Weaving Safety into the Fabric of the Community:
Challenging the Narrowing Mandate of Child Protection

Presented by:
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Purpose Statement (Mission) of Brant FACS

- The Brant Family and Children’s Services will work with families and the community to safeguard a permanent, nurturing family for all children at risk of abuse, neglect or abandonment.

- In response to our commitment to strengthen and value families, we will work to recognize and use the strengths of families in all assessment, decision-making, and actions.

- We share with the community the responsibility for protecting children and strengthening families.

- We will work in collaboration with the community to achieve this purpose.
The Importance of Leadership in the Paradigm Shift

- The Agency needs to create a culture that stresses the importance of ‘community’ in serving our children and families at risk.
- This takes time but the Leaders of the organization including senior staff and managers need to be collaboratively dogged in their determination to change attitudes both inside and outside the organization.
- the model has taken at least a decade to instill. The agency has always had prevention programs but protection was seen as separate. This move to true integration has also been one of the biggest hurdles to overcome and is still an ongoing challenge. Living with each other in the community has helped.
Vision to 2023

- The well-being and safety of children and youth is our primary focus.
- All children, youth and families are valued.
- Together, with our entire community, we share the responsibility of nurturing, protecting, educating and guiding all children, youth and their families.
- Families possess the wisdom, abilities and resources to build a successful family plan. We support their journey toward self-determination, safety and care.
- Children and youth have a voice and are involved in decision-making; we ensure they have the necessary resources to be well supported for success.
- Mutual trust and understanding is built through listening and communicating with respect and compassion.
- Hope replaces fear and families are open to receive help early.
Child Welfare in Ontario

- Challenging task to navigate between protecting children and preserving families
- Pendulum swing (Dumbrill, 2006)
- Continued use of managerialism and neoliberal framework for government.

- Brant FACS continues on a journey that decentralizes our services and moves to services that is interwoven throughout the community.
- Helps us to understand the truth and capacity each community has to keep children safe
Traditional Sites

- Centralized office space outside of neighbourhoods we serve
Community Based Sites
# BFACS Community-Based Sites

## Community Based Child Welfare Team Site Locations in Brant County

<table>
<thead>
<tr>
<th>Name</th>
<th>Address</th>
<th>Postal Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>New Beginnings Team</td>
<td>159 Darling Street Unit 17 Brantford</td>
<td>N3S 3W5</td>
</tr>
<tr>
<td>Grey Street Team</td>
<td>446 Grey Street Unit 101 Brantford</td>
<td>N3S 7L6</td>
</tr>
<tr>
<td>Paris Team</td>
<td>Willett Hospital 238 Grand River St N Paris</td>
<td>N3L 2N7</td>
</tr>
<tr>
<td>Northland Gardens</td>
<td>56 Memorial Unit 11 Brantford</td>
<td>N3R 5R9</td>
</tr>
<tr>
<td>Stepping Stones</td>
<td>50 Pontiac Street Unit 36 Brantford</td>
<td>N3S 2A7</td>
</tr>
<tr>
<td>Slovak</td>
<td>144 Fifth Avenue Apt. 213 Brantford</td>
<td>N3S 7T7</td>
</tr>
<tr>
<td>Native Services Intake &amp; Family Services</td>
<td>446 Grey Street Unit 105 Brantford</td>
<td>N3S 7L6</td>
</tr>
<tr>
<td>West Brant (Transitioning to Community in future)</td>
<td>70 Chatham Street Brantford</td>
<td>N3T 2P1</td>
</tr>
<tr>
<td>Central Team</td>
<td>103 George St. Brantford</td>
<td>N3T 2P1</td>
</tr>
<tr>
<td>Midtown Team</td>
<td>105 George Street Brantford</td>
<td>N3T 2P1</td>
</tr>
</tbody>
</table>
## Integrated Child Protection Community Based sites

<table>
<thead>
<tr>
<th>Integrated Child Protection Community Based sites</th>
<th>Address</th>
<th>Postal Code</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nova Vita Women’s Shelter</td>
<td>59 North Park Street, Brantford, ON</td>
<td>N3R 4J8</td>
</tr>
<tr>
<td>Pregnancy Centre</td>
<td>466 Grand St., Brantford, ON</td>
<td>N3S 3N7</td>
</tr>
<tr>
<td>Woodview Mental Health</td>
<td>643 Park Rd N, Brantford, ON</td>
<td>N3T 5L8</td>
</tr>
<tr>
<td>Major Ballachey School</td>
<td>105 Rawdon Street, Brantford, ON</td>
<td>N3S 6C7</td>
</tr>
<tr>
<td>Bellview School</td>
<td>97 Tenth Avenue, Brantford, ON</td>
<td>N3S 1G5</td>
</tr>
<tr>
<td>Landsdowne Children's Centre</td>
<td>39 Mount Pleasant Street, Brantford, ON</td>
<td>N3T 1S7</td>
</tr>
<tr>
<td>Central School</td>
<td>135 George St, Brantford, ON</td>
<td>N3T 6B4</td>
</tr>
<tr>
<td>King George School</td>
<td>265 Rawdon St., Brantford, ON</td>
<td>N3S 6G7</td>
</tr>
<tr>
<td>Jean Vanier School</td>
<td>120 Ninth Ave, Brantford, ON</td>
<td>N3S 1E7</td>
</tr>
<tr>
<td>Agnes Hodge School</td>
<td>52 Clench Ave, Brantford, ON</td>
<td>N3T 1B6</td>
</tr>
<tr>
<td>St. Basil School</td>
<td>365 Blackburn Dr, Brantford, ON</td>
<td>N3S 2H7</td>
</tr>
<tr>
<td>Graham Bell-Victoria School</td>
<td>56 Grand St, Brantford, ON</td>
<td>N3R 4B2</td>
</tr>
</tbody>
</table>
Community Based Practice

“We feel good about someone being there in times of struggle that we can trust to talk to”.

Feedback from community members during a Community Advisory Board meeting
What do we see from our windows?
Creating the Matrix
Philosophy

The Vertical Line
What do we believe?

Differential Response......Traditional
COMMUNITY-BASED

- Differential Response - Customization
- Strength Based – Partnering with parent in common goal to keep family safe
- Agency as part of shared response and support
- Worker as curious learner
- Risk Assessment – “Why not” thinking
- Able to live with ambiguity and grey
- Maximizing parent capacity maximizes community capacity
- ADR – FGDM – SOS Differences are celebrated as tools to find solutions
- Collaboration – Formal Service and Informal
- Family Centered – Child is a member of family – family is a member of community
- Family seen as “wanting to do what is best for their children”
- Ecological Model – Individuals impacted by environment
- Solutions negotiated
- Decision made in hope

TRADITIONAL

- Traditional Response – Deficit based
- Family seen in isolation from community
- Solutions imposed
- Worker as Expert – Agency as Surveillance and Protection
- Risk Assessment – “What if” thinking
- Responsibility is increased to Worker and Agency
- Family as place of risk
- Pathology and Individuation of Blame
- Black and White – one correct solution
- Decisions made in fear
- Cognitive bias
What’s geography got to do with it?

- Purpose is to better understand those we serve and the unique features of each community site
- What are the strengths?
- Becoming a neighbor in the community
- Safety of the children is a community responsibility
- Increase capacity
- Shared spaces allow for different perspectives
Who/what informs our practice?
Understanding the Matrix
Where is our office?

The Horizontal Line
Where are we located?

Centralized  ------------------------------Community Location
Location, Philosophy, Obligation

- Community Collaboration
  - Worker as Facilitator
  - Strength Based

- Traditional/Forensic
  - Incident Focused
  - Worker as Expert

- Surveillance
  - Incident Focused
  - Worker as Police

- Community Capacity
  - Building and Collaboration
  - Worker as Member/Neighbour
    (Membership has its privileges)
Community Based Practice: Core Principles

- Child Welfare consists of child protection, early help and community development/community capacity building; the integration of each of these components is the cornerstone of Community based work.

- Families have strengths and they are the experts in their own lives.

- Communities are the product of groupings of families. Each community is unique and like individual families have the capacity for growth.

- Child wellbeing belongs to the community and child welfare is part of that same community….not above it or beyond it.

- Child welfare is an outcome and an agency/system. It must be remembered that the outcome cannot be found outside the community despite the fact that the governmental responsibility rests with the agency.
What do our Social Workers say?

It takes a Village.

We share the responsibility of helping children and families be the best they can be.

funding
Meeting clients where they live to providing USEFUL services

CRISIS SITUATIONS
I believe in people's ability to find their own solutions.
Easy service access and connection for our clients.

Negative view of social workers.
Establishing Relationships Outside of Child Protection Role

Caseloads
Being in the community makes me **HOPEFUL**

Seeing people's strengths; how well they cope and parent

→ people aren't always in crisis
Integrated Service Model offering Early Help to At Risk Families

- Integration of child protection, community capacity building and early help
- Working together to offer both family support and protection services
- Not only a service provider but a neighbour in at risk communities
- Timely response involving a wide range of services
- Collaboration with partners and families
- Building relationships and being available
Community Based Practice
Community Based Practice
Early Help offered by Protection Teams

- Mandated child protection services
- Development of partnerships with the school community, Nova Vita, neighbours within the communities we have sites, service providers using the Resource Centre, Pregnancy Resource Centre, Woodview Children’s Centre
- Group work within the schools as well as in the community
- Individual support to children in the schools
- Regular non crisis connections with families at all shared office locations
What does Early Help look like?
What does Early Help look like?
What happens while at the BBQ?

- Development of relationships
- Sense of humanity
- Circular exchange of resources—reciprocity in relationships and trust (“helper”/”helpee” – who’s who?)
- Partnerships with other community service providers and families within the community
- Sharing knowledge
<table>
<thead>
<tr>
<th>Community-based Philosophy</th>
<th>Traditional Philosophy</th>
</tr>
</thead>
<tbody>
<tr>
<td>*strength-based response</td>
<td>*self as expert</td>
</tr>
<tr>
<td>*increased knowledge of families frame of reference</td>
<td>*evidence based practice</td>
</tr>
<tr>
<td>*therapeutic response</td>
<td>*incident focused</td>
</tr>
<tr>
<td>*collaborative approach to a shared responsibility to the family</td>
<td>*”risk makers”</td>
</tr>
<tr>
<td>*use of self as the worker is important</td>
<td>*see problems</td>
</tr>
<tr>
<td>*family as expert</td>
<td>*narrow focus</td>
</tr>
<tr>
<td>*holistic approach</td>
<td>*decisions out of fear</td>
</tr>
<tr>
<td>*counseling</td>
<td>*use client to meet own needs</td>
</tr>
<tr>
<td>*see possibilities</td>
<td>*refer to outside sources – disconnect in service delivery</td>
</tr>
<tr>
<td>*AOP/Diversity as practice</td>
<td>*holistic approach</td>
</tr>
<tr>
<td>*safety planning - SOS</td>
<td>*counseling</td>
</tr>
<tr>
<td>*connect the dots</td>
<td>*see possibilities</td>
</tr>
<tr>
<td>*parallel process</td>
<td>*”risk makers”</td>
</tr>
<tr>
<td>*creative solutions</td>
<td>*”risk makers”</td>
</tr>
<tr>
<td>*”risk takers”</td>
<td>*see problems</td>
</tr>
<tr>
<td>*comfort with shades of grey</td>
<td>*narrow focus</td>
</tr>
<tr>
<td>*better information=better assessment=better outcomes</td>
<td>*decisions out of fear</td>
</tr>
<tr>
<td>*neighbour not a visitor</td>
<td>*use client to meet own needs</td>
</tr>
<tr>
<td>*building concept of citizenship</td>
<td>*holistic approach</td>
</tr>
<tr>
<td>*community capacity building</td>
<td>*counseling</td>
</tr>
<tr>
<td>*competency based</td>
<td>*see possibilities</td>
</tr>
<tr>
<td>*community needs assessment</td>
<td>*”risk makers”</td>
</tr>
<tr>
<td>*coalition activity</td>
<td>*see problems</td>
</tr>
<tr>
<td>*joint response with other community partners and neighbours</td>
<td>*narrow focus</td>
</tr>
<tr>
<td>*reflective practice</td>
<td>*decisions out of fear</td>
</tr>
<tr>
<td>*relationship based practice</td>
<td>*use client to meet own needs</td>
</tr>
<tr>
<td>*AOP/Diversity as fabric of the community</td>
<td>*holistic approach</td>
</tr>
<tr>
<td>*ability to offer groups – possibly with service providers</td>
<td>*counseling</td>
</tr>
<tr>
<td>*solidarity</td>
<td>*see possibilities</td>
</tr>
<tr>
<td>*facilitate families helping each other</td>
<td>*narrow focus</td>
</tr>
<tr>
<td>*understanding greater social issues</td>
<td>*decisions out of fear</td>
</tr>
</tbody>
</table>

**Roles of Social Worker**

**Community-based Philosophy**
- task centred practice
- perceived as threat to community
- risk management
- policing and surveillance role
- elitism
- paternalistic response
- black and white thinking

**Traditional Philosophy**
- task centred practice
- perceived as threat to community
- risk management
- policing and surveillance role
- elitism
- paternalistic response
- black and white thinking
The Paradigm Shift from Traditional to Community Based Child Welfare Work

TRADITIONAL
- The Goal - to protect each child one by one
- Question is: “what if”
- Saving children
- Provider as “expert”

COMMUNITY BASED
- Goal –”make the local area a safer place for children” (Wright, 2004)
- Question is: “why not”
- Look at root causes of family trauma/upset not just symptom
- Keeping children safe
- Family as “expert”

“I know nothing about the subject, but I’m happy to give you my expert opinion.”
What is Child Abuse? Definitions

<table>
<thead>
<tr>
<th>Traditional</th>
<th>Community Based</th>
</tr>
</thead>
<tbody>
<tr>
<td>Narrow</td>
<td>“safeguarding” (Wright, 2004)</td>
</tr>
<tr>
<td>Risk</td>
<td>Broad</td>
</tr>
<tr>
<td>Specific</td>
<td>Risk and safety</td>
</tr>
<tr>
<td>Protection</td>
<td>Ambiguity/complex</td>
</tr>
<tr>
<td></td>
<td>Depth and breadth</td>
</tr>
<tr>
<td></td>
<td>Welfare</td>
</tr>
</tbody>
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# Underlying Messages/Principles

## Traditional
- Child protection is the agency’s business … professional business
- Expert model
- Risk Management
- Individualizing the problem

## Community Based
- “Child friendly communities” (Wright, 2004)
- “child protection is everyone’s business” (Wright, 2004)
- Ecological model
- Consider system oppression and marginalization in communities

> Until the great mass of the people shall be filled with the sense of responsibility for each others welfare, social justice can never be attained.

*Helen Keller*
Accountability

Traditional
- To the Agency
- To the Ministry/Government

Community Based
- To the family
- To the community
- To the Agency and Ministry/Government
Work is concerned with...

**Traditional**
- Surveillance
- Outcomes

**Community Based**
- “building social capital” (Wright, 2004)
- Community as a protective factor
- Process of involvement not simply outcomes
- Engagement
- Relationships
Partnerships with Community

**Traditional**
- Patchwork
- Services offered side by side
- Families referred
- Silo’s and multiple visions
- Conflictual and adversarial at times

**Community Based**
- Integrated – part of the fabric
- Shared responsibility
- Layering of service
- Families are “rooted in service”
- Shared vision with community despite different roles/tasks
- Increased safety
Use of Self

**Traditional**

- Expert
- Prescriptive response
- Directive
- Predicting – “I predict”
- Professional circle (meeting before the meeting)
- Risk driven
- Othering of client

**Community Based**

- Engagement
- Build relationships
- Seek to understand through listening
- Appreciative inquiry
- Honesty and transparency
- Use of strengths to mitigate risk
- Value family input
- Reflexive practice
- Authenticity - “shared humanity”
Next (Messy) Steps
Where are you located?

Community Collaboration
Worker as Facilitator
Strength Based

Community Capacity Building and Collaboration
Worker as Member/Neighbour (Membership has its privileges)

Traditional/Forensic Incident Focused
Worker as Expert

Surveillance Incident Focused
Worker as Police


