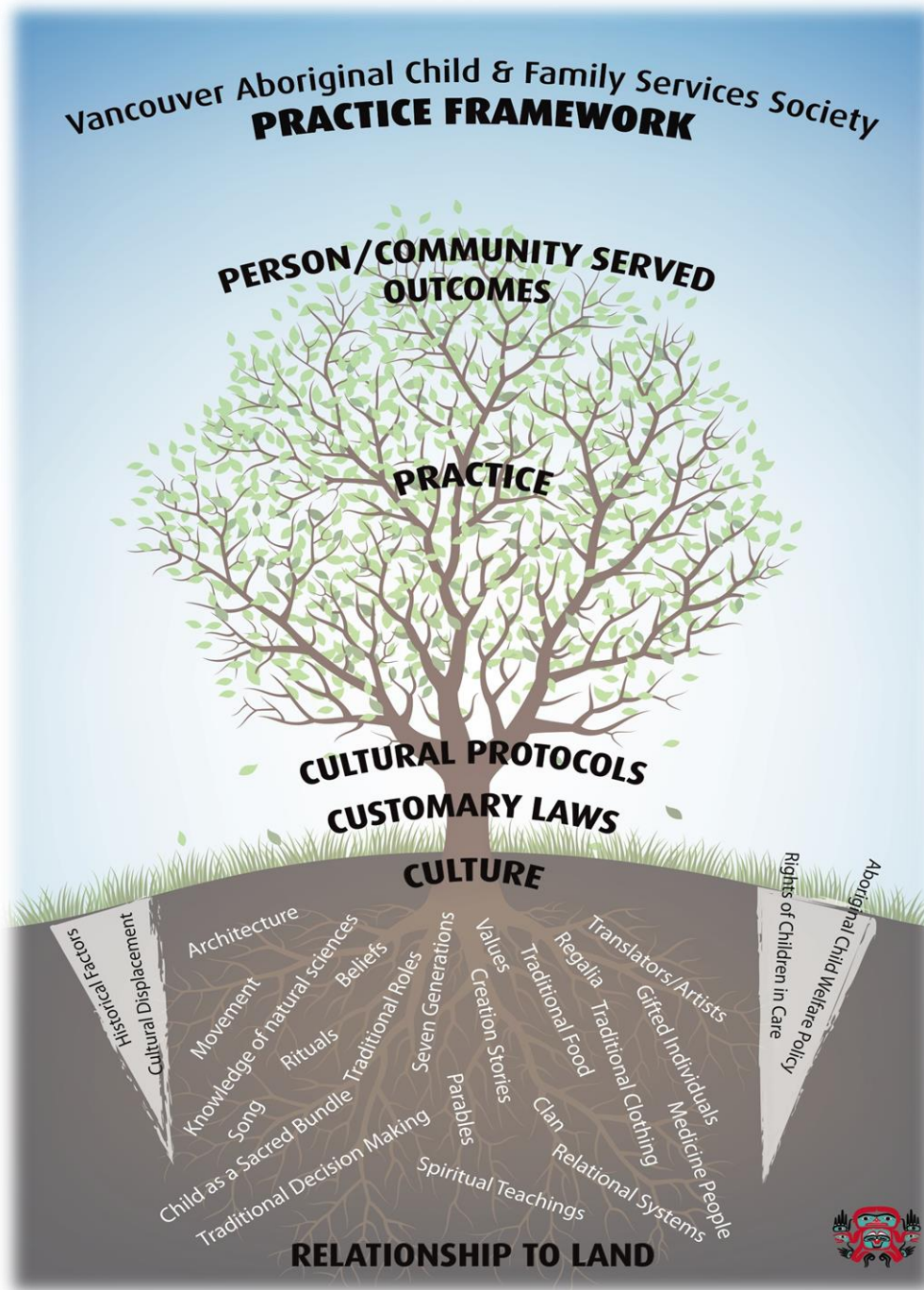


# STRENGTHENING OUR PRACTICE



03-07-13

For Aboriginal Children and Families

**Practitioner and client insights into the practice of VACFSS**

## Table of Contents

<b>OVERVIEW</b>	<b>2</b>
<b>THE VACFSS RESEARCH FRAMEWORK</b>	<b>2</b>
<b>OUR PARTNERS IN SOP</b>	<b>3</b>
<b>SOP PROCESS &amp; METHODOLOGY</b>	<b>4</b>
CONTEXT OF STRENGTHENING OUR PRACTICE	5
KEY QUESTIONS	6
PARTICIPANTS	6
KEY THEMES	7
MOST COMMON NOTION OF WHAT IS WORKING	8
MOST COMMON PERCEIVED CHALLENGES	9
<b>KEY FINDINGS</b>	<b>10</b>
IDENTIFIED STRENGTHS	10
CULTURAL PRACTICE -STRENGTHS	10
ORGANIZATIONAL STRUCTURE - STRENGTHS	10
FRONT LINE PRACTICE - STRENGTHS	11
IDENTIFIED CHALLENGES	12
CULTURAL PRACTICE - CHALLENGES	12
ORGANIZATIONAL STRUCTURE - CHALLENGES	12
FRONT LINE PRACTICE - CHALLENGES	13
<b>SUMMARY OF POSSIBILITIES/RECOMMENDATIONS GENERATED WITH PARTICIPANTS</b>	<b>14</b>
CULTURAL PRACTICE - RECOMMENDATIONS	14
ORGANIZATIONAL STRUCTURE - RECOMMENDATIONS	14
FRONT LINE PRACTICE - RECOMMENDATIONS	15
<b>STORIES IN PRACTICE</b>	<b>16</b>
<b>DISCUSSION</b>	<b>19</b>
<b>NEXT STEPS</b>	<b>21</b>

## OVERVIEW

“The Vancouver Aboriginal Child and Family Service Society (VACFSS) is an urban Aboriginal child welfare organization serving Aboriginal families and children involved with child welfare services. VACFSS is a non-profit society whose vision is to strive to culturally and spiritually strengthen Aboriginal families through holistic service delivery. Part of this vision involves creating a research framework that will help guide current practice and policy” (VACFSS Research Framework 2008: 3).

Vancouver Aboriginal Child and Family Service Society was incorporated in 1992, and signed its first delegation enabling agreement in 2001. Over the last decade VACFSS has experienced unprecedented growth, at the same time grounding its development in the lived and intergenerational experiences of the Aboriginal children and families it serves. The Society continues to establish itself as a Canadian leader in the development and implementation of strength based and culturally relevant practices and approaches in the context of Aboriginal Child Welfare.

Throughout 20 years of service, VACFSS has continued to elaborate a process of quality assurance, community engagement and self reflection to both manage growth and honour diversity. The most recent culmination of these efforts has given rise to the Society’s *Strengthening Our Practice for Aboriginal Children and Families* initiative. *Strengthening Our Practice* (SOP) is a reflective practice framework development project in which VACFSS seeks to better understand:

1. What makes the Society’s practice and approaches unique;
2. How the VACFSS values and concepts, such as *child as sacred bundle*, shape and orient practice at VACFSS;
3. Approaches to child and family *protection, well being* and *resilience* (which models make the most sense for VACFSS?);
4. What works best and some of the most central challenges at VACFSS; and
5. To generate recommendations for training, quality assurance and evaluation<sup>1</sup>.

## THE VACFSS RESEARCH FRAMEWORK

VACFSS has a strong commitment to an applied research process that is: 1) grounded in ancestral Aboriginal knowledge; 2) embedded in community consultation and engagements; 3) relevant within the current literature and standards of culturally relevant strength based practice; and 4) that contributes to “improve the lives and well-being of urban Aboriginal families; positively affect the social and cultural environment where people live; and provide data that can enhance everyday living for urban Aboriginal families (Castellano, 2004: quoted in VACFSS Research Framework 2008: 5).

The design, process, and ongoing revision of *Strengthening Our Practice* has been rooted in the points above, as well as in adapted notions of the *4 Rs of Aboriginal Research* (see Kirkness & Barnhardt 1999, Pidgeon & Cox 2002):

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<sup>1</sup> These five points are a condensed version of the 6 objectives provided in the initial working plan.

- **“RESPECT** begins with the involvement of the VACFSS community in the research process, discussing each other’s ideas, helping to ensure the project will be of benefit to all parties.
- **RELEVANCE** is between the researcher, the topic and the VACFSS community. Relevance also calls for the researcher to acknowledge and understand Aboriginal worldviews.
- **RECIPROCITY** and knowing the roles and responsibilities of the researcher and the VACFSS community to balance expectations and ensure there is balance of sharing and gathering of information. Reciprocity will meet the needs of both the VACFSS community and research to respect and follow the protocols used in this framework.
- **RESPONSIBILITY** for researchers to design a process in consultation with the VACFSS CEO and board members, keep the process flexible, and maintain the integrity of the research to satisfy everyone involved (Pidgeon & Cox, 2002)” (VACFSS Research Framework 2008: 7).

## OUR PARTNERS IN SOP

The VACFSS Research Framework has guided the Society in selecting the International Institute for Child Rights and Development (IICRD) as a partner in SOP. The International Institute for Child Rights and Development (IICRD) is located at Royal Rhodes University in Victoria, Canada, and has been working for close to 20 years in multiple child protection contexts with children in indigenous communities. In Canada these partnerships include work with Coast Salish, Cree, Dane Zaa, Metis, Haida and Wet'suat'en First Nations and communities. The Institute starts all of it's work from the perspective of the child, within their community and culture (a "bottom up", community based, and culturally grounded approach) addressing human adversity by building on the strength of the community and the Indigenous worldview. IICRD’s global protection and action-oriented and evidence based research tools assist organizations in better understanding young people and their family’s unique perspectives of risk and protection factors in the context of broader social challenges and social change. This participatory research and learning paradigm is then applied to organizations to build monitoring and evaluation systems that support internal reflection and learning, and capture results; results that can be used to help practice better address real life solutions to complex, dynamic problems.

The International Institute for Child Rights and Development continues to lead the research process, in collaboration and with the support of the VACFSS Special Projects Officer. Throughout this process, the team has worked to uncover the opportunities and the challenges VACFSS faces in supporting Aboriginal children and families resilience in confronting human adversity and continued marginalization in a way that honours diversity, the sacredness of childhood, and the importance of those working to support Aboriginal children and families.

## IICRD's Role in SOP

- **Document** VACFSS “way” through in depth interviews with practice knowledge keepers, other practitioners and administrative staff, highlight “mountaintops and valleys”
- **Produce a report** from this process to guide interactive, creative sessions with VACFSS staff
- **Conduct action oriented, reflective sessions with staff** to disseminate and ground the findings
- **Develop monitoring and capacity building tools** that can be used to support VACFSS’ continuing process of indigenization through the development of culturally relevant programs, services, and practices rooted in ancestral Aboriginal knowledge and relevant to the contemporary lives on Aboriginal children and families

## SOP PROCESS & METHODOLOGY

VACFSS convened a Steering Committee to support the SOP research team in achieving congruence with the standards defined within the VACFSS Research Framework (2008). With the support and guidance of the SOP Steering Committee, the SOP team began the research process conducting a series of interviews and focus circles with practice knowledge keepers<sup>2</sup> within VACFSS. These discussions, and the stories shared, grounded the SOP research process in Aboriginal knowledge and worldview, and laid the groundwork for subsequent engagement with staff and clients at VACFSS.

This report is the result of the first phase of the VACFSS/IICRD collaboration, a process of deep, reflective discussion with managers, key practice knowledge keepers, and front line staff, supervisors, and administrative staff. This report provides a situated cross section that may not speak to the Society as a whole, but that nevertheless reflects the perspectives and practice based wisdom within the various VACFSS programs. At each of the three office sites, stories and concrete examples were shared as a means of co-designing a strength based, Indigenous learning and reflection process. It is our hope that this process will lead to practical, relevant and meaningful capacity building tools that transmit the essence of “the VACFSS way”.

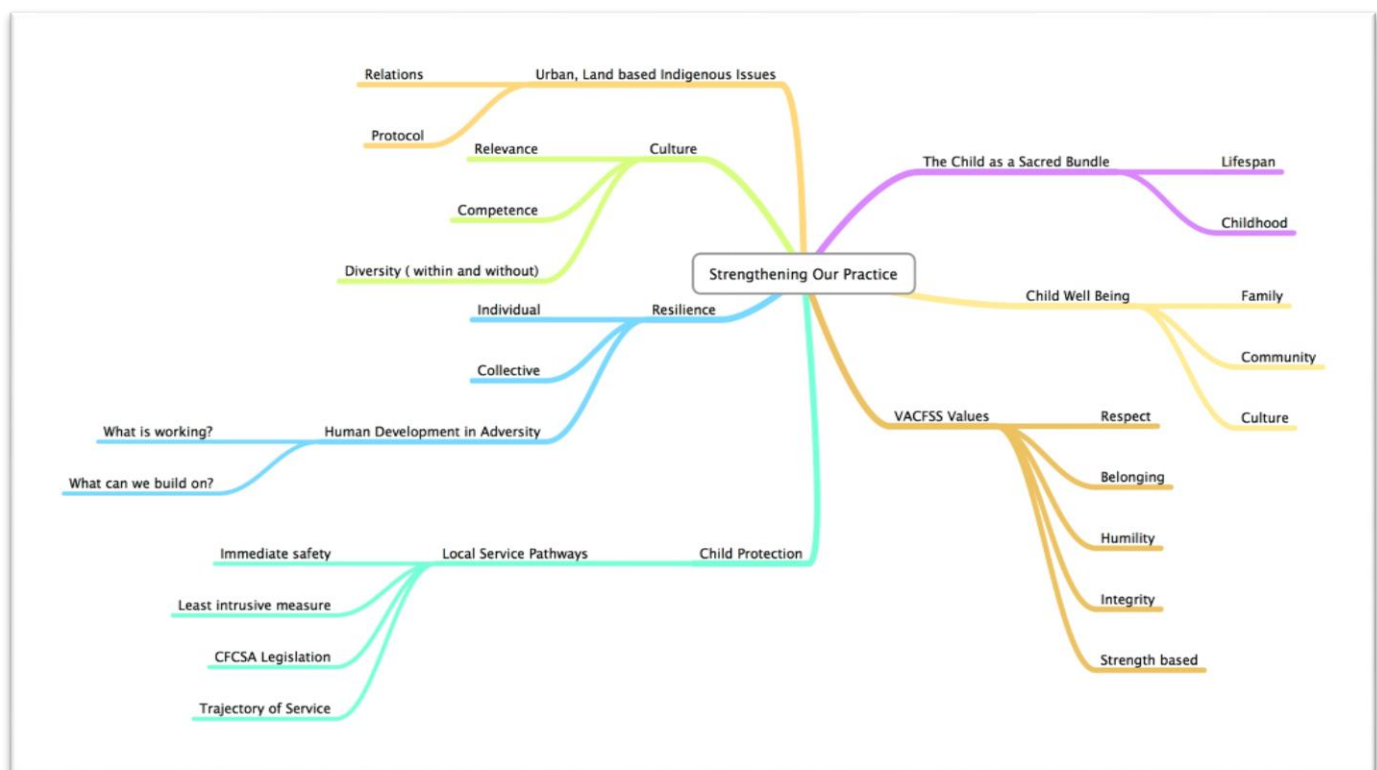


<sup>2</sup> In the context of *Strengthening Our Practice*, “Practice Knowledge Keeper” was defined as an individual who had seven consecutive years, or more, working in Aboriginal child welfare

## Context of Strengthening Our Practice

A number of key themes guided the development of questions and the interpretation of information emerging from staff interviews, circles and other engagements. Such themes and organizing concepts included:

1. A deeper exploration of the process by which VACFSS values are applied in practice
2. The concept of *the child as sacred bundle*
3. Approaches to child and family protection, well being and resilience
4. Diversity (within VACFSS staff, clients, caregivers, community partners, and Vancouver),
5. A foundational understanding of the role of Aboriginal culture in Aboriginal child welfare
6. The significance of the First Nations culture and society within the territories where VACFSS is situated.
7. Recognizing that there is a unique urban Aboriginal culture that has emerged in Vancouver.



### Initial Project Concept Map January 2012:

The diagram above illustrates initial project design regarding aspects of VACFSS that we needed to better understand to identify how VACFSS was and hoped to:

- ⊗ Manage human adversity from a strength based perspective
- ⊗ Provide unique cultural approaches to VACFSS' diverse client base
- ⊗ Implement Innovative holistic programs
- ⊗ Create a sustainable, community-based organization in the midst of rapid growth, policy transition and frequent changes in staffing composition and roles/jobs within the organization.
- ⊗ To address the varying levels of understanding and acceptance of what it means for a practitioners to steep their learning and practice within an Aboriginal child welfare practice framework.

## Key Questions

The following questions were asked to interview and circle participants:

1. Describe VACFSS' Practice. What makes it special?
2. What are some concrete practice examples that demonstrate this practice?
3. What values or core strengths do they build on?
4. What are some concrete practice examples or challenges that you feel are NOT in alignment with these core values and strengths?
5. Other suggestions – ideas – potential solutions?

These questions served as a basis to start the conversation. They were not always asked in the same order, and often sparked open discussion within the scope of our research interest.

## Participants

As mentioned in passing above, the first participants in this research included practice knowledge keepers at VACFSS. It was through these initial interviews and circles that *Strengthening Our Practice* was grounded in ancestral Aboriginal knowledge. From this place of grounding the SOP team then expanded the participant base to include frontline staff and supervisors. SOP research to date has now been reviewed by the Steering Committee, and the team has engaged with VACFSS clients and foster parents and community partners with plans to engage youth and clients in phase 2.



Initial interviews included practice knowledge keepers from each of the VACFSS programs, and also included the CEO, acting Director of Programs, and 3 out of 4 practice managers (Child Protection Manager, Family Preservation Manager, and Residential Resources Manager). This initial group of participants comprised roughly 22% of VACFSS staff, and represented the following distribution across programs:

- ✦ **11** from Child Protection
- ✦ **3** from Residential Resources
- ✦ **6** from Guardianship
- ✦ **4** from Family Preservation
- ✦ **3** from Infrastructure
- ✦ **5** from Administration



The first phase of SOP also included 4 staff engagement sessions and 4 focus groups with families, foster parents, service agencies and youth. The staff sessions included 18-24 people each, comprising a total of more than 80 staff participants from various levels at all VACFSS programs. 8-15 people participated in each of the client focus groups. To date, more than half of all staff at VACFSS have participated in SOP- including administrators and Human Resources personnel. It is anticipated that more community/client engagements will take place in phase 2 of the Strengthening our Practice Process.

## Key Themes

The most popular themes emerging from discussions included:

- ✦ The challenge of how to practice from a place that is grounded in the lived experience of the client and the broader context of historical policy impacts on Aboriginal families.
- ✦ Demonstrating strength based practice
- ✦ Relationships with co-workers, clients, community partners, ancestral client communities, and bands
- ✦ The intergenerational nature of the work at VACFSS: we work with extended families that span multiple generations, and who have often been involved in the child welfare system for multiple generations
- ✦ The importance of creating Aboriginal space to foster wellness
- ✦ The importance of having evidence of Aboriginal identity within our work, and of demonstrating knowledge of and competency in Aboriginal Practice
- ✦ VACFSS Values (respect, humility, belonging, integrity, and strength-based practice)

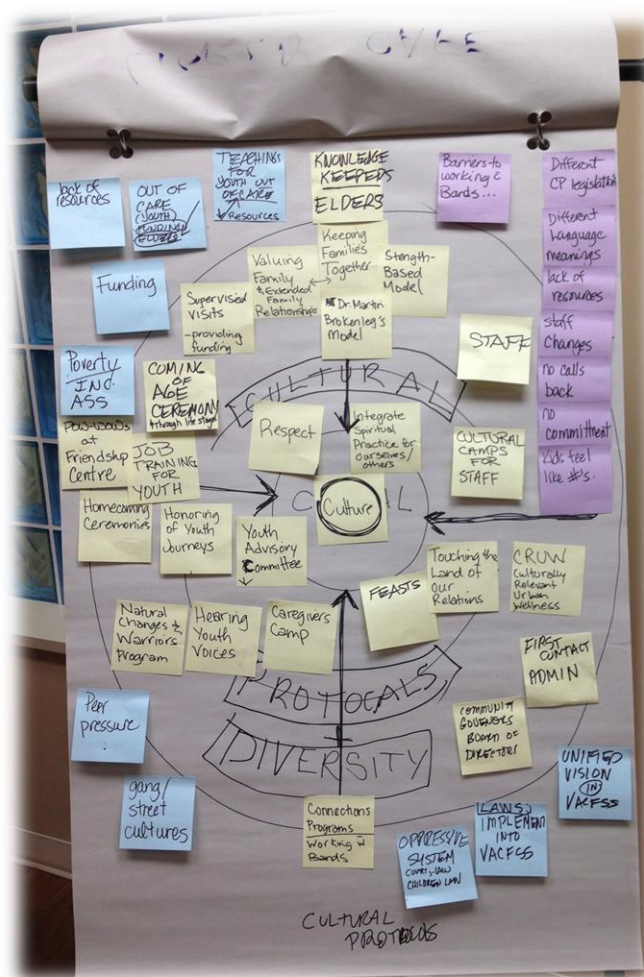




### **Most common notion of what is working**

Practice knowledge keepers and Staff at VACFSS- from the frontline to upper management- all shared examples of successful cultural interventions that contributed to the everyday lives and general well-being of the children and families they served. In interviews and focused discussions around what is working best at VACFSS, most commonly sighted staff experiences and perceptions included:

- ✿ A process for achieving strength-based and culturally relevant Aboriginal practice through grounding, shared values, and relationships
- ✿ Honouring local territory and protocols, but also including the protocols of those living outside their ancestral territories when and as needed
- ✿ Respecting diversity in culture, lived and intergenerational experience, and knowledge of Aboriginal cultural practices, methodologies spirituality, and worldview.
- ✿ Culturally relevant practices to promote individual, family and community healing
- ✿ Creating a climate of belonging for children, youth and families
- ✿ Staff who focus on relationships and consistently go beyond the defined audited practice standards to provide culturally relevant services.



### Most common perceived challenges

- o Balancing strength-based Aboriginal practice within the context of audited practice standards of the Ministry for Child and Family Development (MCFD)
- o Cultural Competence and “getting everyone on the same page”
- o Creating a truly unified vision
- o Communication, accountability and transparency across the three offices and across the various programs and to families
- o Further developing clear channels of orientation and support in implementing cultural practices, for example in daily practice, or homecoming and reunification ceremonies
- o Further developing feedback processes
- o Practice development within a context that is crisis driven and otherwise highly charged
- o The impacts of staff turn over rate and inexperience
- o The difference in benefits (i.e. maternity top up and short-term leave) between VACFSS Staff and MCFD staff who are doing the same work
- o Inconsistent understanding of roles and responsibilities across the various programs and between social workers and foster parents (i.e. lack of consistency and knowledge transfer)

- Coordinating services between three distinct physical locations

## KEY FINDINGS

We have clustered our findings into 3 key categories which will be used to develop key indicators of practice: CULTURAL PRACTICE, ORGANIZATIONAL STRUCTURE and FRONT LINE PRACTICE.

## Identified Strengths

### CULTURAL PRACTICE -STRENGTHS

The cultural practice strengths that were identified included:

- The **Strengthening Families Program**
- The presence of a **Family Preservation** unit to augment the Child Protection unit
- Staff overwhelmingly embrace agency **values** in their communications and practice
- The **modeling and support** of traditional Aboriginal knowledge and practice within the agency
- The grounding of practice through Aboriginal worldview, history, and cultural protocols-including **ceremony**
- The formalization of cultural practice through **strength based Aboriginal policy**, i.e. the new **Inclusive Foster Care Policy**
- The **allocation of specific resources** to strengthen and embed cultural practice within the case management framework (concrete needs funding, cultural budgets, medicine rooms, having elders on site, research)
- **Formal and informal** practices and opportunities for staff to learn and participate in cultural practice
- The focus on **wellness and healing** for everyone- staff and clients (cultural activities that staff and clients/families are invited to)
- Policy research and development to **replace Ministry tools/assessments with more culturally relevant VACFSS counterparts**
- The establishment of **protocols to strengthen engagement** with Aboriginal child and family services agencies in the development of service plans for their member children and families
- **Honouring the diversity** of contemporary Aboriginal cultures
- **Cultural Immersion training for staff**
- **The VACFSS Elders Forums**
- **The Culturally Relevant Urban Wellness (CRUW) Program**
- **Social workers with aboriginal/cultural grounding and knowledge** to support foster and birth families in keeping children's cultural connections
- Attendance at **Cultural Events**, as well as the **interconnections** and mutual support of attending families

### ORGANIZATIONAL STRUCTURE - STRENGTHS

The organizational strengths that were identified included:

- The **positive welcoming work environment** for staff and families, especially with the new renovations at the Child Protection building, strong leadership, team building and focus on employee wellness

- ✦ **The key role of the administrative staff** in creating a sense of belonging to the VACFSS family for families and staff, in supporting social workers and other staff on a daily basis and in modeling cultural strength based practice. Administrative staff at VACFSS have the highest percentage of Aboriginal members contrasted to the social workers, finance, human resources and other staffing groups. They embody a wealth of lived and intergenerational knowledge and experience, and comprise a cultural core within the Society.
- ✦ The support for **staff wellness** (on site clinical Elder; the living a healthy Aboriginal lifestyle (LAHAL) program.
- ✦ The overall **openness** to learning and new ideas
- ✦ **Strong community governance** through the Board of Directors

## FRONT LINE PRACTICE - STRENGTHS

The front line practice strengths that were identified included:

- ✦ **Establishing a circle** for significant staff-client engagements **to ground participants**
- ✦ The focus on and capacity to build **trust** – create **safe physical and emotional spaces** – and nurture **relationships**
- ✦ Being **respectful**, for example, ensuring that the focus on the client is the top priority, being sensitive about note taking and other documentation
- ✦ Being **non judgmental**, for example: starting where families are at; not imposing your own values, and being **non hierarchical** (not exercising power over clients, but rather sitting in a circle and being **honest** and clear about the process)
- ✦ The focus on **well being** while ensuring **immediate safety**, being honest and balancing accountability with support, healing and a sense of belonging
- ✦ The ability to focus and build on **strengths/assets** – making the effort to find the smallest spark to build on – wanting to keep kids with their families and in their community and connected to their culture
- ✦ The focus on the **sacredness of the child** and **healing**
- ✦ The use of **ceremony to remove shame blame and better understand the healing cycle** and what they can do for both families and workers
- ✦ **The flexible and innovative** use of funds and delivery of services addressing structural barriers and concrete needs
- ✦ The support of Managers and team leaders in **modeling** and **supporting innovative practice**
- ✦ The use of innovative **Collaborative Practice** such as mediation, Family Group Conferences, Family Group Decision Making, and Family Preservation; Child and family focused collaborative planning and decision-making to ensure well being and to keep children and youth **connected** to their family and culture(s)
- ✦ **Working in partnership** with other service agencies, support systems and Aboriginal agencies in Vancouver and elsewhere
- ✦ Supporting foster families within the VACFSS **Inclusive foster care policy**
- ✦ Offering families concrete **training on how to work with babies challenged by the difficulties presented by mother's who misused substances during pregnancy**
- ✦ The willingness of staff in **going beyond** the MCFD audited practice standards
- ✦ Managing to achieve **culturally relevant strength based Aboriginal practice** within MCFD policy and information systems

- ⊗ **Home studies for foster families** – invasive but very necessary - the need to ensure that they are done well and that once a family passes they are invited to be part of the team to support these children

## Identified Challenges

### CULTURAL PRACTICE - CHALLENGES

The cultural challenges that were identified included:

- ⊗ **Varying degrees of cultural experience and knowledge** across the teams and practitioners within VACFSS programs
- ⊗ **Various degrees of knowledge** relating to Aboriginal history and contemporary realities
- ⊗ **Various degrees of knowledge** relating to strength based practice in Aboriginal child welfare
- ⊗ Culture being **seen as an add on** by some practitioners – rather than being integrated into the case management process
- ⊗ Some staff not utilizing/implementing existing cultural practices and resource requirements
- ⊗ **Inadequate knowledge and experience** of some staff to initiate or comply with cultural protocols
- ⊗ **Inadequate knowledge and experience** of some contracted support services and to provide **culturally grounded** and/or relevant services and training
- ⊗ **Staff steeped in mainstream experience, practice and knowledge challenged by requirement of all staff to learn about Aboriginal cultures, history and Aboriginal social work best practice**
- ⊗ **Divergent understandings** regarding the purpose of the **cultural committee**
- ⊗ **Inconsistent access to elders and cultural activities** (especially noted by foster families and youth)
- ⊗ **Information on children's ancestry** not consistently provided

### ORGANIZATIONAL STRUCTURE - CHALLENGES

The structural challenges that were identified included:

- **Maintaining effective communication** between the three offices and across programs: Staff are not always familiar with the policies and practices of other programs at points of interface between programs- fostering the potential for conflict. Everyone is not clear on each others priorities and practices or how they can work together to ensure a supportive continuum of care
- ⊗ The amount of **time** spent on administrative and Ministry reporting requirements taking away from the time available for culturally relevant client contact
- ⊗ The **difference in benefits** (maternity top up and short-term leave) between VACFSS Staff and MCFD staff who are doing the same work) is a continued source of contention
- ⊗ Learning how to implement the new VACFSS **Inclusive foster care policy**
- ⊗ **Foster families needing additional support** to enable them to respond appropriately to the needs of children and youth
- ⊗ The **lack of Aboriginal foster placements** - less than 25% of foster parents are of Aboriginal ancestry
- ⊗ **The disconnect between existing policies and their implementation**

- ⊗ A perceived **lack of accountability of front line staff to managers** especially in relation to practice and following through on directives (further develop feedback process and opportunities to evaluate Social Workers)
- ⊗ **Undeveloped practice standards and procedures** to ensure the cultural strength based standard of practice that VACFSS is striving for
- ⊗ **Managers and team leaders not always supported or trained** on how to support staff to incorporate culturally relevant strength based practice
- ⊗ The new MCFD **Tools and Structures of ICM**
- ⊗ The **turn over rate** in Child Protection and Family Preservation is disruptive to effective program management and creates challenges with consistency and knowledge transfer
- ⊗ More in house **training on values and culture** in practice resulting in **inconsistencies in teams** and individual workers. Not all teams are practicing from the same place of culturally grounded strength based practice
- ⊗ **Fear of families to speak out** if they are not happy with a particular worker or practice

### FRONT LINE PRACTICE - CHALLENGES

The practice challenges that were identified included:

- ⊗ Communicating how **to promote and strengthen the VACFSS practice framework within a context that is driven by ministry policy and information systems**
- ⊗ The need to fill in **forms/assessments** that prioritize risk and MCFD standards, but do not identify strengths or allow for the documentation of **cultural connections and story**
- ⊗ **A diversity in knowledge and experience** regarding the distinct Aboriginal cultures represented in the client base, as well as of indigenous methodologies, worldview and spirituality more generally
- ⊗ **Inconsistent supervision, mentoring and support** to do things in a culturally respectful way that recognizes the client's history and circumstances
- ⊗ Challenges with **continuity of care and consistency** for children, especially when transitioning between programs - families and communities are engaged very differently
- ⊗ Staff are not clear on the role they play or can play in implementing cultural policies
- ⊗ The **resistance by some staff** to learn/embrace new ways of being – for example, they do not feel safe or accepted as part of the team, and/or do not attend training opportunities
- ⊗ **Case load management**: many staff feel they spent too much time filling in forms, rather than prioritizing cultural interventions and other culturally relevant strength based practices
- ⊗ Some front line staff **feel unsupported** and undervalued
- ⊗ The **inconsistent processes to hear from families and young people** with respect to VACFSS services and their care plan
- ⊗ The **uncertainty** by some front line staff on how to **balance** confidentiality with true community engagement, or how to gain more buy-in from the community (they see the need but feel it is not in their mandate)
- ⊗ **Funding** discrepancies and criteria for out of care options (OCO) and continuing care order (CCO) – staff reported the need to be innovative with the use of these funds to ensure that they were serving the clients in ways congruent with VACFSS internal standards of practice and engagement
- ⊗ The uncertainty on the **scope of practice** during protocol investigations: some staff believed they could not support families while a **protocol investigation** was in process

- ⊗ The use of **foster care as a placement option** rather than working to keep client in family and community (perception that this will decrease with inclusive foster care – though not yet a standard practice across departments and VACFSS social workers)
- ⊗ The absence of a mandate for, focus on, and funding for **youth programming** – both **prevention and continuing care**: feelings of a limited ability to support young people who are not yet a CCO, and that there is little to no support (financial and structural) for youth who are aging out
- ⊗ Inconsistent **inclusion of foster parents** as an important part of the team (often just the social worker and the child)

## SUMMARY OF POSSIBILITIES/RECOMMENDATIONS GENERATED WITH PARTICIPANTS

### CULTURAL PRACTICE - RECOMMENDATIONS

*“We need to drive the energy from our cultural roots up into the core of the VACFSS tree of practice and organizational structure”*

- ⊗ Ensure each team has **capacity to model and facilitate cultural competence** (51% Aboriginal staff is a good start, but we also need to ensure cultural mentor(s) on/for each team)
- ⊗ Ensure adequate and consistent **training and mentoring** on cultural ways of being for new and existing staff
- ⊗ **Clearly articulate role and process of the cultural committee** – Institute someone to facilitate and organize – to ensure concrete actions and follow up
- ⊗ **Create list of elders and cultural activities** that are shared with staff as well as clients and foster parents
- ⊗ **Respect protocol**: learning, supporting and mentoring staff, families and youth to adhere to protocols in various settings
- ⊗ Support **more Elder-youth interactions**

### ORGANIZATIONAL STRUCTURE - RECOMMENDATIONS

- ⊗ **Clarify vision and communication** of children in families/communities across cultures and across all programs ideally at all levels – CEO – down – staff up with a commitment to the whole rather than just the pieces
- ⊗ **Consider training of all staff to do mediation, facilitation, protection, family preservation** and other skills central to the VACFSS values with teams to support and train them
- ⊗ **More support/integration of Family preservation** to families in CP and in Guardianship (facilitate understanding)
- ⊗ **Further train managers and team leaders** on how to model and support innovation and increase cultural and technical capacity of front line workers and ensure focus on practice
- ⊗ **Engage community and staff in development and implementation of quality assurance**
- ⊗ Continue to **advocate for additional funding**
- ⊗ **Appoint both facilitators and content specialists to committees**

- ⊗ **Further refine hiring protocol** to ensures that new hires embody the VACFSS values and have the capacity/are open to learn VACFSS way of practice as well as having technical skills and experience
- ⊗ **Consider** having (a) **specialized position(s)** to carry out **protocol investigations** into foster homes or designate key experienced people to support social workers when they have to do one.
- ⊗ **Provide opportunities for more sharing and support among foster parents** (i.e. mandatory support group that have to be part of and attend every 6 months- within 18 months need to ensure family on track and ensure opportunity to receive feedback/support etc.) –
- ⊗ **Provide more opportunities for staff and clients to mingle and get to know each other** within relaxed and unstructured environments
- ⊗ **Investigate giving foster parents authority to sign for school trips** as children are missing out when social workers are unable to respond quickly enough

### FRONT LINE PRACTICE - RECOMMENDATIONS

*“Continue to model and mentor staff to live and work the VACFSS values”*

- ⊗ **Clearly identify early intervention and maintenance of family/cultural connections as top priorities for VACFSS**
- ⊗ Support Teams from all departments in **working together** – this may require some restructuring (see structure)
- ⊗ Ensure **cultural competence and embodiment of values** of all staff through
  - **Hiring** – Strengthen the presence of questions getting at the VACFSS values
  - **Training**
    - Develop model of training and education that **builds on the VACFSS Practice Framework to develop capacity, knowledge and self awareness** for new and existing staff - offer opportunities for staff to shadow other staff and experience working in foster homes, group homes etc. – so better understand the reality and to LISTEN
    - **Provide Interactive in-house orientation** on practice, understanding history and reality of Aboriginal peoples – with concrete practice examples and modeling cultural competency (not just an orientation on logistic) that new and continuing staff participate in
    - **Uncover myths and misperceptions** (such as the myth that staff are unable to support families during protocol investigations)
    - Ideally **train all staff to be facilitators, mediators/conflict resolution and family preservation worker, child development** and provide ongoing **support** for them to use these skills as they have been use to being specialists (good listeners – not just making judgments /decisions on the paper)
  - **Mentoring** – more formalized and consistent – ensure team leaders and managers have capacity – skills and mandate to provide mentorship – consider implementing peer support or buddy system
  - Create a **learning culture**
- ⊗ Train and support managers and team leaders to
  - **Supervise and mentor** staff in line with the VACFSS values
  - Co-create a positive work environment and quality assurance tools with the staff



- ⦿ Provide ongoing support for resources and front line staff to **adapt tools to work for children and families – start with strengths** – not risks – ensure good communication and follow up - front line staff sharing what is working so policies can incorporate what is working and ensuring that staff receive ongoing support and training/mentorship with new policies
- ⦿ **Model listening** to community rather than handing down ideas – we can't expect staff to be bottom-up in their daily practice if the environment they are working in is entirely top-down
- ⦿ **Make Foster parent training mandatory** (too easy to back out) also need more than 53 weeks – need info on Indigenous history and impact – how to transition children to feel safe and then create a family culture (welcome child as part of family) and then more support in accessing relevant cultural activities – elders etc. –
- ⦿ **Include families** (foster and biological) and youth as part of **TEAM**
- ⦿ Further develop the engagement and feedback processes for children, youth, families and community

## STORIES IN PRACTICE

To understand VACFSS practice it is important to look at *examples in practice*. Using the VACFSS Practice Framework represented as a tree metaphor on the cover page of this report, the following examples shared by participants illustrate many of the findings above.

### Story 1: Intake

This story demonstrates how an intake workers experience with VACFSS reveals that attention to framing questions in culturally relevant strength based ways has significant impact when clients first come to VACFSS (as well as with potential subsequent intakes). As the intake worker explained, a mother had just spent a night in jail, and when she arrived at VACFSS “things were not looking good.” The worker began by asking the usual intake questions around mental health and support services, and “things just seemed to be escalating in the wrong direction.” Upon recognition that the current strategy was not working, the worker decided to change his line of questioning. “I started reframing what support services might look like. For example, I asked, how would you feel about having an Elder present at our next meeting?; would you like to participate in a community circle around these issues? As soon as this reframe was presented things began to calm down. A grandmother who was present stepped forward and we were able to come up with a plan for the child that both ensured their safety and kept him with his family. I learned the power of questions and framing. By framing things from an Aboriginal context we were able to turn a situation that was looking like it would end up in a very bad place to a very positive outcome.”

### Story 2: A Lesson in Non-Judgment

The need to accept people where they are at, and not judge them is also one of the very important values and practices at VACFSS. One afternoon a father came to attend a supervised birthday party for his son. While waiting in the reception area at the Child Protection office one of the staff saw the father and reported to one of the administrative staff at front desk that she felt that he had been smoking marijuana. The administrator then reported this to a Team Leader, who then came

to speak with the father and investigate the claim. It turned out that father had not been smoking and took great offense to this accusation. “It doesn’t matter if I do or don’t use,” asserted the father, “as you assume I have regardless- so why bother?” This incident, and inherent judgment, compromised the trust with this family/father and set back the family healing and ability for him to be able to be in the child’s life. The Team leader had to go back to the administrator and reporting staff to share the impact of this ‘judgment,’ and to reinforce that the role of VACFSS was to support healing and connections with family – not to judge the clients. So unless he was smoking in front of the child, or there was a concern for the child’s safety – the priority was to build trust and support the father to be in the child’s life.

### **Story 3: Listening as a Culturally Relevant Strength Based Intervention**

In this case a family was having great difficulty, particularly around inter-relational tensions focusing on the mother. The social worker in this case simply took the time to build a relationship through deep listening. After some negotiation, the family agreed to go for family treatment. With support from VACFSS the family made the trip to Vancouver Island for treatment. Within 2 days they left after the mother was triggered. Rather than judge the mother for deciding to leave, the social worker listened to why she left, and engaged mom in finding another solution (critical thinking). “Ok,” the worker stated, after listening to mom’s story, “that (treatment) didn’t work, so what will?” After having her voice heard, as well as being respected and engaged in the attempt to find another solution, the mother responded: “I want to go home”. The social worker then realized that “one size does not fit all,” and encouraged “out of the box thinking.” She helped set up a homecoming ceremony that would allow the mother to go home and do a fast in her community with their support. “The key here is asking our families what works for them,” the social worker reported, “their vision and supporting THEIR plan, giving the family the power to create the change they want to see. It is about ongoing support.”

### **Story 4: Integrated Case Example**

The below case was recounted by a group in an exercise during one of the October 2012 Strengthening Our Practice (SOP) staff engagements sessions. It was offered as an example of collaborative and integrated services at VACFSS. This case involves a family with five children that needed to be removed. The Mother had problems with addictions, housing, and moved to Vancouver from Surrey fleeing intimate partner violence. Initially the father remained in Surrey, but subsequently moved out of province. The case of this family speaks to the full possible range of a trajectory of service at VACFSS- intake, child protection, collaborative practice, family preservation, resources, guardianship, and other culturally relevant support Services. The group felt that much of the innovation and success throughout this case was due to the initial will of the child protection worker to support the family in a strength-based way.

In the beginning of this example, the mother and five children are transferred from intake to a family service team, and assigned a social worker. After the identification of protection concerns and the determination that the children were unsafe with mom, social workers looked for extended family to temporarily care for the children while mom gets well. An auntie was identified, and a plan developed so that the biological mother moved out of the home (transferred off the BC housing lease), and her sister moved in to care for the children. The mother and her sister then proceed to co-parent while staff at VACFSS worked to support her healing process.

The social workers conducted an out of care options assessment for all five children, each with special needs, and Hollyburn, Raycam, and other resources such as Urban Butterflies girls group, were put in place to support the children and Auntie as a caregiver. In this scenario the kids were able to remain in their home and attend the same school. The home was kept free of alcohol and drugs, and staff worked to identify and strengthen the family's safety net. The family's connection to culture through extended family was identified as a central strength, and VACFSS funded a trip home for the family.

Initially, there were some reports from the community around the aunt. These were followed up on, and were unfounded. Despite this, the family was facing many challenges, including the special needs of the children, having to maintain clear boundaries to ensure that unhealthy people would not be in the home, and being away from their community. As a result it was determined that a continuing care order (CCO) had to be established for all of the children. "When we got to the place where we had to establish an out of care option, the children became CCOs- and this is where all the programs had to work together. The children were with auntie until the timeframe ran out, so we had to do something. When the children became CCO's, the auntie could no longer look after them unless she could qualify as a foster parent".

While VACFSS staff was supporting auntie to take the necessary steps to become a foster parent, they heard that she was using, and things seemed to be falling apart. There was an initial push to place the children in an alternate (safe) home, but VACFSS staff stood back and reexamined the situation to find the best solution for the children and the family: "We know how she operates, she's stressed out with the kids, the kids family are poking at her, and she's going to break. We have two choices: we could let her break, or we could work hard with resources, bring intake back in, draw from collaborative practice and support auntie. And that's what we did. On paper it looked like we were taking a huge risk by leaving the kids with her, but ultimately we were able to work with her strengths, work towards her sobriety, and enable her to care for her children safely. All programs came together to create the best possible situation for the children. The family used all the resources that were offered- including out of care options. And in the end the children were safe and supported to stay connected to their family.

IN this situation auntie used drugs a couple times throughout her caring for the children. So what did VACFSS do? We were responsive, not reactive. While ensuring the children's safety, the team never lost sight of the importance of culture and family as key strengths in the children's lives. The group emphasized the central role of communication in everyone working together. They also found that they made progress through speaking the truth. They had to be honest with the auntie: "You can't abuse substances, even out of the home at the bar." In this case, the auntie responded: "I've been waiting for someone to take me in, I want to stop." "We had to confront her in resources. Challenging her around substance abuse; and, for us, being able to deal with it. Allowing people to be vulnerable and tell their truth.

VACFSS maintained **integrity** through addressing the family's challenges, while hearing their voice. **Humility** influenced the decision for collaborative cultural interventions such as Family Decision Making, producing a collaborative and respectful power balance with the family by having them at the table. **Respect** was further demonstrated by ensuring that the family was heard. Staff at VACFSS worked across programs to safeguard **belonging** by keeping the children in their home, community and school, rather than displacing them. The **connection to their**

**community** was achieved through funding trips to their home community out of province. The process and practice also drew on **strength-based practice** through the use of Family Group Decision Making (collaborative practice), resources such as the Urban Butterflies girls group, and recreational events (such as pow wows; family recreational passes, and sporting events).

The group felt that central innovations in this example included:

- 1) We believed in the caregiver and gave her the support she needed;
- 2) Collaboration started right away- initially with the child protection worker, who really believed in the family;
- 3) Great advocacy work done in Resources;
- 4) All programs worked well at points of transferring the relationship between different workers in different programs (and sometimes at different office locations). It was critical that there were no lost threads so that auntie was not reduced to her representations on paper;
- 5) There was a recognition of risk, but a real focus on strength, and
- 6) The VACFSS values were evident in practice with clients, and in how we worked with each other.

## DISCUSSION

### **A living vision: A Value based practice honouring the child as Sacred Bundle.**

VACFSS has, over the course of 20 years, become Canada's largest and most successful fully delegated Indigenous child and family service agency. In many ways it has reached a stage of development sought after by many First Nations peoples in Canada; the full, sovereign and historical right to care for and protect its' children and families. This is no simple matter when one takes into account that VACFSS is responsible for Aboriginal children and families from not just Vancouver or British Columbia, but from across Canada.

With more than 160 staff and three offices in the Greater Vancouver area, VACFSS now serves over 500 families with a cross section of services from early intervention oriented Family Preservation programs through to fully accredited Child Protection and Guardianship services.

Over the course of its life history the Society has developed a strong value based foundation of Aboriginal practice upon which its diverse, culturally grounded child-centred services are delivered. These values of: *respect, belonging, humility, integrity and strength based practice* have shaped a unique urban-based form of service delivery that bridges the complex, intergenerational trauma experienced by Aboriginal families. As well as addressing the impact of colonization and the legacy of the Canadian residential schools' impact on Indigenous families and the strengths of traditional kinship structures.

At the core of the VACFSS model is a living, implemented vision of respect for the *child as a sacred bundle*. This age old core Indigenous child rearing value recognizes the sacredness of childhood, life as a continuous developmental opportunity, the centrality of culture for the transmission of values and knowledge, the role of community and family in preserving this sacred gift, and the honour of those engaged in the Aboriginal child welfare profession in healing the relationships that sustain this.

The present challenge for VACFSS is to build on this success within the context of a rapidly growing and diverse staff often initially with limited experience of the unique challenges facing Aboriginal children and families, and with limited exposure to culturally relevant child welfare practice.

The Strengthening Our Practice (SOP) process undertaken by VACFSS and the IICRD seeks to clarify what is working with the VACFSS practice, and to recommend ways in which this success can be sustained and built upon. The recommendations are clustered around themes of **Culture and Practice** to facilitate an integrated approach to building on success in reinforcing the VACFSS values.

### **The Current VACFSS challenges include:**

#### **1. How to drive the energy from the “roots” of culture and community into the “tree” of organizational structure and practice**

One of the overarching recommendations from the consultations with staff in all program areas was that VACFSS more intentionally apply the experience of using the VACFSS values in their work with clients all practice areas, programs, and into the organizational structure of the agency.

One key challenge emerging from the discussions with staff is that while everyone agrees with the values they do not always seem to be explicit in practice or organizational decision-making.

Strengthening the values implies a greater intentionality in applying concepts of *respect, belonging, humility, integrity and strength based practice* across all practice settings. This could be realized by:

- Reinforcing training for new staff and offering more specialized training on the application of the values to more senior staff;
- Building on mainstream culturally successful programs and ceremonies (Touching the Lands of Our Relations; Homecoming and Reunification Ceremony: Honouring the Journey of Our Youth; Strengthening Families, Dad’s Group, Culturally Relevant Urban Wellness)
- Deepening protocols and agreements with First Nations partners;
- Mentoring: Different approaches to mentorship, modeling and reproduction, and
- Applying a team leadership model to reproducing VACFSS values across the agency philosophy and practice.

#### **2. Healing together from the “bottom up”**

A core strength of VACFSS in comparison with traditional government practices is the healing approach to addressing human adversity and the legacy of colonization and the residential school system. Recommendations on further reinforcing a healing approach include:

- Further communicating that healing is required for both staff and clients;
- Walking alongside the family;
- Involving families and community in developing and implementing agency wide “measures of success”;

- Meaningfully involving youth in developing and implementing agency wide “measures of success”;
- Integrating family preservation practice across all VACFSS service areas;
- Reinforcing the sacredness of the child; the sacredness of a new employee; welcoming ceremonies; creating sacred, safe space for work with families;
- Empowering families to heal together, and
- Recognizing there are No Band-Aids or quick solutions! Taking a long term approach for work with families that integrates opportunities for healing from intake through to long term care and support.

### **3. Four Programs and Three Locations into one: Creating a Culture of Communication and Learning in practice**

Continuing to reinforce the integration of the 4 programs:

- Strengthening inter-house communication;
- Creating stronger team based approaches;
- Applying a family preservation model across all houses as a “bottom up” family centred approach to practice;
- Bringing houses together more often through community events and ceremony, and
- Strengthening the identity of each program by designating them as houses through a naming ceremony grounded in the language of the territories in which we are situated.

### **NEXT STEPS**

The findings and recommendations of the engagement process of SOP have been shared with the Board of Directors and management and the recommendations are being integrated in to organizations strategic planning and development processes.

IICRD will continue to work with VACFSS on the next phase of SOP focusing on five key areas:

1. To integrate the knowledge and principles identified in Phase 1 of SOP into orientation and training materials for staff, resource workers and foster families including practice examples and values;
2. To support VACFSS in establishing standardized feedback processes that systematically and meaningful engage clients, staff and service providers to build on positive practice and improve VACFSS services ensure consistent support and engagement throughout the organization;
3. To identify and review the structures (legislative sections, policy, resources) that support the VACFSS Practice and work with the committee to strengthen policies to better support Aboriginal child well being and protection;
4. To identify key metrics and tools that can be used to track VACFSS practice and train team leaders and frontline staff on implementation and how linked to quality assurance surveys and complaints process and information systematically used to inform practice across programs, and
5. To roll out implementation alongside an appropriate Indigenous evidence-based system of measurement, evaluation and service learning.