

THE HISTORICAL ALTERNATIVE:
Learning Organization Practice in Child and Family Services

By

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ABSTRACT

This thesis represents the story and analysis of my journey as executive director to recreate child and family services. A decade of social worker practice prompted me to search for a better way to design and deliver child and family services; one which is predicated on relationship-building, innovative delivery, and visionary thinking. My reading of the learning organization literature became the catalyst for creating a paradigm shift used to initiate change within Awasis Agency. It gave me the courage to say "we can think about and do things differently". As the thesis is based on my experience, a qualitative approach to inquiry was utilized to formulate and report my analysis. Heuristics was the form of phenomenological inquiry that brought to the fore my personal experience and insights. Awasis Agency as a result of its learning adopted a learning paradigm as a model of governance. A framework was developed to illustrate diagrammatically (see figure 1) the paradigm shift from the 'Traditional Patriarchal System of Governance'. The framework is divided into three sections: mental models; organizational structures; and practice orientations. It is important to note that this paradigm captured the Agency's new ways of thinking about child and family services. Alternative ways of thinking were derived from this framework which fosters an ongoing change process encompassing shared vision, systems thinking, team learning, awareness of mental models, and personal mastery rather than merely particular objectives and results. Paradoxically, by

emphasizing an ongoing change process, objectives and results are realized in ever changing contexts and truly serve the people in them.

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The Historical Alternative has been an extraordinary journey both personally and professionally. It was written not as a vehicle to do things differently, but rather to encourage thinking about and seeing things differently.

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DEDICATED

To

My Wife, Twyla

and Sons

Alexander and Andrew

The ideas offered by Senge (1990) in his book The Fifth Discipline: The Art and Practice of The Learning Organization (personal mastery, mental models, shared vision, team learning, and systems thinking) were not necessarily new ideas per se. Senge's ideas and language represented a new way of thinking about and looking at organizational development. While the ideas inherent in learning organization literature were initially developed for the corporate world, when put together with community development theories related to the field of adult education, the agency was empowered to create those components necessary to fundamentally change the delivery of child and family services. As individuals, we had ideas and theories about how things could be changed for the better, yet often the bureaucracy inhibited us from taking action. The agency needed an organizational environment that allowed for, indeed encouraged the development and utilization of new ideas. The integration and internalization of learning organization ideas offered this opportunity.

By focusing on relationships rather than rules agency members were able to quickly create a content and committed team that was working towards a shared vision. Energy that previously was diverted to resolve staffing disputes were positively redirected. Roles that categorized people were redefined to become more flexible and open resulting in the crossing and blurring of role boundaries. Rules were re-written to support the changing process. While my responsibilities as an Executive Director remained, my relationship with our Board resulted in board members becoming more program orientated, and I myself becoming more politically orientated. A shared responsibility for developing and implementing creative alternatives was formed. This change in relating to each other as peers was empowering and impacted on every level of the organization and every level of service delivery. In essence we

began to experience each other in new ways.

What was the most difficult aspect of this process was buffering the resistance and reaction to our changes within the larger context, the provincial organization. To counter this, a small, diverse nucleus of people that supported the vision, in time invited a larger circle of people to share in and contribute to our process. What was pivotal to our success was the support of our local political organizations in challenging the status quo of the provincial organization. I have come to know, and subsequently believe, that within every organization there exists visionary people who have the ability to see and support positive change. Systemic utilization of their support is crucial.

Sharing our vision and process with individuals outside our agency involved taking uncalculated risks, because these individuals had the power to influence our change process by enforcing policy and maintaining funding regulations. What we were doing was fundamentally different than traditional child welfare practice, which raised concerns around accountability and ownership. However, early and quick success helped to secure the support needed to move forward. A healthy and satisfied team substantially reduced staff turnover, more organized and responsive programming resulted in community change, and a change in practice resulted in a substantial reduction in the number of children in care, saving tax payers millions of dollars. This experience has demonstrated to me that when people are empowered within a clear process framework, positive change happens quickly and is self reinforcing.

Contextual conditions further enabled the change process to begin. Providing service in Northern Manitoba affords a certain degree of isolation from larger systems and as such we were "at arms length" from the provincial child and family service system. This coupled

with extensive support from the Board of Directors, particularly the Chairman of the Board, provided us the latitude needed to be different. However, our isolation did not altogether prevent us from needing the support of the larger system as the process unfolded. As a First Nation Child and Family Service Agency, the federal discussions around dismantling INAC played a legitimizing role for creating alternative practice models. In addition, the 1990's has been a decade when provincial child welfare departments across Canada sought new ways to deliver service, particularly to reduce cost.

We live in a time when constant change has become a normal and expected part of our lives. Just as flexibility is required in our personal lives, the policies and frameworks which guide our organizations need to be flexible to ensure on-going change in our practice models. The organizational and practice frameworks described in this thesis represent a specific reference point not a final solution. These frameworks fit our stage of learning and the particular political and social environment within which the Awasis Agency operates. This thesis represents a collection of ideas, a first attempt to capture our learning and create a framework to talk about and critique our development process. I am confident that it represents a solid foundation from which to begin and will no doubt continue to change in order to reflect our learning, the changing needs and priorities of the communities and families we work with, and the political environment we work within.

Our success is not merely "doing things differently", but rather is "thinking about and seeing things differently". A reliance on a particular way of doing things can only fail over time. What is necessary is a way of critically reflecting upon beliefs and assumptions, organizational structures, and practice frameworks. In order to ensure the development and

delivery of quality child and family services, organizational structures need to embrace learning at all levels, allow for collaborative team work and shared vision, and encourage a systemic understanding of how people create and perpetuate the environments in which they live and work. It is anticipated that the agency's development will continue to be driven by learning organization ideas, and that by sharing our process, others can learn and create with us.

CHAPTER 1

Introduction

Reformulation of Child and Family Services Policy

Public Child Welfare agencies came into effect during the “progressive era” (1900 to 1965) which moved responsibility from the people to professional bureaucrats. As a result, this era gave birth to many social programs which Rappaport (1981) described as paternalistic in nature:

For the first two-thirds of this century the legislative, government, and administrative social policy makers built an apparatus to provide services to the needy with little concern about the possibility of abuse and loss of rights. In this scheme of things the helping professions were the frontline soldiers in an army that would benevolently care for the poor, the retarded, the mentally ill, and the downtrodden. (p.10-11)

The paternalistic organization has been well documented and is described as a system under which the authority and control of its members is exerted unilaterally in a top-down fashion (Senge, 1994; Morgan, 1986). This approach has proven to be disempowering as it fosters a state of dependency and submissiveness (Beer & Spector, 1985; Hall & Goodale, 1986; Walton & Lawrence, 1985). Clients that need services have to behave in ways that fit the organization’s model of “needy” clients.

Over several decades that followed this era, child welfare services were developed, delivered, and controlled by provincial governments that operated within a period of governmental bureaucratization. The fundamental feature of the bureaucratization of the child and family services system was the centralization of authority over the structural properties of child and family agencies, funding, and service standards. As a result, child welfare services in the 1990's, now more commonly referred to as child and family services,

have evolved into monolithic bureaucracies characterized by rigid lines of authority and top-down decision making processes (Kamerman & Kahn, 1989).

Reform of the child and family services system, as well as most other government social programs, is a part of government agendas. High numbers of children remain in care and the cost of maintaining the system has become unmanageable. For many, there is also the recognition that the current system of services overall is not producing the kind and quality of results that justifies current expenditures or which can meet future needs.

There is growing awareness today amongst policy makers and practitioners that large public child and family service agencies are not able to effectively respond to the socio-economic and political contextual changes of modern day society. More serious cases of abuse, fewer resources and conflicting mandates due to downsizing in response to fiscal restraints, and increasing public accountability are evidence of these contextual changes. According to Shields & Milks, (1994) these societal changes are not only more rapid but are transformational in nature.

Paradoxically, we have created a child and family services system that presumes to speak for the public interest but is increasingly less grounded in the real life experiences of the people and/or informed of the contemporary needs of the community. This “business as usual” position is no longer an option; the bureaucratization of child and family services has alienated the public and those the field was set up to serve. As stated by George Thomas, (1994):

Unless fundamental changes are made in the way child welfare services are provided, the only predictable outcome of the provision of more resources would be further deepening the division of more “us” and “them,” further

strengthening the pre-disposition of clients and the public to respond in hostile or adversarial ways, and hastening the self-induced demise of these services. (p. 229-230)

The fiscal realities of the 90's have resulted in the rethinking of how services should be developed, managed and delivered across the country. Historically, government programs have developed as a response to a particular social problem and are defined within narrow mandates. By narrowly defining mandates the organization makes its work more manageable, but the definitions are only partly workable. The nature of human behaviour and the evolution of societal norms, family norms, etc., mean that any organization's mandate will miss part of the problem. Clients will be "fit" into categories that do not fit their real needs. Further, some clients fall between organizations and their mandates as the current system of children related services is extensive, but often fragmented and uncoordinated (Manitoba Child and Youth Secretariat, May 25, 1995). While this approach has had some success in managing social programs at the symptomatic level, it has failed to address the underlying causes of these problems. As a result, governments have created programs that are unresponsive to the needs and have become the target of public dissatisfaction.

The Alberta Family and Social Services planning document; "Redesigning Children's Services," suggests that one reason for this problem is structural, meaning that the mandate has dictated the structure:

We were told that Governments Services often cannot lead to lasting results because program mandates focus on single conditions and tend to categorize children according to mandates of available programs... It is time to redesign our approach to providing services.

The structures tend to create categories and categories create mismatches between

client needs and organizational services. Ontario's draft Policy Framework for Services under the Family and Child Services Act also follows this trend in thinking and acknowledges:

These services were put in place over many years without a plan that makes sure that all of these services and supports, together are the best set of services and supports for families, children and youth....Too often families and youth looking for support feel like they stand outside of our collection of services unsure how to find what they need. When they do find services or supports, too often they find they had to accept what was offered, and what was offered came too late, and it did not fit what they wanted or needed.

Both Alberta and Ontario agreed that integrating services through planning, policy development and delivery could deal with the issues mentioned above and produce significant changes. As policy development involves changing mandates and structures, then policy development activities must be a regular feature of organizational operations. From Alberta's document:

Many jurisdictions have tried to improve children's services by simply promoting coordination and by adding to the existing mix of government services. This approach has not been successful. A key component of effective change involves actually integrating policy development and integrating the delivery of services to children. The purpose of integration is to remove organizational barriers, budget conflicts and gaps in services.

Government child and family services agencies have wielded enormous power over the lives of families and communities in the past, but have not been answerable to them in any democratic sense. Bureaucracies and institutions which have held such authority have little experience in releasing power to the people they have managed for decades. Building healthy communities is clearly everyone's responsibility, yet we have institutionalized child and family services by legal mandate. The bureaucratization of services forms a poor fit as it makes government the central provider and regulator of services. All of this serves to undermine

community ownership. What is needed is not re-engineering but "regenerating," defined in the dictionary as, "spiritual rebirth to give new life or energy, especially after a decline to a low or abject condition."

The truth is, things will not change until we begin to think differently. A new direction is required for the future in which we are guided more by how we choose to think than by ready solutions. Visionary leadership needs to exist at all levels of the organization and must have the foresight and ability to deal with change. In an increasingly dynamic environment, adaptable organizations need to be innovative, responsible, and willing to work with a greater level of uncertainty.

According to Thomas (1994) the field's leadership faces three potential pathways to the future:

To one side a "MY HANDS ARE TIED" arrow points to the path of historical inevitability. The middle path is clearly marked "SMOKE AND MIRRORS" and leads to stylistic revisions or cosmetic change. To the other side lies the path with no clues as to where it might lead. This path is risky and calls for an adventuresome spirit, one willing to entertain the prospect that in following it we might end up being something different than what we were at the start. (p.237)

It is from this third path that this thesis speaks.

PREAMBLE

Five years of intense practice and reflection have passed since joining Awasis Agency of Northern Manitoba, a First Nation Child and Family Services agency, as its Executive Director. This experience has reinforced my previous experience and conviction that the fundamental philosophical paradigms that drive provincial child and family services systems in Canada are not conducive to effective child & family services practice, resulting in a low quality of service. It is my belief that traditional child & family services paradigms act as an overall disempowering force in the lives of children and families that completely disengages communities in which these families live. These traditional paradigms serve to maintain the status quo of service delivery and are focused on managing symptoms through manoeuvre of social control.

This thesis represents the story and analysis of my journey as executive director to recreate child and family services. A decade of social worker practice prompted me to search for a better way to design and deliver child and family services; one which is predicated on relationship-building, innovative delivery, and visionary thinking. My reading of the learning organization literature became the catalyst for creating a paradigm shift used to initiate change within Awasis Agency. It gave me the courage to say "we can think about and do things differently". In essence, the paradigm shift required focusing on relationships rather than rules, encouraging collaborative innovative approaches to service which challenged existing boundaries and parameters, and moved beyond a daily child protection perspective. I experienced the learning organization literature as both legitimizing and liberating, and provided me a process framework for developing different organizational structures and practices.

CHAPTER 2

Research Parameters

Historical Context

The Statutory Framework

The Constitution Act, the Imperial Conference of 1926 and the Statute of Westminster set out the respective powers of the Federal and Provincial governments. This legislative entitlement subsumes Inninu (human being in Cree) inherent power to live out their own lives. For First Nation people who do not derive their power from outside sources, the Canadian legislative entitlement has proven to be the most destructive piece of legislation for our communities.

Section 91(24) of the Constitution Act, gave the Federal government exclusive jurisdiction over “Indians and lands reserved for Indians”. The Indian Act, and its successive amendments, provided the provinces with a legislative inroad whereby provincial laws of general application are applicable to “Indians” on and off reserve unless presented by Federal legislation. Band councils mandated by the Indian Act were established to exercise delegated powers, but are often viewed as mere extensions of the Department of Indian Affairs Canada (INAC). The Penner Report, (1983) states: “even the Department states that band governments are more like administrative arms of INAC than they are governments accountable to band members.” (p. 17)

However, band councils are the only Indian government organization recognized in the Indian Act. Stripped of the authority to operate the fundamental functions of government, current band governments are little more than factotums of federal control.

The Province of Manitoba further asserts it possesses the power and authority to extend child welfare legislation over First Nation communities by virtue of s.92(16), “Civil and Property Rights”, of the Constitution Act. Thereby making the Child and Family Services Act, enforceable in First Nation communities. The rationale here is that children possess civil rights thereby granting the province power to extend their legislation into First Nation communities.

The Tripartite Agreements

First Nations’ experience with the child protection system has been shaped by jurisdictional disputes between the federal and provincial governments. Both governments asserted that the other has responsibility for the delivery of child welfare services on-reserve. As a result, in the 1940's child welfare in our communities was non-existent. This situation was compounded by the apparent ambivalence of the federal and provincial governments to commit funding and resources.

In 1946, a special Joint Committee on the Senate and House of Commons was appointed to examine and consider the Indian Act and to suggest amendments. The committee’s most significant recommendation was that financial arrangements be developed to “integrate” Indians into provincial education and social services programs. A new section was added to the Indian Act providing that all provincial laws of general application became applicable to Indians on and off reserve in the absence of federal legislation (Awasis Agency, 1996).

With financial resources available, the province began to extend child welfare services to First Nations. The result was the “sixties scoop”. The 1960's saw a large number of First

Nation children apprehended never to be returned to their communities.

In the 1970's the Manitoba Indian Brotherhood, the Government of Canada, and the Government of Manitoba agreed to a tripartite process. The master agreements were negotiated as interim and provincial solutions to the jurisdictional and constitutional impediments which had prevented progress in the past. Under this arrangement, the division of responsibility was such that each level of government assumed specific responsibilities: the Government of Canada assumed full responsibility for the financing of child welfare services where the parent(s)/guardian(s) were normally resident on-reserve, on Crown land or on unorganized territories. The Government of Manitoba agreed to extend the Manitoba Child Welfare Act as the interim legislative base, and to assume full financial authority for the cost of services where the parents/guardians were presently living off-reserve.

In 1980, the Indian Child Welfare Sub-Committee submitted a report which became the basis for the Canada-Manitoba-Indian Child Welfare Agreement. In 1981, the Federal Government gave its approval for a 5 year program in child welfare. In February 22, 1982 the master agreement was signed. Provisions had been included to allow for subsidiary agreements. In 1983, the Manitoba Keewatinowi Okimakanak (M.K.O.) signed the Canada-Manitoba-Northern Manitoba Indian Child Welfare Agreement which established Awasis Agency of Northern Manitoba to provide child and family services to status Indians living on reserves. It derives its legal mandate to operate pursuant to the Child and Family Services Act. Thus it can be said that First Nation Child and Family Services continue to operate within provincial frameworks whose policy, program standards, and practice are not always consistent with the values of First Nations.

Changes have been made in provincial legislation to accommodate First Nations. For example, in Manitoba, shortly after the Kimelman Inquiry Report "No Quiet Place" (1985) was released, the Government of Manitoba introduced procedural and substantive changes in the Child and Family Services Act. This was an effort to impart some degree of cultural sensitivity to their judicial and service provision processes to ameliorate or reduce the harmful effects of dominant child welfare practises in our communities. Here was a public admission that traditional child welfare practices were failing First Nations communities.

The tripartite agreements were entered into by the M.K.O. leadership in the early 80's as an interim measure. At that time M.K.O. leadership had requested legislative authority, executive authority and administrative authority. The agreement recognized executive and administrative authority, with the intent to work towards legislative authority. The executive body was set up to be a policy governing board that would take over full governance and ensure First Nation values were incorporated into practice. The tripartite agreement expired in 1985. Contribution agreements continue to be signed every year with the same arrangements despite the initial federal/provincial guarantee that legislative authority would be granted to Manitoba Keewatinowi Okimakanak Inc.

Awasis Agency

The agency was one of six First Nations Child and Family Services agencies that were mandated to provide child and family services to First Nation communities within Manitoba. Awasis Agency is governed by the provincial Child and Family Services Act and is primarily funded by the federal government. Presently, Awasis Agency provides child and family services to 18 communities which include approximately 40% of the on reserve First Nation

children in Manitoba. All of the communities served by Awasis Agency are north of the fifty first parallel and are considered remote and isolated by federal and provincial government standards. The range of services provided by the Agency include: (a) Foster care, (b) Family Support, (c) Adoption, (d) Child Protection, (e) Special Needs, and (f) Children in Care.

Awasis Agency is incorporated as a First Nation Child and Family Services Agency under the Manitoba Child and Family Services Act, as well as a not-for-profit Corporation under Manitoba's Corporation Act. The membership of the Corporation is made up "Chief's in good standing" representing each of the 18 communities which the Awasis Agency is mandated to serve. A Board of Directors consisting of 7 to 11 chiefs is elected from the membership each year.

Essentially, the chiefs of Northern Manitoba agreed to enter into the agreement as an interim measure to exert greater control over services to children and families. However, the majority of the first decade was mainly directed towards crisis management in an attempt to mesh the provincial child and family services framework of policies, standards, and regulations with remote First Nation communities. There was an uncoordinated approach toward planning and management, high employee turn-over, and children were being apprehended at an alarming rate. It was not until Awasis Agency began to pursue a developmental process guided by the "learning paradigm" (Chapter 3) as a model of governance that significant change occurred. A premium was placed on the organization's capacity to engage in continuous learning and adaptation.

Since the author joined the Awasis Agency in 1991, the agency has pursued a developmental process guided by a paradigm shift aimed at empowering communities to plan

and care for their children and families. This paradigm shift reflects a fundamental change in thinking about the manner in which program development should be undertaken. The impetus behind the development of this thesis is to share an alternative approach towards thinking about child and family services practice. More specifically, it is intended to draw together a set of ideas and practices useful to create policy that offers a new perspective and directions for child and family services practice. It undertakes to shape a much needed vision for transformational change of existing service systems, and seeks to provide a coherent framework for new directions. This thesis draws upon both conventional and action-oriented fieldwork, including the author's work with Awasis Agency during the last five years, and from 15 years experience of social work practice.

Methodology: Qualitative Inquiry

Because the purpose of this thesis is to present a policy document that provides a new perspective and context for developing future directions within child and family services practice, it is written with the knowledge that it may have a broad audience.

As the thesis is based on my experience, a qualitative approach to inquiry is utilized to formulate and report my analysis. Qualitative research focuses on understanding phenomena from the participants perspective and experience and in showing how meaning arises from that experience (Lincoln & Guba, 1985). In qualitative research, phenomena, or more precisely, the participants interpretation of their experience, is a primary source of data (Gilgun, 1994; Sherman, 1994). Heuristics is a form of phenomenological inquiry that brought to the fore my personal experience and insights. According to Guba & Lincoln (1981), the one defining characteristic of heuristic inquiry within the larger framework of

phenomenological, is that the researcher must have personal experience with and intense interest in the phenomenon under study.

According to Craig (1978) the rigour of heuristic inquiry comes from systematic observation of and dialogues with self and others.

It affirms the possibility that one can live deeply and passionately in the moment, be fully immersed in mysteries and miracles, and still be engaged in meaningful research experience. (p.20)

Patton (1990), talks about the world of practice and pragmatism:

While students writing dissertations and academic scholars will necessarily be concerned with theoretical frameworks and theory generation, there is a very practical side to qualitative methods that simply involves asking open-ended questions of people and observing matters of interest in real world settings in order to solve problems, improve programs, or develop policies. (p.89)

The development of child and family services policy is typically not a straight question and answer, challenge and response operation. It is with this in mind that this research project challenges not only the current thinking of child and family services policy development but the limitations of qualitative social scientific inquiry and method. Adopting the heuristic approach is my attempt to follow a different path by using my personal learning in understanding and creating a different context of child and family services in Northern Manitoba.

As such, this thesis aspires to be informative about the Awasis Agency experience and to:

1. provide a new framework for analysis that differs both in substance and context from traditional approaches;
2. provide leadership in program and policy development by stimulating debate

and discussion on child and family services policy concerns facing contemporary Canadian society; and,

3. increase agency learning and give practitioners within the field, the community, and most specifically the consumer, a place from which to challenge or a basis on which to rethink the status quo.

In order to understand the paradigm shift that has guided the development of the Awasis Agency over the past five years, and to tell the story of its evolution, the following interrelated chapters have been created. Chapter three highlights the "learning organization" literature that provided a philosophical foundation for our developmental process. Chapter four discusses the paradigm shift that occurred from the "traditional bureaucratic system of governance" to the "learning paradigm as a model of governance" which resulted from our learning as we engaged in our developmental process. It examines the assumptions and beliefs (mental models) which guided the evolution of new organizational structures and the impact of those structures on practice. Chapter five demonstrates the application of the 5 disciplines: (a) personal mastery (b) mental models (c) shared vision (d) team learning, and (e) system thinking (Senge, 1994) during the development, evolution, and continuance of the agency. Chapter six discusses the policy implications for Awasis Agency and other agencies who seek to move away from the traditional paradigm of governance toward a learning paradigm of governance.

CHAPTER 3

Creating a Learning Organization Within the Context of a First Nation Child and Family Services Agency

Overview

As I began my directorship of Awasis Agency (henceforth, the Agency) in 1991, I had little interest in managing a traditional child and family services agency; what I would frame as primarily a “child protection” mandated organization, which lures policy makers into designing interventions that focus on obvious symptoms rather than underlying causes, which in turn produces short term benefits, long term malaise, and fosters the need for even more symptomatic responses. My intention from the start was not to administrate or manage a traditional bureaucratic child and family services agency, but rather, to “lead” a developmental process of a self-defined, community based, health-promotion, oriented First Nation child and family services agency. Because the Agency operated in some distance from the provincially managed bureaucratic system, a unique opportunity presented itself to lead the change process.

My own view of the term ‘development’, and particularly ‘community development’ is grounded in my belief that critical consciousness leads to critical behaviour (action). I had come to learn from my past experiences with government systems that the direction of development depended a great deal on the individuals who influenced the political decisions because their beliefs and values, or their view of the world, made the difference! My prior experience in the practice of community development fostered an active interest in adult education, an examination, and where appropriate, a rejection of the conventional wisdom.

Community development and community education models of practice (Robert, 1982; Rothman, 1968; Friere, 1970) value non-formal learning. Unlike formal educational settings where formal instruction provides control over what and how learning occurs, the learning process within the community development process places emphasis on the initiatives and participation of people in defining their "felt needs" and in doing something about them by being involved in a problem solving process. A crucial element in this community and education development philosophy is that people must be permitted, even encouraged, no matter how gradually, to develop their own awareness of what it is they need (Roberts, 1982).

As Brookfield (1983) suggests, community development and education rest on several underlying principles: (a) that people are capable of perceiving and judging the conditions of their lives; (b) that they have the will and capacity to plan together in accordance with these judgements to change these conditions for the better; (c) that they can act together in accordance with these plans; and (d) that such a process can be understood as being guided by certain values. Key to the non-formal learning process, however, is the element of leadership in regards to facilitating or directing the learning process.

The Learning Organization Framework

Our learning at the Awasis Agency was heavily influenced by the literature on empowerment practices in community development as well as on the literature on "learning organizations" (Watkins & Marsick, 1993; Kline & Sanders, 1993; Nannus, 1992 & Block, 1993). In particular, we found that Senge (1990) offered the most comprehensive thinking on the learning organization relating to organizational development and leadership. Senge (1990) refers to learning organizations as:

Organizations where people continually expand their capacity to create the results they truly desire, where new and expansive patterns of thinking are nurtured, where collective aspiration is set free, and where people are continually learning how to learn together. (p. 3)

As an organization, we adopted his five principles that fundamentally distinguish learning organizations from traditional patriarchal organizations: personal mastery, mental models, shared vision, team learning, and systems thinking (Senge, 1990). Personal mastery involves creating an organizational environment which encourages all its members to become aware and to create a reality in light of the goals and purposes they choose. Mental models involve reflecting upon, continually clarifying, and understanding how our beliefs, values and perceptions shape our decisions and actions. Shared vision involves developing a shared vision of the future with guiding principles and practices to realize that vision. Team learning involves transforming conversational and collective thinking skills so that groups can continuously learn and create synergistic outcomes. Systems thinking is a way of thinking and understanding the forces and inter-relationships that shape our behaviour so as to effectively change systems and to act more in tune with larger processes of the natural and political world.

When we began using these ideas within our organization, the flexibility that evolved and successes that followed acted as a catalyst for us to begin viewing our child and family services practice with communities and families in similar ways.

While learning organization ideas emerged in the organizational development literature in the early 90's, these ideas are not new to First Nation people. The concepts of personal mastery, mental models, shared vision, team learning and system thinking are all inherent in

traditional teachings. First Nation people are taught that development comes from within, that experiences act as a mirror for personal reflection, and that all things are connected so we must "walk in balance" with a shared vision and sense of unity (Bopp, Bopp, Brown & Lane, 1985).

Personal Mastery

Personal mastery involves creating an organizational environment which encourages all its members to become aware and create a reality in light of the goals and purposes they choose. Senge (1990), believes personal mastery encompasses more than personal development and learning needs. Individuals with a high degree of personal mastery are more committed, more innovative, have a deeper and broader sense of responsibility in their work, and learn faster. Personal mastery involves a process of self reflection with the aim of clarifying what is important and has the potential for profoundly changing the way individuals make sense of their experiences. Such transformational learning as defined by Mezirow (1990) represents a process of continual learning that goes beyond the development of competency and skill. It enhances communicative competence defined as the individuals ability to negotiate meanings and purposes instead of passively accepting the social realities defined by others (Bowens, 1984).

Consequently, this paradigm truly empowers individuals and families, and the staff of the Agency had to be empowered to take control of their own lives and health. The assumption was that healthy organizations have healthy employees, in much the same way as healthy communities have healthy families. Because the Agency, with few exceptions is staffed by First Nation people, we had to work through the self limiting beliefs and address

healing issues that impact on nearly every First Nation individual in Canada as a result of years of cultural oppression (Boldt & Long, 1985). This process of personal mastery began with our management group which comprised the initial learning community. This group facilitated the personal growth and development process involving key local staff, who are now beginning to facilitate the growth and change of local staff and community members.

Mental models

Mental models involve reflecting upon, continually clarifying, and understanding how our beliefs, values and perceptions shape our decisions and actions. The Awasis Agency decided that redefining child and family service delivery must go beyond tinkering with the system, to challenging the very basic assumptions and habits of the organization as a whole. This is where fundamental reform begins, and this is where the Awasis Agency began with its developmental process. We began by exploring, examining, and challenging the basic assumptions and philosophical beliefs which underpin traditional social work practice. We now understand how our assumptions, beliefs and values, or world views, influences the type of services that we believe we should be providing, the way that these services are structured, and the practice orientations that are adopted. How we view the world becomes not only the basis on which models are formulated but also the criteria for choosing problems that can be assumed to have solutions (Kuhn, 1977).

Hence, we decided that we needed to look beyond child protection issues or symptoms within the child and family. We needed to keep enlarging our perspective, viewing child abuse and neglect incidences with wider and wider lenses; those lenses being from child to family to community to nation. In addition, we moved from a negative orientation of

focusing on "the problem" and dysfunctions to focusing on prevention, and then further still, to focusing on promotion and empowerment. We began to view every opportunity as a learning experience, an opportunity for critical self analysis as individuals and as an organization. We began undertaking several social policy research initiatives that examined the impact of various systems on First Nation child and family services delivery. We moved from the narrow focus on treatment, prevention, and punishment of child abuse and neglect to the broader focus on health and well being within families and communities and as employees within management and the leadership of the organization itself.

The central underlying premise we maintained was that our families and communities were capable of living healthy lifestyles, were capable of directing and controlling their own lives, given the opportunities to be involved, to learn, and to interact. This premise went against the commonly held beliefs (mental models) that our people and our communities were not yet ready, or were incapable of making healthy decisions that were in their best interest.

Shared Vision

Shared vision involves developing a shared vision of the future with guiding principles and practices to realize that vision. Senge (1990) refers to the practice of shared vision as one that involves the skills of unearthing shared pictures of the future that fosters commitment versus compliance.

Heaney and Horton (1990) write:

Education is a road with successive destinations. It cannot of itself build a new society but can only accompany and strengthen each newly identified act of social reconstruction. Doomed to failure from the start are the efforts of those who attempt to create emancipatory education with no vision of the future grounded in present or emerging events and organizations. (p. 87)

Heaney and Horton (1990) are suggesting that the "doing" of education programs without knowledge of the destination (vision) will fail to create "real change" as they are disconnected from the underlying social issues and struggles that permeate everyday living and from which critical reflection emerges. On the other hand, clarity of vision combined with action are the matter and form of liberation (Freire 1979). In learning organizations, leaders help create a shared vision of its desired future that requires the commitment of everyone to move ahead (Senge, 1990).

Team Learning

Team learning involves transforming conversational and collective thinking skills so that groups can continuously learn and create synergistic outcomes. Team learning is critical in that teams, not individuals, are the fundamental learning units in learning organizations (Senge, 1990). According to Senge, team learning has three critical dimensions: to think insightfully, to be innovative, and to inculcate the practices and skills of team learning through the organization.

Systems Thinking

Systems thinking is a way of thinking and understanding the forces and interrelationships that shape our behaviour so to effectively change systems and to act more in tune with larger processes of the natural and political world. Systems thinking is a framework for seeing interrelationships rather than issues; for seeing patterns versus snapshots; and for seeing underlying structure rather than symptoms. From the linear viewpoint, attention is geared towards placing blame, whereas, systems thinkers focus on the whole in which everyone shares responsibility for problems generated by a system (Senge, 1990).

Over the past five years, the staff of Awasis Agency have come together as a supportive community with a shared vision to support the establishment of strong, healthy communities. The agency's approach toward development has been fostered through an extensive emphasis on designing a comprehensive approach to "learning and development" which has involved the total community. Our approach has involved moving from receiving training to owning our learning; from external skill development to internal personal development; from an individual focus to team learning; from being passive recipients of information to actively exploring and defining our own areas of knowledge; and from theory to learning that is practice driven, and grounded within First Nation realities. It is from out of these shifts that our local model of practice is emerging.

CHAPTER 4

A Paradigm Shift

During the period since the first child welfare legislation was enacted in the late 1800's, the choice of a model for governing child and family services has been a focus of debate (Melichercik, 1987). While the debates have focused on "practice models", Senge (1990) suggests that what is really behind practice model debates is the issue of paradigms. According to Senge (1990), paradigms are the broader mental sets or world views which influence the kinds of models we develop and/or adopt. They are pictures of reality, or particular ways of constructing social reality which are shaped by our own needs and assumptions (Senge, 1990). Our current "protective" understanding of child and family services is one such construct.

Thomas Kuhn (1970) in an influential book entitled 'The Structure of Scientific Revolutions' has suggested that changes in scientific outlook come about through a series of paradigm shifts, where one model or paradigm is replaced by another. He suggested that paradigm shifts occur over time as more and more dysfunction begins to develop with a certain model or paradigm. Attempts to rescue the paradigm through reforms and adjustments eventually break down as the dysfunction becomes too great. However, in order for a paradigm shift to occur a new paradigm must first be conceptualized.

In the case of child and family services, I would suggest that the field's leadership has sought to remedy the dysfunction within the existing protective paradigm. I would further argue that our failure to remedy the dysfunction rests in the existing paradigms in which organizational structure and practice orientations are formulated. It is my belief that

the challenge then, as we find ourselves involved in social change, is to become conscious of the paradigms in which we are currently constructing our reality, so as to increase the possibility of major and creative leaps in our conceptualization leading to critical action.

Learning Paradigm as a Model of Governance

Awasis Agency as a result of its learning adopted a learning paradigm as a model of governance. A framework was developed to illustrate diagrammatically (see figure 1) the paradigm shift from the 'Traditional Patriarchal System of Governance Paradigm' to the emergence of a new paradigm, 'Learning Paradigm as a Model of Governance'. The framework is divided into three sections: mental models; organizational structures; and practice orientations. Examining the assumptions inherent in the mental models which guide traditional systems of governance and learning models of governance is essential to understanding the structures that emerge from each paradigm. Mental models which emphasize reductionism, competition, and dominance are more likely to establish structures which are fragmented, departmentalized and centralized. Mental models which emphasize holism, partnership, and self responsibility are more likely to establish structures which are decentralized, integrated, and inter-sectorial in nature. In addition, organizational structures which have a fragmented, departmentalized, and centralized orientation are more likely to implement programs which are organizationally-based, specialized, and expert driven (Kelly, 1987). Conversely, organizational structures that have a holistic, partnership, self-responsibility perspective, will more likely implement programs that are community-based, multi-sectorial, and consumer driven in nature. It is the intent of this chapter to explore the

inter-relationship between mental models, organizational systems and structures and practice orientations within the evolving Awasis Agency.

It is important to note that Figure 1 was designed to capture the Agency's new ways of thinking about child and family services. It was not intended to lead the reader to think of the two paradigms as opposites, but rather to help bring about a paradigm shift in child and family services by focusing on a new direction or as Covey (1992) would frame as a new compass, the learning model of governance.

Figure 1: The paradigm shift

TRADITIONAL PATRIARCHAL SYSTEMS OF GOVERNANCE PARADIGM	LEARNING PARADIGM AS A MODEL OF GOVERNANCE
MENTAL MODELS	MENTAL MODELS
Reductionism Competition Rule Based Decision Making Exclusion Independent Dominance Adaptive Learning Individual Focus	Wholeness Partnership Value Choice Decision Making Inclusion Interdependent Self Responsibility Generative Learning Contextual Focus
STRUCTURES	STRUCTURES
Centralized Departmentalized Patriarchal Fragmented Strategic planning Management Dichotomy of Theory and Practice	Decentralized Inter-sectorial Learning Organization Integrated Strategic thinking Leadership Interrelationship of Theory and Practice
PRACTICE ORIENTATIONS	PRACTICE ORIENTATIONS
Prevention (5%) Child Focus Technical Rationality Protection Focus Organizationally Based Training Therapeutic System Accountability	Promotion (95%) Child/Family/Community Focus Participating Consciousness Child/Family/Community Development Community -Based Learning/Development Learning Consumer Accountability

Mental Models

Mental models are deeply ingrained assumptions, generalizations, values, and beliefs or even pictures or images that influence how we understand the world and how we take action (Senge, 1990). For example, Watkins & Marsick (1993) state that:

democratic beliefs push organizations toward participatory management, whereas a belief in the superiority of educated classes pushes organizations toward hierarchical, professionalised management. (p.158)

These world views are reflected in organizational and/or governmental structures, that in turn inform models of practice and delivery. In the learning paradigm as a model of governance, emphasis is on vision, values, and mental models. The impact of our understanding of mental models is profound, in that we found that systematic insights often never found their way into policies because they conflicted with our deeply held internal images of how the world works or should work.

A number of basic shifts in thinking and behaving, all systematically interconnected, were at the core of the transformation. This section will briefly examine the shifts of mental models that separate the traditional and the learning paradigm: reductionism to wholeness; competition to partnership; prevention to promotion; rule based decision making to value choice decision process; exclusion to inclusion; independent to interdependent; dominance to self-responsibility; adaptive learning to generative learning; and linear to context.

Reductionism to Wholeness

The first major shift addresses the question of, “Whom does it serve?”. Most organizations are bureaucratized to some degree, for the triumph of reductionism and

mechanical thinking has shaped our most basic conceptions of what an organization is all about. Humankind has achieved unimaginable successes in controlling its physical and social environment by breaking it down into manageable pieces. But this progress has had many unfortunate consequences.

The "machine-like cultures" provide clearly defined job descriptions, policy manuals, hierarchies of arranged managers, uniform training and standards as this approach implies that there is but one reality. The assumption of this model is that systems are aggregates of parts that interact relatively weakly and in a linear manner.

While the child and family services system clings to the old, machine-based, bureaucratic paradigm the business community is replacing the reductionist model with the learning paradigm which focuses on the whole. As a result some modern organizations are beginning to rethink how they will start to redress their approach to people and work. They are creating new freedoms by tearing away both hierarchal and departmental structure, redesigning themselves and looking at systems and processes rather than functions as the main organizing principle.

Unlike Newtonian theory which suggested that the world is made up of matter consisting of discrete particles--atoms--that attract, repel, or resist each other, the Uncertainty Principle of quantum physics found that at the core of the atom there was nothing, revealing that in fact there is no reality, only possibility (Kofman & Senge, 1995). It is this reasoning that challenges the development of an alternative paradigm by exposing the limits of a fragmented world view.

Using system archetypes, the field of child and family services can squarely address the current bureaucratic process of neatly compartmentalizing services around very narrow mandates. Redefining the field's mandate as building healthy communities offers a way out. It could provide a unifying vision and sense of purpose to counter the endless fractionalization that currently exist from pursuing a child protection focus. It could free us from our practice of fragmenting complex situations into symptoms, treating the symptoms, and not looking into the deeper causes of child abuse and neglect problems. This could also act as a catalyst to re-attach the world with the self and the self with the community. Identifying capacities in children, families, and communities for self care and self direction would replace the current focus on problem reduction.

Senge writes about when astronaut Rusty Schweickart of Apollo 9, circled the earth he began to identify with the indivisible whole:

You look down there and you can't imagine how many borders and boundaries you cross again and again...From where you see it, the thing is a whole, and it's so beautiful. And you wish you could take one from each side in hand and say, "Look at it from this perspective". (p.370)

Competition to Partnership

The shift from competition to partnership places emphasis on flexibility as leaders and followers alternate roles, experiencing shared leadership, and function as teams. We have become overdependent on competition and unaware of how partnership might enhance our work. Competition is such a profound influence it impinges on our model for change and learning. We often think and speak in terms of war and sports analogies -- 'beat the competition', 'overcome resistance', 'take over', etc (Kofman & Senge, 1995). Within

government bureaucracies this focus on competition creates personal stress, weakens physical and mental health, and damages personal relationships.

In contrast, the learning model of governance seeks to build, enhance and promote the fundamental concept of Partnership in the development, delivery and planning of child and family services. The Laidlaw Foundation in its Fall Newsletter (1995) suggest that:

partnerships are essential to improving the well-being and life chances of Children, Youth and Families in Canada...Partnerships provide a way for people with a common commitment to children and youth to come together to develop new perspectives, identify new solutions and transform existing practices to provide more effective supports to families.

In the same Newsletter Dr. Dan Keating of the Canadian Institute for Advanced Research further elaborates the need for partnerships:

It seems clear that partnerships are absolutely essential for any significant progress in healthy and competent Child Development. In the contemporary climate, they are the only real route we have to move forward.

Partnerships require us to invent new sets of social relationships or social arrangements which require a great deal of 'social innovation'. Dr Keating states that:

We are talking about a shift in mind set. We are not creating a new institutional sector like a ministry. We are trying to figure out the best way to organize to deal with particular tasks. The solutions are always going to be local and they are always going to be ad hoc. You have to be flexible and thoughtful and keep in mind the goal; and purpose of the partnership.

The partnership model builds on the community development principle of, "Unity in Diversity" which best represents the idea that there is no one monolithic solution to social problems and therefore no single structure to do it. Social innovation requires both diversity and unity to meet the many challenges to children, youth and families.

Rule-Based Decision Making to Value Choice Decision Process

Rather than prescribing specific steps in the decision making process, the values choice decision process focuses on specific attributes such as self awareness, critical thinking, consideration of alternative choices and the taking of personal responsibility. A shift to value choice decision making will encourage the development of a shared value base which will allow child and family services organizations to develop an operational framework through which structures and practice issues can be re-defined. The typical problem of government bureaucracies may be described as “confusion” between rules and boundaries (Billis, 1992). Billis (1984) argues that this role confusion is a result of poorly thought-out government legislation which sets unrealistic boundaries to front line worker activity. He notes that once fixed, organizational change can only take place within pre-defined boundaries. Gove (1995) suggests that public inquiries into the death of children in care of a child and family services agency have revealed lack of clarity regarding the actions of workers at each level of the bureaucracy, suggesting that rule-based decision making inherently leads to gaps in role clarity, ownership and accountability.

As we pass from the era of patriarchal systems of governance to a period of regeneration, rationalism begins to give way to a new humanistic approach rooted in values as opposed to rules. In traditional hierarchical organizations rules are made at the top and people at the bottom follow. There is a lingering belief that this type of top-down approach is necessary in order to maintain control. By contrast, today's organizations are beginning to focus on values as there could never be enough rules to govern every aspect and variation of

issues that organizations face. In fact, a similar situation will have different key players when it happens in a different context. Therefore, the values of the organization would guide the decision making process leading to consistent but different action being taken. Griffin & Ricks, (1995) note that:

Frameworks provide a common way for practitioners with varying backgrounds and life experiences to approach problem solving in the ethical domain. (p.11)

Exclusion to Inclusion

An even broader shift will bring child and family services organizations from an orientation of exclusion to a more open community driven operation. When services are defined from an "exclusive" position, stakeholders, in particular consumers of services, are excluded from the process of planning and development. Adopting an inclusive perspective involves believing that all stakeholders need to be involved in the process of designing and implementing programs.

In developing programs, understanding comes from a number of sources. People see and interpret things differently, from different perspectives. It is our responsibility to facilitate collective community learning, integrating multiple perspectives into program development. With increased understanding, we are in a better position to initiate action that is effective and long lasting. Thomas (1994) writes:

On the basis on mutual trust, the old welfare relationship that separates "experts" from dependents and givers from receivers can be reformed into one that is based on collaboration. (p. 245)

Independent to Interdependent

A related shift to interdependence impinges on the ability of child and family services

to truly stimulate freedom of thought. As noted by Covey (1994), the transactional independence way of thinking is rooted in the mechanical, controlling, managing “things” paradigm. It takes place in day to day delegation, and it usually involves good human relations principles, but the parties involved are not transferred, nothing truly synergistic takes place. When we try to operate a child and family services system through an independent, achievement, linear paradigm we create a massive imbalance in our organizations. Moving from an independent to an interdependent paradigm creates a whole new way of thinking. According to Covey in looking through the lens of the interdependent reality the focus is placed on people rather than things:

It moves from transaction to transformation, where the synergy of interdependence is created in the very nature of the interaction itself. People are altered. They are transformed. They do not know when they begin the transaction what kind of dynamic is being unleashed inside the communication process...It's people interacting in a state of release rather than control. This kind of transformational interdependence is a whole new world. (p.208)

Dominance to Self Responsibility (Empowerment):

In traditional organizations, power is generally viewed as control over valued resources (Schlesinger & Zornitsky, 1991). The shift is to put that power in the hands of the people who are directly affected as a way of increasing decision-making authority and self-responsibility. Empowerment is viewed as an intentional ongoing process centred in the local community, involving mutual respect, critical reflection, caring and group participation, through which people lacking an equal share of the resources, gain access and control over the resources (Schlesinger & Zuritzky, 1991).

This may be at the level of staff, program, community, and/or consumers of a service.

It means being liberated from one set of standards, procedures, and rules. From an organizational perspective, the old notion of work as a collection of jobs is being replaced by the more expansive concept of work as a series of projects. In child and family services organizations, this might mean moving from a system of centralized decision making, to one that encourages initiative and innovation from individuals and units that are willing to assume more responsibility. It also implies a need to redress the relationship between government and community from a top down expert driven system to one that is more collaborative. Secretan, (1996) writes:

Our society will be transformed over the next twenty years as ownership concepts and practices are overhauled. The current model does not work anymore and has resulted in concentrations of power and competing agendas that have led to alienation, fear, and helplessness in the workplace...Traditional managers will continue to struggle with the implementation of concepts based on personality-restructuring, delayering, TQM and the like-but real breakthroughs cannot be made this way. (p. 197)

Adaptive Learning to Generative learning

The transformational path will require a shift from adaptive learning that is often prescribed and reactionary to a generative learning approach. Generative learning, on the other hand, can be self directed, exploratory, expansive, and transcendent. Many training and education programs emphasize the transmission of knowledge, as if experience is uniform and can be reduced to “fact”. A move from skill training (i.e. competency training programs) to generative learning represents a move from transmission to transformation of learning (Mezirow, 1990). Learning as transformation acknowledges the historical experiences at the level of the event, thus emphasizing its uniqueness. It respects the multiplicity of perceptions,

as it grounds learning within personal assumptions, beliefs and principles. Thus, competency based skill development programs will not produce the expected results if the framework of skill development is designed and developed outside the context of community.

Individual Focus to Contextual Focus

Societal forces are often not perceived as involved in the creation of social ills. There is a tendency of prevention programs to shift the responsibility for social problems to potential victims and ignore the social conditions that constitute the ecological systems of those the prevention is intended. A contextual perspective looks for the risks, opportunities and constraints on development which occur at individual, family, community and systemic levels (Unger & Powell, 1991). Child and Family Services programs tend to focus on individual-family relations, and a one way chain of influence (linear model of cause and effect) as a result of its narrow “child protection” focus.

While a growing number of human service organizations are beginning to adopt a contextual perspective, attempts to operationalize it have proven difficult. One reason for this could be that the dominant governance system is unsupportive of this type of development. The critical challenge of governments is to develop and refine program initiatives that recognize the contributions of both person and environment to individual functioning. Exclusive focus on individual skill development offers only a partial solution given that the major life circumstances that enhance and limit development are in one's context.

Organizational Structures

This section examines the relationship between organizational structures, and their

impact on service effectiveness in child and family services organizations. The relationship between these structural properties and organizational effectiveness have only been partially examined, even though there has been a continuous theoretical debate on the definition and evaluation of organizational effectiveness. What will emerge from this analysis is that learning organizations in comparison to the bureaucratic organization do not have a clear cut division between policy, administration, and community. The following shifts will be explored: from centralization to decentralization; from departmentalized to inter-sectorial; from bureaucratic organization to learning organization; from fragmentation to integration; from strategic planning to strategic thinking; from management to leadership; and from the dichotomy of theory and practice to the inter-relationship of theory and practice.

Centralization to Decentralization

The shift to decentralization provides the structure for collaboration if organizations value the shift and individuals stop working in isolation. Although highly centralized and hierarchically organized systems deliver certain benefits such as a guarantee of common standards, and the ability to offer all citizens equal treatment, it has done so at considerable cost. McKenzie (1991), point out:

Centralized services... have been criticized for being ineffective because they are unresponsive to local needs, alienating to users because they are inaccessible, highly professionalised and overly specialized, and undemocratic because they are subject to senior political and managerial control rather than local community and client control. (p.2)

Miller (1988) suggests that the devolution of authority to plan and deliver child and family services at the community level can have important potential advantages:

- * It can promote desirable developments within communities, such as greater voluntarism, advocacy, mutual aid, community support for services, and a general sense of local control.
- * It can make improvements in service delivery possible, in the form of heightened responsiveness to local issues, flexibility, accessibility, and speed of action.
- * It can encourage efficient and effective management of services, in the form of the best use of resources, flexible and effective integration of services, and increased responsiveness to opportunities for proactive, preventive initiatives.

Departmentalized to Inter-sectorial

The shift to inter-sectorial relationships creates bridges amongst the high degree of specialization that currently acts as a barrier to collaborative working relationships. Our current system of children's services is extensive, but often fragmented and uncoordinated. This often leaves gaps in the service network and results in jurisdictional disputes. The emphasis by each department on categorical need results in problems with in the best use of financial resources. Frequently, the child is forced to fit the system rather than the system meeting the total and integrated needs of the child. A number of provinces have undertaken processes to address this issue. What has been lacking is the necessary leadership for fundamental change.

Competition between departments over scarce resources has become dominant, precisely at a time when we most need to work together. Thus it is common for senior officials to be locked in dangerous conflict over budget allocations, capital expenditure approvals, and the favours of those with power. Our overemphasis on competition makes looking good more important than providing good service. Overemphasis on competition

also reinforces our fixation on immediate short term measurable results which often leads to a state of long term negative consequences.

An inter-sectorial approach would demand shared authority, shared responsibility and shared accountability. By moving along a continuum toward co-creation, other capacities are called for: listening for people's vision and aspirations, inquiring into values and ways of thinking; and sharing responsibility. This approach is grounded in context, occurs within relationships, and considers all aspects of individual, family and community development. It is relationship-based rather than function, compliance and/or bureaucracy based.

The main objective of an inter-sectorial approach is to initiate a coordinated and integrated system of services. Specifically, the objective includes reducing fragmentation, competition, and reactivity as well as overlap and duplication of services.

Bureaucratic Organization to Learning Organization

An important shift concerns the child and family services organization as a working environment. The traditional bureaucratic organization is defined as an hierarchical system of roles occupied by paid staff. Defined in this way, the rules of the game are based on the managerial chain of command which lies at the heart of the bureaucratic system (Jaques, 1976). In such a system, "policy" is made within the upper echelons of the bureaucracy separate from "administration", with the clients or community remaining outside both systems (Heclo & Wildavsky, 1989). Typically, in public bureaucratic child and family services organizations change requires political sanctioning, and the active support of the hierarchy. The clients and community remain outside the hierarchy and have little impact (Rein, 1983).

The essential point about these bureaucratic systems is that the major boundaries of the organization are relatively rigid, making innovative change difficult. The broad societal purposes and main activities are enshrined in legislation and embodied in the role of the senior staff.

In contrast, the learning organization supports a bottom-up approach with respect to decision making and supports high employee involvement with the overall control and management of the organization. Characteristics of such a system include:

- * humanistic versus behaviouristic;
- * democratic and participatory versus controlling and authoritarian;
- * employees viewed as intrinsically motivated to continuous learning versus employees viewed as passive, unmotivated who require external motivation techniques to perform (extrinsically motivated);
- * learning as ongoing process versus learning as a solution to a problem, as a distinct outcome;
- * proactive, positive, ongoing learning (generative learning) versus reactive, distinct problem-focused learning (adaptive learning);

Transformational change is central to the learning organization approach as individual, organizational, and systemic learning is integrated. Because of the humanistic foundation, with its emphasis on needs, learning and development, learning organization approaches fit nicely within every level of a human service agency. Its structure is capable of bringing about its own continuous transformation. Its culture supports continuous learning, learning and working is viewed as being synonymous. A learning organization's structure views people as colleagues and companions rather than bosses and employees. Practitioners are designers,

stewards and teachers, in their own right.

Fragmentation to Integration

A shift to integration supports the idea of unity in diversity. In the field of human and social services, fragmentation results in silos that separate different functions into independent and often warring freedoms. Such a situation is counterproductive. When change efforts go forward without sensible links to one another, problems surface as programs compete for resources. The fragmentation is caused by “Mandates” that focus on single conditions, cost sharing arrangements between various levels of governments that narrowly define services, and a lack of a common framework from which to engage in successful multidisciplinary work. A way of rectifying this situation might be found in the following quote from the Ontario's draft policy framework for services under the Family and Child Services Act Planning Document:

Resources and services funded by this ministry belong to the community, because they come from taxes paid by the community and because the ministry must make sure that they are used for the benefit of the whole community. This ministry and service providers do not own these resources, but are responsible for them. Since these are the community's resources, the community has a collective responsibility to make sure they are used in the best way possible.

Reviewing both the Alberta's and Ontario's planning documents reveals that they are moving in a similar direction with respect to their systems. The key similarities between these two provinces are: community planning and delivery of services, decentralized decision making, integrated/coordinated service delivery at the community level, and focus on early intervention.

There is general agreement today amongst senior bureaucrats that a management discipline is missing in the field of human and social services, a coherent and integrated vision of initiatives and services. An integrated approach demands shared authority, shared responsibility and shared accountability which requires an emphasis on participatory management techniques along a continuum of co-creation and working in partnership with others. This is not to discount the importance of specialization where it is critically needed. It is not the intent of integration to water down quality but rather to develop new strategies to achieve the desired results more effectively and efficiently. This issue is discussed in the Government of Saskatchewan's Child and Family Services Integration paper:

Similarly, in the pursuit of integration, there may be a loss of necessary specialization, as each player in the activity strives to understand and advance the whole picture.... There will always be diversity in what people do on a Team but what is not different is the common objective of each Team member.

Strategic Planning to Strategic Thinking

The shift from strategic planning to strategic thinking is reflected in the notion that the most successful strategies are visions, not plans. Comprehensive long-range strategic planning of the one or five year intervals in today's world is seen as ineffective (Senge, 1990), as too often, such efforts result in the generation of a great deal of paper, but seemingly little concrete action. According to Hamel and Prahalad, (1989) two of the most articulate critics of contemporary strategic planning:

Although strategic planning is billed as a way of becoming more future oriented, most managers, when pressed, will admit that their strategic plans reveal more about today's problems than tomorrow's opportunities. (210)

According to Edwards and Eadie, (1994) strategic planning approaches may suffer from being unselective, mechanistic and place an overemphasis on strategy formulation with little attention to implementation planning. In contrast, Mintzberg (1994), views strategic planning as being something very different than strategic thinking. In fact, he sees strategic planning as spoiling strategic thinking, causing managers to confuse real “vision” with the manipulation of numbers.

Management to Leadership

In what Naisbitt and Aburdend, (1990) refer to as a “new age” in organizational change, they claim that a shift to leadership from management control is needed to bring about organizational change. Management control focuses on maintaining control within pre-defined parameters and expectations. Leadership involves challenging parameters, going beyond the expected, seeing the potential, and encouraging innovative practices. As management is connected with control, leadership is connected with vision.

Dichotomy of Theory and Practice vs Inter-Relationship of Theory and Practice

As a way of joining theory and practice a shift to using a participatory approach to development will be required. Traditional approaches to academic rigour involved the division of theory and practice expertise. The development of separate Ph.D and Ed.D programs in universities is an example of this separation.

We can no longer assume to have learned all relevant theories in university that will continue to inform our practice forever. Professional practice is an ongoing process of learning where practice informs theory and theory inform practice. Participatory action

research is a marriage of reflection and informed action, leading to a new reality. Theory and practice are integrated, each giving rise to the other in an evolving “praxis”, with the knowledge base being continuously expanded. The learning paradigm as a model of governance challenges the field’s leadership to move beyond this artificial split to a more inclusive paradigm. Berman (1981) asserts that:

The only way out of this double bind, it would seem, lies in rising to a new level of holistic consciousness....a methodology that merges fact with value and erodes the barrier between science and art. This methodology is holistic rather than Cartesian, and as much intuitive as it is analytic. (p.233)

According to Schon (1983) professional practice is an ongoing process of learning. He called his approach “knowing in action.” Today Schon’s approach is more commonly referred to as participatory action research, a marriage of reflection and informed action, leading to a new reality. Participatory research views theory and practice as integrated, each giving rise to the other in an evolving “praxis”, with the knowledge base being continuously expanded.

Participatory action research and program development links collective inquiry (reflection), collective learning (education), and collective action (Calhoun, 1993; Guba & Lincoln, 1989). It is an inquiry and educational process in which both facilitators and collaborators participate in order to learn about each other as well as about local social conditions. It is an action process in which both facilitators and collaborators learn about and work toward improving social conditions. The process is based on the assumption that the way people see their lives and formulate their own interests is of central importance to inquiry and action and that collective inquiry produces new knowledge for participants. It is a long

endeavour and not a limited intervention. It is undertaken in collaboration with real groups in their context. It's product, objectives, orientations etc. are arrived at through consensus. It begins not with a specific research problem or objective, rather with the needs of a situation and a concrete social practice. Learning and education are elements in a process of social change, therefore, the object of participatory action research is a social situation, not a series of isolated variables that can be analyzed independently. Most importantly, the staff become directly involved in process rather than being objective.

Participatory action research aims are three types of changes; (a) development of critical consciousness of both staff and participants; (b) improvements of the lives of those involved in developments; (c) transformation of fundamental societal structures and relationships (Stringer, 1996). It also involves a cycle consisting of moments of reflection, planning, acting, observing, reflecting, and re-planning which takes place in a spiral fashion. Smith, Pynch, and Lizardi (1993) suggest it involves three learning cycles; (a) education and analysis; (b) investigation (c) action. Grundy and Kennis (1982) outline the following stages: (a) individual action and reflection; (b) individual action and collaborative reflection; (c) and finally collaboration action and reflection leading back to action again.

The main principles of participatory action research are that people have the capacity to learn and work together for a better life and knowledge, skill and resources should be shared so as to support fair distribution and structures. Participatory action research has the capability to move communities to become more developed, more human, and helps them grow in confidence and enter new learning cycles. It acknowledges the validity and

importance of people's knowledge, and builds competence and health in individuals and communities.

One of the main purposes of doing research is to inform policy and service development. Why should the power to undertake research rest within government hands and universities exclusively when the responsibility to develop and deliver services rests within the communities' hands? It is those who are directly involved in service delivery that should have the resources to undertake research that will further inform and direct the delivery of services. Therefore, appropriate resources necessary for research and development should accompany resources for service delivery.

Practice Orientations

The third section of the framework examines the practice orientations which grow out of both the traditional patriarchal systems of governance and the learning paradigm as a system of governance. This is often the only level at which stylistic revisions to child and family service practice occurs. However, without transformation of the mental models and organizational structures which govern practice, little can be accomplished. Programs which state that they operate from a family focus perspective, yet continue to hold elitist top-down operating philosophies, do little more than shift the blame from the child to the family as a whole.

This section will examine the shift from prevention to promotion, from a child focus to a child/family/community focus, from technical rationality to participating consciousness, from protection to learning and development, from organizationally-based to community-

based service delivery, from training to learning/ development, from specialized services to multi-sectorial/multi-disciplines services, from a therapeutic to a learning emphasis, and from system accountability to consumer accountability.

From 5% Prevention to 95% Promotion

Prevention, treatment/intervention, postvention all have their historical roots in the medical field. As a result, both prevention and treatment models have disease as their underpinning. While prevention models have done a wonderful job of reducing the need for treatment interventions, they still operate from a “weakness” perspective. They assume that individuals are basically vulnerable, and need to be protected from potentially damaging situations (Dunst, Trivette, Thompson, 1991). Prevention is defined by Dunst, Trivette, and Thompson (1991) as “the deterrence or hindrance of a problem, disorder or disease.” (p. 30)

In prevention, the interventions occur prior to the onset of negative functioning in order to reduce the incidence or prevalence of negative outcomes. Preventive actions based upon these characteristics communicate, sometimes implicitly and sometime explicitly, that life is full of troubles and life events constitute threats to one’s health. When these messages are communicated to individuals, there is an inherent eroding of personal power which is easily replaced by fears of incompetence, and fears of being overwhelmed.

An assumption embedded within prevention ideology is that social problems should be avoided rather than rectified. Social workers often focus their practice on re-mediation and accommodation of people to unjust or poverty situations rather than to elimination of its causes. In addition, preventing problems does not assure the strengthening of family

functioning. Numerous recent research shows that an interdependence relationship does not exist between absence of poor functioning and the presence of positive functioning, rather an independent relationship exist (Kanner, Feldman, Weinberger and Ford, 1987; Kagan, Powell, Weissbourd & Zigler, 1987). Research has generally failed to show an inherent correlation between a decrease in negative outcomes and an increase in competence.

Promotion is defined as the enhancement and optimization of positive functioning. For promotion or empowerment models the focus is on enhancing individual or family strengths and capabilities, and providing opportunities for efficacy. Promotion interventions are proactive, focusing on the acquisition of competence and capabilities that strengthen adaptive functioning. Promotion efforts are “strength based” as they assume all individuals have strengths and the capacity to become competent if afforded certain opportunities to learn (Dunst, Trivette, Thompson, 1991). The emphasis will involve a shift from prevention programs to efforts which promote individual, family, and community self determination.

Many social service models are based on the deficit reduction model of intervention, in which the client must demonstrate inadequacy before being defined as eligible for assistance. The irony is that human services are based on the beliefs that services be designed to move families toward independence. However, usually we require that the family become totally dependent, through demonstrated inadequacies, in order to become eligible for services designed to make them independent. Complete lack of respect, based on the admission of inadequacy, is fundamental to the deficit model. This ideology is in direct opposition to values underlying empowerment and promotion programs.

From Child Focus to Child/Family/Community Focus

Traditional child welfare interventions often result in the child being removed from the family and placed in care. Removal of a child often leads to substantially reduced self-esteem and confidence in the child and family. By establishing programs that address the family unit as a whole, not just parts of the whole, or as separate individuals within a family, the benefits become numerous. The family remains intact and parental responsibilities are retained. Keeping family members together shifts the focus from family separation to family cohesion. The feeling on the part of the parents, and the inherent feelings of fault on the part of the child are minimized. The disempowerment of parents that occurs when an outside system steps in and takes over are reduced.

Family interventions provide the opportunity to look beyond the behaviours of the children and to enhance the daily interactions of family members. It counters much of the energy consuming aspects of traditional child welfare interventions such as:

- * behavioral control issues of children;
- * separation anxiety;
- * awkward inclusion of parents in programming; and
- * reintroducing the child back into the family.

Family focused interventions provide an opportunity for family members to witness immediate impact of new behaviours and attitudes on the family, and to reflect upon old patterns and ways of behaving. The ways we learn to deal with certain situations and life events are often derived and reinforced by our family of origin and from past experiences. A

shift to family interventions will allow for inter-generational interventions to occur and inter-generational understanding to grow. If the entire family has an opportunity to learn and develop as individuals and as a family unit, “sustainable development” is more likely.

From Technical Rationality to Participating Consciousness

The shift to technical rationality is rooted in the Cartesian scientific paradigm (Berman, 1981), which regards knowledge as originating outside the self, discovered through detaching the self from the environment to objectively observe and analyze reality. It suggests that absolute truth exists “out there”, that only one reality exists, and that the “truth” can be collected and interpreted by a detached team of experts. It also suggests the following two premises: (a) “we’ll tell you what it is you need to know, and; (b) “we’ll do it for you as you do not have the skills.” Although public child and family services organizations have espoused positions regarding the need for self directedness and community ownership, it is apparent that their paternalistic position towards the community has not changed. By defining professional activity as instrumental problem solving by applying scientifically tested methods, social work professionals in turn become experts. A trend toward the technical rational perspective over practice wisdom in social work has been noted and critiqued in recent years (Berlin, 1990; Haworth, 1984; Imre, 1984; Peile, 1988).

From Protection to Child/Family/Community Development:

The shift from protection to development is in response to the movement towards collaborative relationships and the divestment of command over resources by large public child and family services organizations. Since World War II child welfare services have

experienced steady growth (Thomas, 1994). Today, the child welfare field dominated by child protection is overwhelmed by escalating demands, a critical shortage of resources and high public dissatisfaction. Despite the enormous investment of funds into “the system”, the incidence of abuse and neglect shows no sign of diminishing. We have reached a point at which we must ask the question: "what have we learned from this experience"? We must challenge the notion that protective services under the control of bureaucracies actually reduce the risk of child maltreatment. The bureaucratic approach has been to define the units of service delivery to be a case, not a child. By controlling, the inputs and outputs, just like a machine, certain predictable results can be forecasted including overall cost to service children in care. The result was to place extreme pressure on the system to perform in the short term at the expense of the long term with many children hurt as a result.

In *The Welfare of Children* (1994), Linsay argues that severe physical or sexual assault of a child should be handled by the police. She states that:

Child Welfare authorities are preoccupied with this narrow aspect of child welfare system's obligations to a much larger population of children...Community development projects that empower local communities can improve the quality of the lives of children. If we dismantle the current structure for identifying, reporting and managing child abuse and neglect, we can divert these resources to community development activities. (p. 8)

This would place the child and family services system in a better position to return to the streets and engage in a honest relationship with the community.

From Organizationally-Based to Community-Based

Organizationally-based child and family service practice often ends up serving the best interest of those in leadership positions within the organization. The organization takes on

a life of its own. Service priorities and practice models are organizationally determined and defined, often not addressing the needs of those it is intended to serve. Power, for the most part, remains within the walls of the organization. In contrast, a shift to community-based service delivery is grounded within the realities and needs of the community. Service priorities and practice models are community defined, and collaboratively developed through the sharing of ownership and power. It incorporates a contextual perspective to development, moving the awareness around problems beyond individual family members. Practice based on community systems approach includes the following:

- * emphasis on both the environment enrichment and service enhancement;
- * emphasis on both social and economic support;
- * readiness to rethink use of existing resources and redeployment of same;
- * commitment to connect experience to policy development;
- * moving locus of control or sphere of influence from the organization to the community; and
- * from services based on organizational priorities to services based on community need.

From Training to Learning/Development

Change in the infrastructure of the Awasis Agency required a shift from training to learning. Traditional child and family services practice relied on prescribed competency skill training and educational specialists. The outcome of this type of training is one of passive compliance -- attending with little learning. This type of training was not linked to or integrated with our work, and was certainly not grounded within First Nation realities. As

a result it did not reflect First Nation families needs. Our new approach focused on learning being viewed within a whole system of policies and occurring within the context of teams. With the shift to learning/development, emphasis was placed on designing a comprehensive approach to "learning and development" which has involved all staff of Awasis, foster parents, and First Nation families. We focus now on generative learning that springs and grows from within our context. Our approach has involved moving from "training" to "learning"; from "skill development" to "personal development"; from individual development to team learning; from being passive recipients of information to actively exploring and defining our own areas of knowledge; and from theoretical training to learning that is practice driven, and grounded within First Nation realities. It is from this standard that our models of practice are emerging. Our link with the University of Victoria has created an arena for our practice to be critiqued, reflected upon, and further challenges us to translate our practice into policy development.

From Specialized Services to Multi-Sectorial/Multi-Disciplined

Redefining child and family services from a protective focus to that of a child, family, and community development focus will require a fundamental shift in the field's leadership from an expert-dependent relationship to collaborative agency-client-community relationship. This is a movement away from concern with maximizing budgets and damage control towards a collaborative relationship and the divestment of control over resources. In Awasis this has occurred through moving resources and positions from central office to local communities. Centrally, the staff function as collaborators with local staff to develop what would be appropriate within local communities.

From Therapeutic to Learning

Traditional social work practice focused on dysfunctions that required therapeutic interventions. Individual family members were labelled, and often one or more removed from the family setting or community. Removing the individual or family implicitly suggested that fault/dysfunction lies within.

Today, it is generally assumed that all families require support and assistance in balancing and carrying out their many roles as caregivers, educators, partners, mentors etc. No family can be viewed to have "failed" if problems arise. Life is a continuous process of change, learning, adapting, and growing. Within the environment in which we live there are risks, opportunities and constraints on development which occur at individual and systematic levels. Shifting to learning strategies (versus therapy strategies) with the family ensures that further undermining or eroding of self confidence is minimized. Awasis believes that one's contexts (personal, family, community, political, social, historical, environmental) within which experience occurs and is understood, becomes the content for learning. Understanding the constraints and opportunities offered by one's context leads to contextual change. By adopting a learning perspective to intervention, we believe that the likelihood of developing a blaming stance towards the system is minimized, as families and individual members are able to reflect upon their role in maintaining their present context. Learning needs to be holistic in that it needs to address emotional, social, cognitive, physical, and spiritual aspects, as experience, from which learning grows, intimately touches all aspects of ourselves.

A program from this perspective is not something one "does" to a family. Rather, it

respects the family's strengths and the family's integrity, and fosters a sense of competence to grow and develop as individuals, as a family unit, and as community members. By adopting a learning perspective to intervention each family has the capability to address their own issues, given support and an opportunity to learn. In other words families are able to come up with their own family strategies and design their own path of development, without having to adopt externally imposed "prescriptive treatment".

System Accountability to Consumer Accountability

According to Thomas, (1994) the bureaucratic system is designed to avoid service accountability by keeping the public out or mystified (monopoly) by defining problems as so severe and complex that only those highly skilled in problem detection, analysis and resolution (based on credentials) are warranted to collect payment for performing activities. He further suggests that the continuum of care approach increases specialization thereby perpetuating the belief in higher demand than supply and removes emphasis from being accountable.

- Issues of accountability are entirely projected outward from the care continuum to the public in the form of public responsibility for providing more resources to fill professionally identified service gaps. (p.60)

Once you shift from providing service to a client to providing service to a consumer, one's whole operating orientation changes. This demands shared authority, shared responsibility and shared accountability. Once you adopt a community-based service delivery model which is grounded in authentic participatory development practices, one's thinking around accountability also begins to change. Collaborative development involves shared accountability and shared ownership. Accountability in this type of environment doesn't

emphasize compliance, rather it emphasizes partnership and commitment. Accountability priorities shift from being exclusively accountable to the funders and policy makers, to also being held accountable to the people we are mandated to provide service to. It involves personal and organizational integrity. It involves being accountable for what you achieve, not only for what you provide. Unquestionably the importance of accountability in practice is extremely important. Where models of practice differ, is in answering the question, "Accountable for what and to whom?". First Nation models of practice demand that we look to differing indicators and sources for decision-making. It involves understanding the connection between ownership and accountability. It doesn't view "child welfare cases" as static, concrete "things", rather as social relationships that occur within community. We think it involves adopting a qualitative approach to "understanding the story" and this requires careful listening as collaborative planning and intervention evolves.

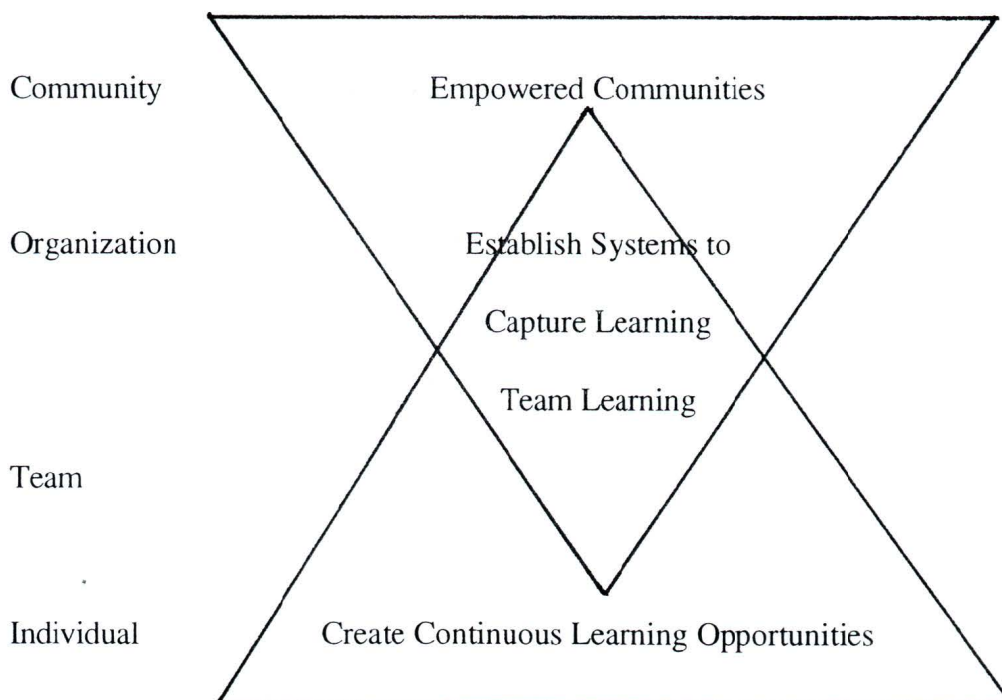
CHAPTER 5

Awasis Agency of Northern Manitoba

Four Levels of Development

In trying to capture the paradigm shift that Awasis Agency has been experiencing over the past 5 years, and continues to experience, the following model was conceptualized as a way to highlight the four levels or components of the agency: the individual, the team, the organization, and the community, in which development is occurring. Each level bears an interactional relationship, but will be discussed individually in order to focus on the more salient aspects of the overall change process. (see figure 2)

Figure 2: Four components of Awasis Agency



Each level is guided by an overall objective. These objectives, as well as, a review of the development undertaken within each level will be addressed below, followed by a brief description of the data collected by the Agency on the objective progress indicators.

Individual Level

1. Objective. To increase personal mastery levels in staff.

2. Change strategies. We believe that one begins with personal mastery. Both Senge (1990) and Covey (1992) agree that this cannot be ignored within organizations, or for that matter within any type of relationship. We also understand that there is nothing more important to the individual committed to his or her development than a supportive environment. This collaborative commitment to personal mastery has taken different forms.

a) Annual Conference. Each year the agency provides an opportunity for all of its employees as well as community representatives to attend an agency conference. The purpose of the conference is to support the coming together of Awasis staff to work as peers on an evolving personal and shared vision for Awasis. The development of the conference is a collaborative effort of the entire staff and the annual conference becomes a learning community where ideas, practice, and key initiatives are shared and discussed. The conference is also designed to affect the whole person intellectually, spiritually, emotionally, and physically. To date the agency has delivered four conferences:

- * 1993 annual conference “The Spirit of Helping Each Other”.
- * 1994 annual conference “Own Vision, Own Family, Own Future”.
- * 1995 annual conference “Freedom to Change”.

- * 1996 annual conference “Shared Vision, Leadership, Partnership”.

The specific process objectives which are just as important as the content within these conferences have included:

- * To understand personal health and become healthier.
- * Enhanced sense of enrollment and commitment to personal shared visions.
- * Be empowered to change through personal mastery.
- * Increased level of responsibility toward self and agency.
- * Greater understanding of the “learning organization”.
- * Greater acceptance and excitement about change and tolerance of ambiguity.
- * More supportive of self and others.
- * To think of self as leader and master leadership skills.

The annual conferences are developed and designed to be delivered generatively. The objective is to create a learning community, where the learning is not about receiving information but rather a process of reflecting on the ideas that are brought forward by the conference facilitators, as well as, the experiences of the participants.

The facilitators are strategically selected from the local staff pool on an annual basis to engage in a training program throughout the year to prepare themselves for the conference. The first two conferences were facilitated by the senior management group and the next two were facilitated by the agency’s team of local unit supervisors. In order to ensure the success of the conference, many had to deal with their personal issues such as alcoholism, parenting, how to confront others without being a bully, incorrect attitudes about gender(s), to mention

a few. For facilitators to be good role models, they needed to examine their own lives and engage in personal mastery. It was through their leadership at conferences that others followed.

b) Masters Program. In 1994 Awasis negotiated a Masters program by special arrangement through the University of Victoria, Victoria, British Columbia. The rationale for the creation of this program was based on valuing integrating learning with practice (praxis) and the principles of action research. The vision of Awasis involved the development of a cooperative Masters Program which would be uniquely tailored to address three separate levels of development: (a) the individual (b) the organization, and (c) the community.

The learning focus for individual development is on meeting the academic and practice needs of First Nation Child and Family Services practitioners of Northern Manitoba. We believe in developing critically reflective practitioners who are able to reflect on, collaborate with, and respond to their ever changing environments, rather than automatically respond with an “expert’s” recipe.

Organizational and community development is focused on by enhancing the development of a “learning organization” or learning community which nurtures and empowers its members to become effective critical thinkers. Both organizational and community development emphasize assisting the First Nation community in addressing its endemic social problems which permeate these communities taking their toll on personal health and well being.

While other educational institutions have attempted to offer educational opportunities

at a Masters level in Northern Manitoba, these programs have proven ineffective on numerous accounts. Courses offered were “few and far between” and did not bridge the gap between learning and practice. In order to complete the program, students had to relocate to Winnipeg, perpetuating the continual problem of not having skilled social workers staying in Northern Manitoba communities. In addition, traditional education and training opportunities in child and family services are often embedded within a behavioristic paradigm which focuses on performance (skill training) and identifying the objective solution through a linear rational step-by-step process. While this approach may be effective in environments where variables can be isolated and remain relatively constant and predictable, servicing First Nation communities is thwart with complex, multi-dimensional problems which defy easy, simple interventions and solutions.

We believe that the academic opportunities offered within a program that is premised in practice and reflection offers an intensely valuable educational experience that cannot be duplicated in traditional academic environments. Furthermore, through the development of a cooperative distance delivery program, a larger number of Awasis employees were able to take advantage of the opportunity at less cost than relocating.

Currently, 13 employees are engaged in the program and have completed the course work requirements.

c) Leadership Training. We believe that the ideas of personal mastery encompass more than personal development and learning needs. Individuals with a high degree of personal mastery

are more committed, more innovative, have a deeper and broader sense of responsibility to their work, and learn faster. Individuals who possess a strong sense of personal mastery are full of energy and enthusiasm, and they persevere, even in the face of frustration and setbacks (Senge, 1990). By engaging in a personal mastery process we incidentally model the essence of effective leadership and personal mastery. The fundamental difference between personal development and personal mastery is the key role that personal vision and purpose plays in personal mastery. In other personal development approaches which focus on skill deficits and learning needs, vision, purpose and leadership are not inherent to the learning process and therefore are not inherent in the leadership process.

Awasis spends a great deal of energy and resources developing its staff, approximately \$2,500.00 per employee is spent on an annual basis. Over the past five years teams of agency personnel have come together for leadership training on numerous occasions. The idea of personal mastery is at the core of every leadership training and learning exercise and individuals are pushed to address their needs for personal change.

3. Indicators. Senge, 1990 describes personal mastery as the discipline of continually clarifying what's really important, as well as, continually learning how to see current reality more clearly. A shift from being "reactive" (the world is happening to me), to "creative" (creating one's own future). This is accomplished through the application of a series of practices such as developing a more systemic world view, learning how to reflect on tacit assumptions, expressing one's vision and listening to others' vision, and joint inquiry into different people's views of current reality. Finally, personal mastery teaches people to choose

the results and actions which they will make in pursuit of their vision. Based on this description of what personal mastery looks like in practice, the following evidence is presented as evidence of the personal mastery growth within Awasis Agency over the past five years.

The organizational culture of Awasis Agency over the past five years has been transformed from one of reactivity and blaming to one of creativity, collaboration, and leadership. This process of change involved many initiatives occurring throughout the organization demanding a high level of personal mastery. For instance:

- * Full enrolment of eligible staff in the Masters program by special arrangement as well as a 100% completion rate of course work to date.
- * The development of participatory action research projects by Masters students which will contribute to the generation of knowledge for First Nation social services and communities.
- * Full local staff enrolment (125) in the two year on-site Early Childhood education program.
- * The successful decentralization of the organization from a system of centralized decision making, to one that empowers local communities to take initiative and innovation.
- * Local units are staffed with local people that are willing to assume greater responsibility.
- * The local supervisors facilitating the learning process at the agency's annual conference.
- * The success of program resource centres being staffed by coordinators who provide leadership through collaborative consultation in their respective centres.

Team Level

1. Objective. For research and development activities to occur within the context of team learning.

2. Change Strategies. One of the first shifts was from focusing on individuals to teams. This entailed moving from a system of centralized decision making, to one that encouraged initiative and innovation from individuals and units that are willing to assume more responsibility.

Consequently, steps taken to transform Awasis Agency into a learning organization involved the development of six program and resource centres which operate as teams: (a) Services to Families, (b) Child and Family Services, (c) Resource Services, (d) Foster Care, (e) Permanency Planning, and (f) Child Protection. The centres provide the structured guidance to support continuous learning within the organization and resource the decentralization of services to the local communities. Each program and resource centre is staffed with a coordinator who in collaboration with others undertakes research and development projects aimed at enhancing and reconfiguring service delivery.

a) In-Home Family Support Services. Prior to 1992, family support services funding was under central control within the Agency. Awasis recognized however, that the key to unleashing the organization's potential to excel is to put the power in the hands of the local communities. As a result, family support services funding was distributed to each community on a per capita basis. What we experienced as a result of the localization of funds was a radical shift in spending from traditional "band-aid" services, such as homemakers, to very

unique community health prevention and promotion initiatives such as:

i) Shamattawa Theatre Project. For the past two years, a theatre training program has been offered in Shamattawa. While the development of a youth drama group was initially targeted at solvent abusers who were not responding to traditional treatment programs at a cost of \$250.00 per day, it was expanded to include adults as well as other children who expressed an interest in participating in the program. Using drama therapy techniques, the initiative has been credited for increasing the self esteem and positive self expression of participating youth, and has also served as a forum for sharing personal and community issues that are impacting the lives of participants. All of the youth engaged in the group have refrained from using solvents. The cost of the program amounts to just a few cents per day for each child taking part in the program.

ii) Cross Lake Summer Activity Program. The purpose of the program is to engage children in various summer activities such as sporting events and arts and crafts to reduce the number of delinquent activities.

iii) Nelson House Survival Camp. The community of Nelson House carried out a survival camp for adolescent girls to address cultural identity issues. Specific program objectives focused on recapturing a sense of the traditional values and teachings through hunting and preparation of wild meat. The elders were prominent in daily activities and told stories in the evenings.

b) Child and Family Development Educational Videos. The Services to Families program centre has been involved in producing First Nation Child and Family Development

educational materials for the past three years. To date we have produced six educational videos and accompanying facilitator guides. These materials are part of a Child and Family Development Series developed for First Nation families.

Each video was produced using First Nation families and professionals as participants and commentators. The videos were filmed on-site within our communities, incorporating elders and Chiefs from the host community. Upon completion, the materials were translated into four languages: Oji-cree, Cree, Dene, and English to correspond with the communities the Awasis Agency serves.

c) First Nation Parenting Program. In addition, a series of First Nation Parenting books have been developed over the past two years. The philosophy of the program is that parents sometimes require "new learning" to cope with ever changing demands of parenthood. The information being provided helps to update parents on current theories and suggestions regarding child development and parent/child relationship.

The video and parenting initiatives are truly reflective of our approach to development. Both initiatives were undertaken by agency staff teams as opposed to hiring external video experts. Both initiatives followed a process of inquiry in which agency staff as well as members of the community participated collectively in a learning and development process.

It has been our experience that the videos and parenting books are much more effective than the traditional educational materials produced by the federal and provincial governments. In contrast to traditional educational materials, which most often are

transported to communities from the outside, the Awasis videos and parenting books were created from knowledge derived from the communities, spoken in the words of the people, and encouraged discussion as opposed to being presented as expert advice.

d) Newborn Baby Packages. To complement the video series and parenting books a newborn baby program has been developed which distributes an informational package to parents upon the birth of their children. The packages contain information on how to care for children, a growth chart, a baby hat and t-shirt, as well as, other small gifts for the parents. The purpose of the program is to inform parents that we are essentially a family support service and are focusing on their health and successes and not just their problems.

e) Community Initiatives. In addition to the local family support services funds, Awasis Agency on a regional level provides for several annual events to promote health and wellness.

f) Hockey Clinic. The annual hockey clinic for boys and girls ages 11 to 13 is designed to increase positive relationships between communities; to promote interaction amongst our youth who will eventually assume leadership roles; and to promote a positive life style for our youth. Many of the youth attending the clinic are selected on the basis that they are at "risk" of being apprehended. Although no specific statistics are available, verbal reports from the communities suggest that the clinic has a very powerful deterrent effect on these youth with respect to their decisions to avoid self destructive activities.

g) Policy and Program Development. The program and resource centres are emphasizing program and policy initiatives which are moving Awasis Agency from a

protection focus towards that of facilitating the health of our communities. Agency defined and controlled policy, research and program developments include:

i) The Child Care Visions Initiative. A two year post secondary Child & Youth Care Aboriginal Program delivered in 18 First Nation Communities. This initiative builds on the relationship that exists between Manitoba Keewatinowi Okimakanak, Inc., Awasis Agency of Northern Manitoba, and the University of Victoria, which developed from the negotiation and delivery of a Masters Degree Program by special arrangement. It offers First Nation students access to post secondary education without having to leave their communities. Approximately 300 students are currently enrolled in the program.

The purpose of the program is to provide early childhood education training to meet the needs of developing day care centres; to promote post secondary education within Northern communities; and to enhance community learning and wellness.

ii) Employee Assistance Program. Awasis was recently faced with a situation that presented a challenge with respect to existing labour practices, employer/employee relations and public opinion. An employee of the agency was accused of sexually assaulting a family member. There was not enough evidence to warrant a formal charge. However, he disclosed to the Executive Director on the basis that he would receive support. After a short period of incarceration, this employee was reinstated, subject to an intensive supervision treatment program. It is believed that this individual will make a positive contribution toward community acceptance of self discipline.

This incident demonstrates the need to create policy that is not strictly rule-based.

The Agency's response was guided by a value choice decision making policy framework which demanded critical thinking, alternative choice making strategies and agency ownership.

iii) Community Based Supports for Families of Children with Technology Dependence. Historically, First Nation children have been displaced within Manitoba's Child and Family Services system in order to receive medical attention. In the past, children with special needs have been forced into care and into high priced foster care homes outside of their communities. As a result the resource services program and resource centre was established to develop community base services for these children with special needs.

One of the initiatives undertaken by the resource services program centre is an in-home support program for children with a technology dependence. This program represents an eighteen month pilot project undertaken by Awasis Agency to provide services to technology dependent children. The purpose of this program is to assist families and other communities-based child care providers to provide safe and consistent care to children who have a long term medical technology dependency and who are repatriated back to the community. It is the first example of the provincial government opting to break away from its policy of not spending dollars on-reserve land(inter-sectorial). Awasis argued for years that front end support services would result in significant savings and that jurisdictional debates over who is responsible for servicing special needs children only serves to drive up cost as highlighted in Table 1.

Table 1**Benchmarks comparison of in care and at home cost for 13 special needs children****Total cost for 13 special needs children in care.....\$377,020.79 per annum****Average cost per child.....\$29,001.60 per annum****Cost per child.....\$79.40 per diem****Total cost for 13 special needs children at home.....\$172,385.85 per annum****Average cost per child.....\$13,260.45 per annum****Cost per child.....\$36.33 per diem**

iv) Caring for Children with Special Needs Training Program. The objective of this program is to offer special needs certification training to families in our communities as a means of creating a resource base to assist families with special needs children. Each community has been asked to identify one family that would be interested in the training. These families will be flown to Thompson on a quarterly basis. A total of 6 weeks of training will be provided over a period of 1 1/2 years.

v) Community Healing Initiative. Many initiatives have been undertaken by the child protection program and resource centre for the purpose of developing new perspectives and practices intended to contribute to the improving health of our communities. The “Community Healing Program” is an attempt to guide communities through a “sustainable community development” process that will result in a change in the communities' ability to

respond to child protection matters. The intervention process involves four components:

- a) therapeutic counselling for victims and offenders on a one to one basis, support/ peer groups and sharing circles;
- b) education and prevention workshops to be conducted by the intervention team of which one of the members is a past offender;
- c) community development approach which consults the community and helps the community create a vision of a healthy community; and
- d) following the visioning process, community leaders engaging in a planning process in which they identify their needs, goals, plan of action , and evaluation strategies. It is important to understand the role that is played by the larger community in the cycle of abuse in Northern Manitoba communities. There are underlying values and beliefs that maintain and perpetuate the cycle of abuse:

the self is never separate from the whole;

the community is family or the family is community; and

the identification with community is self identity.

Unlike the traditional case work approach which is primarily concerned with teaching workers the skills to get children to disclose abuse, the Community Healing model addresses the systemic barriers that keep communities from speaking about the problem which in turn will lead to the community taking critical action.

A team of three workers including the agency employee who committed a sexual assault are currently in training and will travel to two communities starting in January, 1997.

vi) Community Based Training in Understanding Child Abuse and Neglect. The philosophy for this training series is to create empowerment in the community. It is an opportunity for community members to take charge of their own problem solving approaches

and processes. The main objective of the training is to provide the communities with the tools for their own positive growth and development.

3. Indicators. The impact of development of the six program centres has resulted in the following:

- * Increased community support for services;
- * Improved sense of local control;
- * A heightened responsiveness to local issues;
- * Greater flexibility and effective integration of services; and
- * Increased responsiveness to opportunities.

Organization Level

1. Objective. To create a work environment and organizational structure that would promote continuous individual learning regardless of position and treat every employee as a professional who knows and understands some discipline and, therefore given professional opportunities.

2. Change strategies. Awasis Agency was not seen as a good place for employment. The poor working conditions experienced by agency employees added to the existing stress of child protection work:

- * Signature authority highly centralized;
- * Unnecessary approval steps;
- * Highly structured & routine work;
- * No flexibility;

- * Policy driven; and
- * Top down pressure.

In order for transformational change to occur within Awasis Agency, changes in how we think about human resources was required. While traditional bureaucratic organizations have clearly defined jobs, they are separated and orchestrated into a series of hierarchies, and work activities that are highly controlled by a rigid set of rules and standards. By contrast, the foundation of the learning organization is enhanced capacity for continuous learning. As a result, the first step was to think about employees as people, practitioners, and finally as specific roles within the organization, in that order.

a) Revised job description and personnel policies. Efforts to redesign work and the work environment began by acknowledging the need to share power and decision making. This entailed the development of job descriptions that encouraged initiative and innovation from individuals and encourages individuals to assume greater responsibility. Further, the agency's personnel policies were revised to reflect agency wide cultural values such as trust, collaboration, continuous learning, and a set of individual values, including responsibility, honesty, rather than a rigid set of rules and regulations.

b) Decentralizing of Services. The agency's structure was also redesigned to decentralize authority; to encourage individual and team relationships; to promote a model of participatory management; and to support the changing nature of work from worker to leader. Agency offices were constructed in each community that Awasis provides service to as a way of engaging communities in the ownership, development, accountability and shared

vision of creating healthy families and healthy communities. Local workers were hired for such roles as foster care worker, child and family services worker, services to families worker, program coordinators, operation managers, and a full team of clerical support staff. As a result of decentralizing services, community ownership and accountability, along with overall family and community health has increased.

c) Development of Program Centres. The agency's structure was also redesigned to decentralize authority; to encourage individual and team relationships; to promote a model of participatory management; and to support the changing nature of work from worker to leader. This led to the development of six program centres to fuel the development process. It also led to the reframing of the relationship between management and staff from an adversarial one to one that is more collaborative. The centres provide the structured guidance to support continuous learning within the organization and resource the decentralization of services to the local communities.

3. Indicators. Employees are no longer as territorial or threatened by change. By treating every employee as a professional, placing them in project teams, and building functional links throughout the organization, resistance to change which exists in most bureaucratic organizations is minimal in Awasis Agency. Employees are constantly asked to undertake new roles and responsibilities from facilitating training to policy development to developing videos. No project or activity within the organization is pursued independently; all are developed through teams.

Community Level

1. Objective. Empower communities to take ownership and responsibility toward supporting the development of healthy children and families.

2. Change Strategies. a) Decentralization. The opening of offices in each community and the hiring of 150 local workers was a major step towards moving from a highly centralized structure to a community driven operation. Community involvement, community visioning, and community partnership have all furthered overall goals toward community health. Child Development Centres, a Child/ Youth/ Family Learning Centre, and a Community Wellness Centre have been developed in specific communities as a result of growing community partnerships. Transformation of Awasis Agency from a highly centralized structure to a community driven operation was supported by the following:

b) Community Magistrates. In 1994, the child and family services program and resource centre began work on a First Nation Magistrate and Family Mediation Model to develop a better approach with respect to resolving disputes that are common between agency staff and community family members. Our aim is to restore a more First Nation traditional approach to child and family services conflict resolution which will be congruent with values of restoration, harmony, and accountability to community. It is believed that this new process will actually prevent or at least reduce the numbers of children and their families from entering the legal system and will be more effective in redressing problems.

In the development of this project the following steps have been taken:

* a literature review was completed and compiled to use as reference material;

- * an advisory committee of Elders, Chiefs, and technicians was developed to oversee the project;
- * an on-site visit to New Zealand and New Mexico was undertaken to observe similar systems in operation;
- * the findings of the learning process are currently being written-up in the form of a book in an attempt to fully inform the people of our communities;
- * a consultation process is underway to discuss the ideas presented in the book; and negotiations are underway to secure funding for the potential implementation of a new model.

c) Early Childhood Education Program. As an approach to addressing child care service needs in our communities, Awasis Agency entered into a partnership with its political organization and the University of Victoria to provide education in this area. A two year educational program was designed to promote First Nations leadership in the health and well-being in children and families. The program is based on the Learning Community Model for Child and Youth Care Aboriginal Courses, and uses generative curriculum approaches.

The Learning Community Model incorporates the thinking of the five disciplines for the learning organizations (Senge, 1994): (a) Shared Vision; (b) System Thinking; (c) Team; (d) Learning; and (e) Personal Mastery.

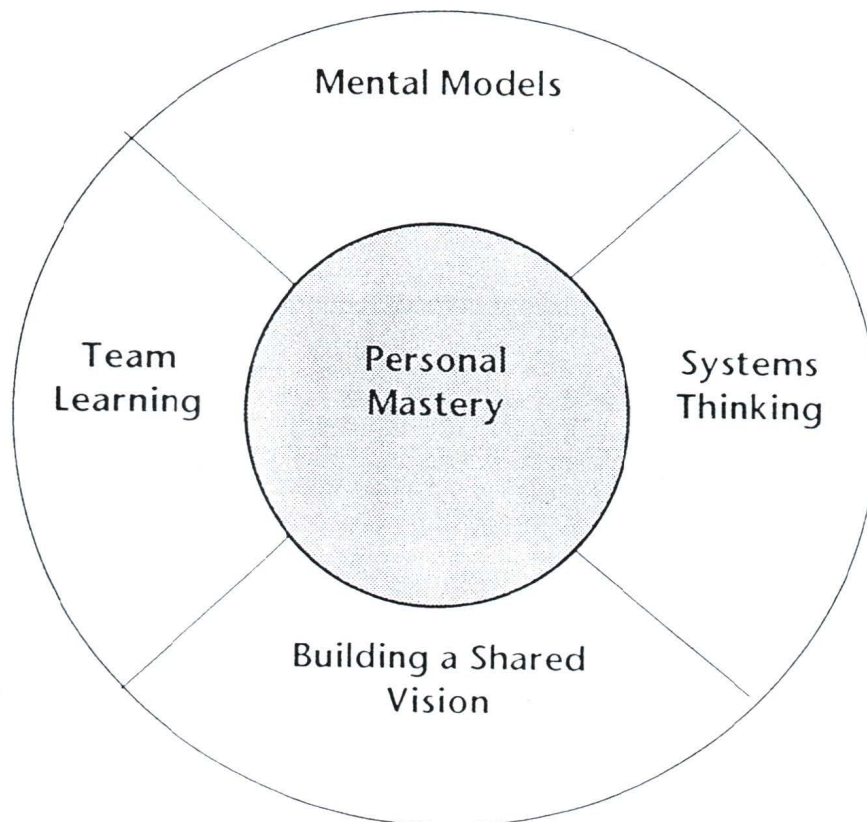
The program incorporates the above five ideas, and is designed to:

- * Realize a shared vision of community leaders in Northern Manitoba;
- * Realize a shared vision of trained First Nation workers in child care centres in First Nation communities in Northern Manitoba;
- * Use a community learning education strategy to create systems change as defined by the First Nations communities;

- * Create a community learning Team that promotes “The success of one as the success of all”; and
- * Promote personal learning and mastery so that individuals can recreate their mental models or ideas about who they and the community can become.

The following Learning Community Model was developed by Wallace Chartrand, an employee of the Awasis Agency. It demonstrates the applicability of the learning organization framework to not only organizational change but also community change.

Figure 3: Learning Community Model



d) The Awasis Training Institute. The Awasis Training Institute was developed in 1993 to promote health and wellness in First Nation communities of Northern Manitoba as part of the agency's vision to promote continuous learning. The following benefits were perceived:

- * Training that originates from an aboriginal northern perspective will better meet the needs of Awasis staff. This will further aid in the organizational development strategies taking place in Awasis;
- * Training is designed to incorporate an experiential, on-the job component thereby increasing the transfer of learning in job-related competency related areas. Increased competency leads to increased empowerment;
- * A local training institute is of great assistance to Awasis in defining and retaining control of the agency's future;
- * The existence of a northern training institute aids in the development of a positive attitude towards lifelong learning;
- * A training institute aids in economic development of Northern Manitoba by creating economic, personal and professional opportunities for ongoing growth; and
- * With the creation of each additional organization/institution that is regulated and controlled by First Nation people, a further step is taken towards reducing reliance on the larger outside systems and the establishment of First Nation self-government.

3. Indicators. The development of local Awasis Centres:

- * Cross Lake First Nation, Awasis Centre completed 1992
- * Norway House First Nation, Awasis Centre completed 1992
- * Nelson House First Nation, Awasis Centre completed 1992
- * Shamattawa First Nation, Awasis Centre completed 1993
- * Garden Hill First Nation, Awasis Centre completed 1993

- * God's Lake First Nation, Awasis Centre completed 1994
- * Sayisi Dene First Nation, Awasis Centre completed 1994
- * St. Theresa Point First Nation, Awasis Centre completed 1994
- * Northlands First Nation, Awasis Centre completed 1994
- * Split Lake First Nation, Awasis Centre completed 1995
- * Fox Lake First Nation, Awasis Centre completed 1995
- * Oxford House First Nation, Awasis Centre completed September 1995
- * War Lake First Nation, Developmental funding provided 1994
- * Wasagamach First Nation, Awasis Centre completed September 1995
- * Red Sucker Lake First Nation, Materials delivered 1995, construction targeted completion date, September 1995
- * God's River First Nation, Materials purchased and delivered via Winter Road, February 1996, completion date targeted for September 1996
- * York Factory First Nation, funds set aside for 1996 construction

The hiring/employment of eighty (80) local Awasis Workers:

Cross Lake	Legal Secretary	1993
	Receptionist	1993
	Clerk Typist	1993
	Intake/Stats	1993
	Payroll/Finance Clerk	1994

Norway House	Legal Secretary	1993
	Receptionist	1993
	Clerk Typist	1993
	Intake/Stats	1993
	Payroll/Finance Clerk	1994

Nelson House	Legal Secretary	1993
	Receptionist	1993
	Clerk Typist	1993
	Intake/Stats	1993
	Payroll/Finance Clerk	1994
Garden Hill	Legal Secretary	1993
	Receptionist	1993
	Clerk Typist	1993
	Intake/Stats	1993
	Payroll/Finance Clerk	1993
	Receptionist	1994
	Clerk Typist	1994
	Intake/Stats	1994
St. Theresa Pt.	Receptionist	1994
Wasagamach	Receptionist	1994
Red Sucker	Receptionist	1994
Shamattawa	Receptionist	1994
Oxford House	Receptionist	1996
Gods Lake	Receptionist	1996
	Legal Secretary	1996
	Intake/Clerk Typist	1996

Table 2: Decentralization of foster care program

Prior to Development of Foster Care Program Centre				Foster Care Program Centre 1995/96 F. Y. Operations Budget			
Thompson Budget Allocation	# of Workers	Local Budget Allocation	# of Local Workers	Thompson Budget Allocation	# of Workers	Local Budget Allocation	# of Local Workers
180,000 Salaries Benefits & Travel	(4) Regional Position	0	0	40,000 Salaries Benefits Travel	(1) 1 - Program Coordinator	500,000 Salaries Benefits & Travel	(18) Local Positions 3 Local Coord.

Table 3: Decentralization of services to families program

Prior to Development of Services to Families Program Centre				Services to Families Program Centre 1994/95 F. Y. Operations Budget			
Thompson Budget Allocation	# of Thompson Workers	Local Budget Allocation	# of Local Workers	Thompson Budget Allocation	# of Workers	Local Budget Allocation	# of Local Workers
0	0	0	0	40,000	1 - Program Coordinator	600,000	(18) Local Services to Families Workers (3) Local Program Coordi- nators

The development of a family learning centre:

- * A 6,500 sq. ft. learning centre to resource local Awasis programs in their attempt to meet the needs of their communities.

Other Evidence of Change

Awasis Agency is faced with constant changes in its client populations, social and political environments, and the demands of the public, courts, governments, and others. These large number of external factors which can potentially affect the impact of the overall program, make it difficult, if not impossible to establish causal links. However, the following tables are presented to highlight the progress that Awasis Agency has made toward its strategic vision. These measurable indicators or benchmarks are based on:

- * Deviations from trend lines.
- * Provincial norms or averages.
- * Regional baseline data.
- * Comparison measures standardized for a given population.

The data in table 4 shows that in 1991-92 there was an average of 472 children in care and 80 families receiving support services. These figures changed dramatically in March 1996, the number of children in care dropped to 221 and the number of families receiving support services increased to 707. Over a period of five years there was a 114% reduction of children in care and a 785% increase in family support services.

Table 4

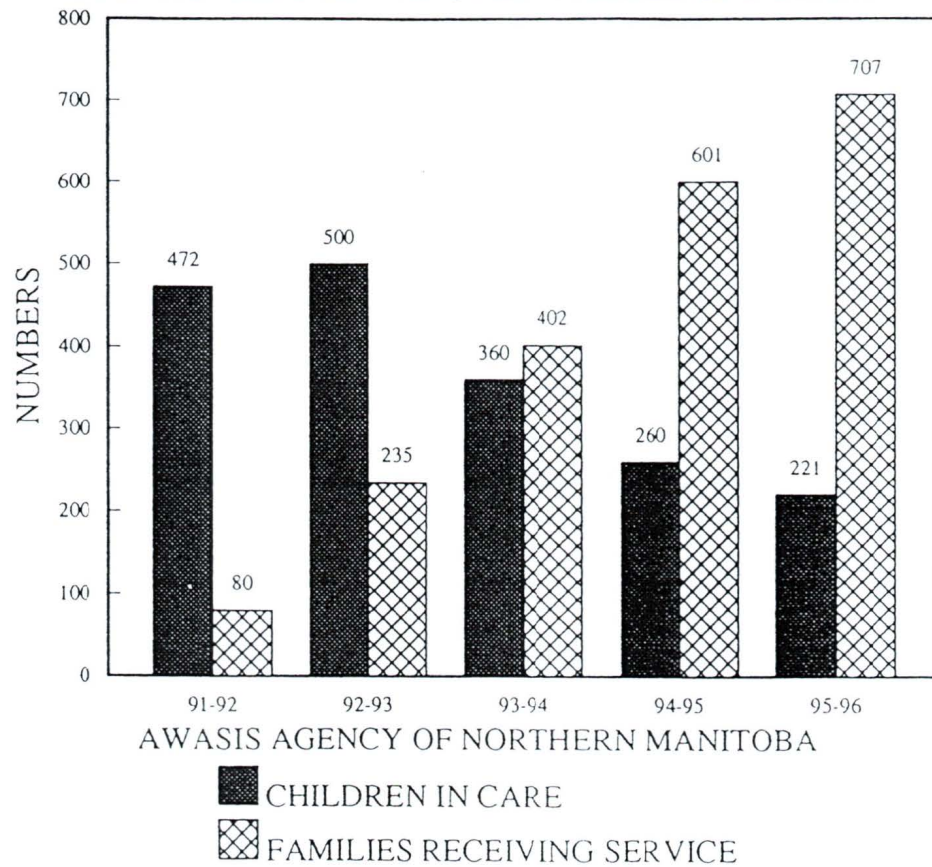
BENCHMARKS NUMBER OF CHILDREN IN CARE
AND FAMILIES SERVED OVER A PERIOD OF 5 YEARS

Table 5 demonstrates the rate of children in care per 1,000 population for fiscal year 1994-95 which provides a regional context to compare the percentage of children in care on a per capita basis.

Table 5

BENCHMARKS CHILDREN IN CARE
 RATE IN CARE PER 1,000 POPULATION 94-95

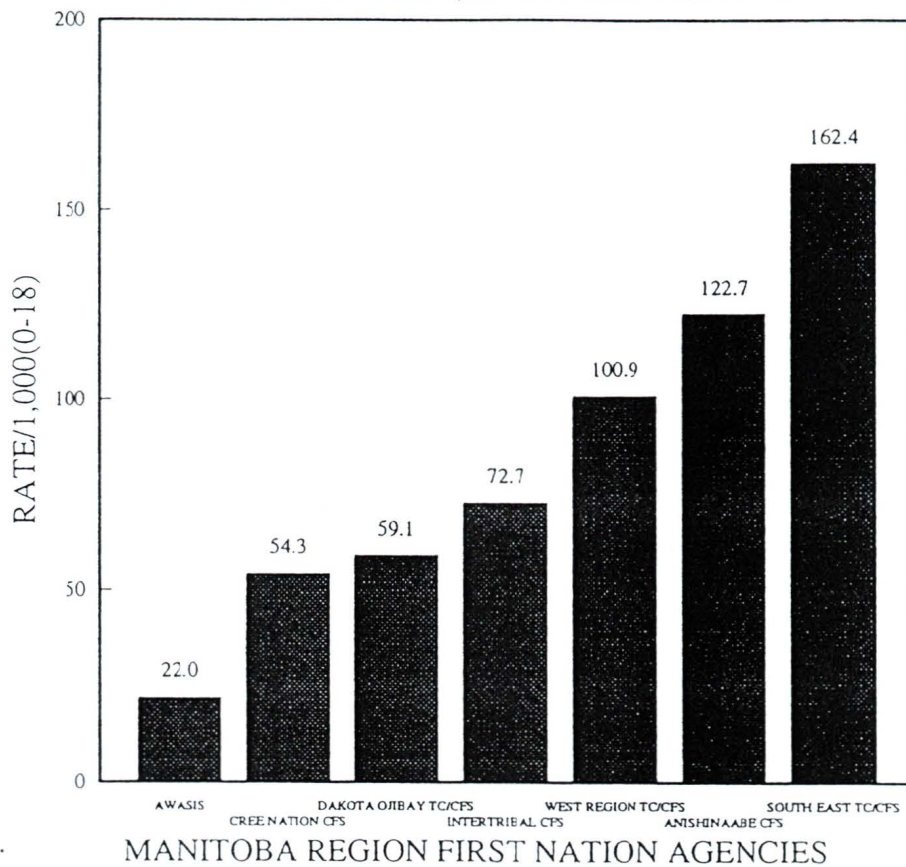


Table 6 shows a reduction of 4.3 million in maintenance cost from 1991-92 to 1995-96 (from \$7 million to \$2.7 million) and an actual savings of \$12.8 million over the five year period.

Table 6

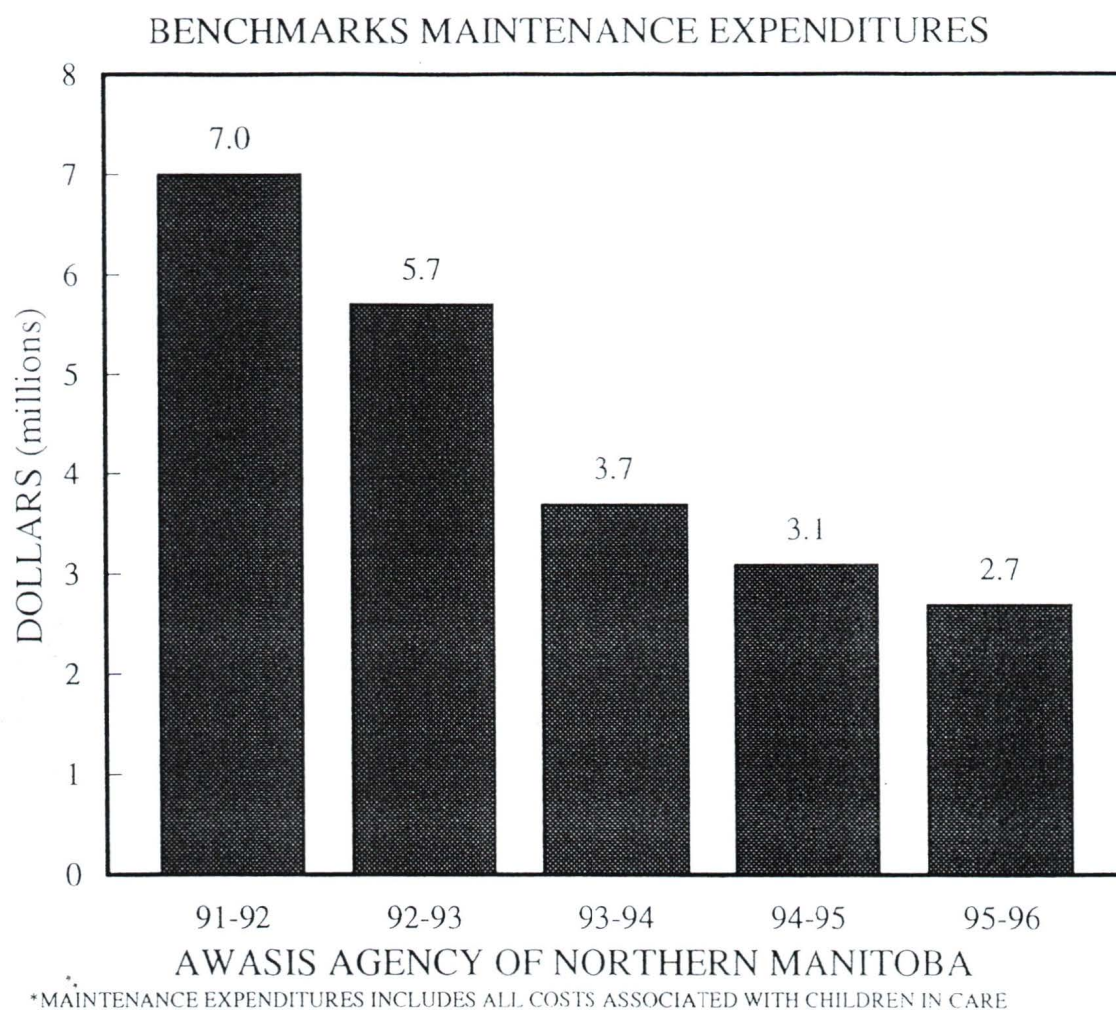
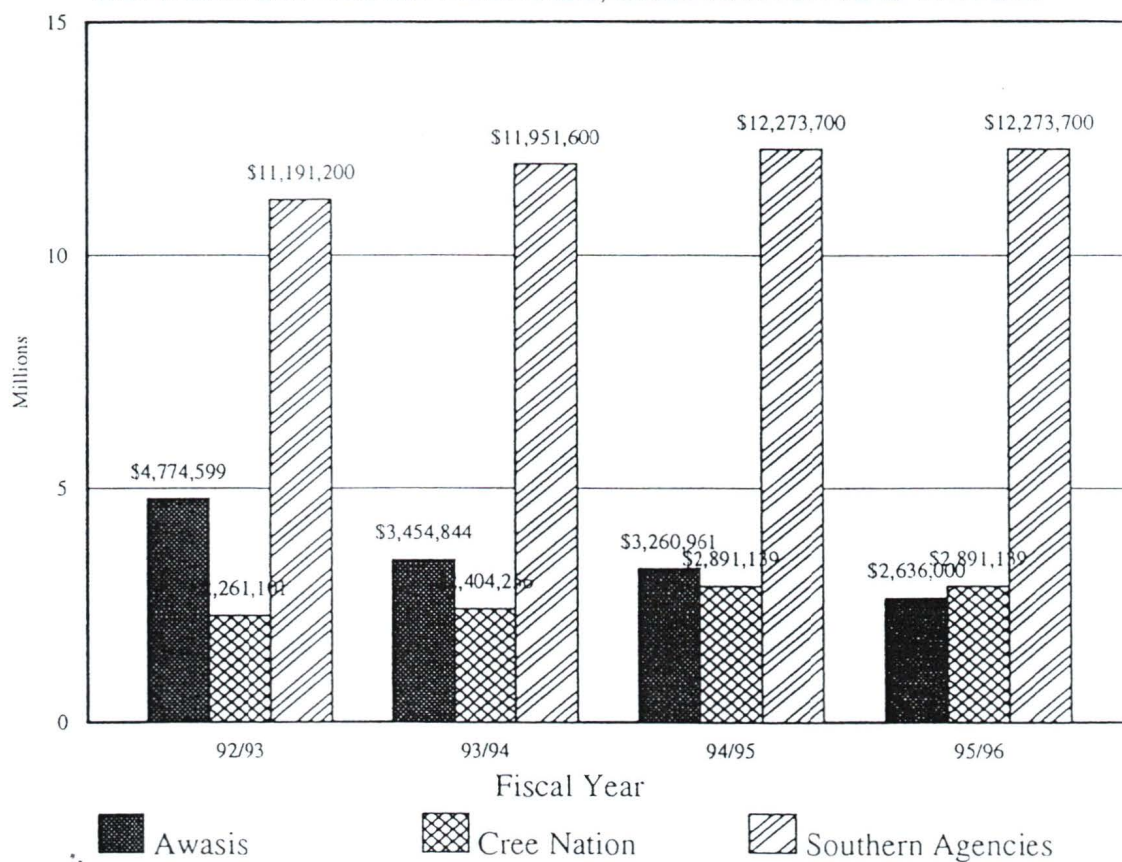


Table 7 highlights maintenance expenditures on a per population basis for Awasis Agency, Cree Nation and the Southern First Nation Agencies for fiscal years, 1992-93; 1993-94; 1994-95; and 1995-96.

Table 7

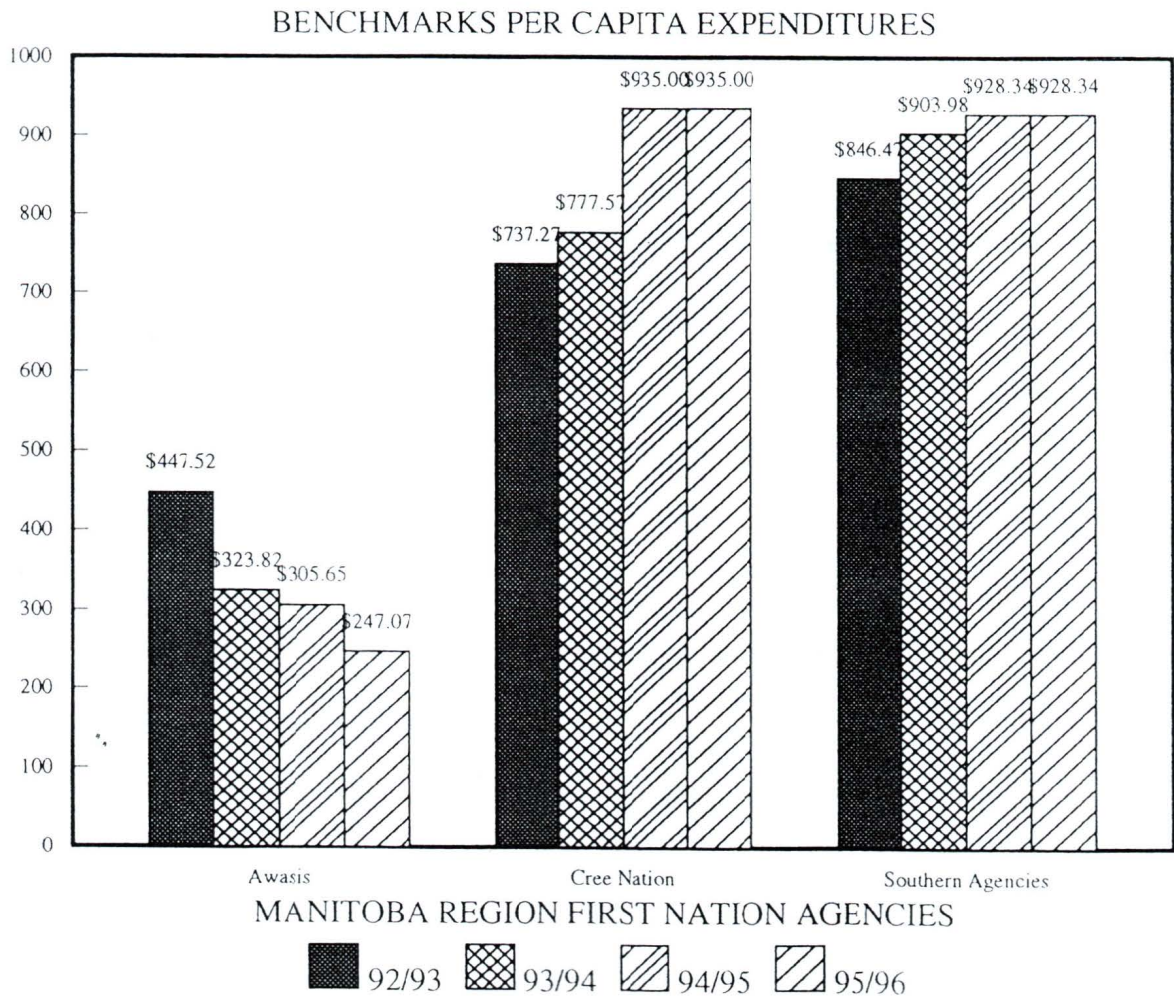
BENCHMARKS EXPENDITURES COMPARISON BETWEEN SOUTHERN AGENCIES, CREE NATION AND AWASIS



The total on-reserve population according to INAC's 1991 LRT figures is 26,982 of which Awasis Agency represents 10,669, Cree Nation 3,092, and the remaining First Nation Agencies 13221. Table 8 highlights per capita expenditures for the First Nation Agencies within the Manitoba Region.

In 1995-96, \$2.7 million was spent on maintenance resulting in a per capita cost of \$250.00 per child per year . This is a drop of \$400.00 per child per year.

Table 8



CHAPTER 6

Policy Implications

My goal in this thesis has been to provide some insight into the origins and operations of Child & Family Services, to illustrate how its bureaucratic structure and practice orientations fail to address the needs of children and communities, and to offer a creative alternative based on the actual experience of the Awasis Agency of Northern Manitoba.

There is a significant body of work that supports the need for the community to recover ownership for the issues of Child and Family Services. More importantly, it is simply time for more centralized bureaucratic child and family service structures to share the power. While the bureaucratic system has produced benefits, it has more significantly cut off and isolated the community from their issues of child protection.

Significant changes are required in overall vision and world view to move away from bureaucratic power structures. A key to this change process will involve the integration of policy development and the delivery of child and family services, and the removal of bureaucratic barriers that currently operate to maintain the top down decision making approach. Critical to removing these barriers is to have the issues and solutions developed by local community organizations and members. Only by doing this can the community be given the opportunity to consider their unique needs and design solutions for addressing them. From my experience, integrating policy and practice will require three major components: an empowering world view, a particular leadership orientation, and community-based practice model.

Empowering World View

One of the first changes that must take place is the way in which child and family service is viewed. The values and beliefs that underpin current practice determine the players, their roles, and the power inherent in that role. Therefore policy and practice will not likely be integrated in an organization which is guided by those values and beliefs inherent in a paternalistic structure that believes in perpetuating the tutelage of families and communities. A fundamental change in how individuals and families in need of services are viewed is required, as well as changing the roles and responsibilities in order to support the health and development of Canadians in a new way. Our goals of service must broaden from reducing symptoms to promoting the valuing of health and wellness. We must look beyond an “individual blaming stance” to the historical and contemporary contexts within which child and family matters arise and value the capacity and capability to change. We must believe in the capacities and capabilities of families and communities to identify and address their own unique needs, given the necessary space and support. And we must understand and come to terms with how our actions or inactions perpetuate unhealthy circumstances so that we can create new, bold and untried efforts to make a real difference.

Recommendation # 1

Develop a critical awareness regarding the values, beliefs, and assumptions that guide both personal and organizational behaviour. Understanding the values and beliefs that act as foundations for both personal and organizational behaviour provides insight into

personal and organizational goals, priorities, and approaches to service. Many innovative programs have failed because of inherent conflicts in the values and beliefs of those involved. Developing strategies that promote a critical awareness of underlying beliefs, values, and assumptions allow us to evaluate regularly whether what we are doing in practice fits with our overall vision.

Recommendation # 2

Develop a systemic contextual orientation toward practice. To develop policies that accurately reflect the needs and realities of consumers and service providers, rather than perpetuate the current situation. A case specific approach to practice alone will do little to address the systemic issues that come to bare on the child protection cases.

Recommendation # 3

Adopt a promotional learning approach to service provision. Present approaches to child and family service practice focuses on therapeutic interventions. By it's very nature therapeutic interventions involve diagnosis, labelling, and treatment with the power for each stage residing with an outside professional. This does little to promote empowerment and a sense of well-being for those individuals and families involved. Blame for problems rests within either a "dysfunction individual" or a "dysfunctional family unit". A learning approach to family intervention focuses on developing learning and development opportunities as promotional strategies to address learning gaps that may have resulted in child protection concerns. This approach encourages self-responsibility and power sharing, and emphasizes the overall growth and development of families and communities. It is based on the belief that

we all require support and learning opportunities in our lives, and given both we can work toward addressing our own needs and those of our family.

Recommendation # 4

Leadership orientation. In order for policy and practice to be integrated, organizational operations and structures also need to change. Child and Family Service organizations need fewer levels of bureaucracy and require that leadership, power, and responsibility for addressing service be shared. Program development should take place in teams that involve front line practitioners, program developers, supervisors, and recipients of the service. Leadership needs to be democratic and participatory rather than controlling and authoritarian. There has to be a clear vision at all levels of the organization and an understanding of the vital role each aspect of the organization plays. Clear and consistent links with the consumers of the service and clear partnerships with communities, funders, and service providers must be forged. Proactive, positive, ongoing learning needs to be promoted at all levels (individual, organizational, and community). Policies must accurately reflect the needs and realities of service providers and consumers, and be easily translated into practice. Evidence of policy development should grow out of practice realities.

Recommendation # 5

Develop strategies that increase personal mastery levels in staff. Personal mastery differs from both skill-based training and personal development. Individuals with a high degree of personal mastery are more committed, more innovative, have a deeper and broader sense of responsibility in their work, learn faster, and are life long learners. Personal mastery

involves a process of self reflection with the aim of clarifying what is important. It has the potential for profoundly changing the way individual's make sense of their experiences. Personal mastery enhances an individual's ability to negotiate meanings and purposes instead of passively accepting the social realities defined by others.

Recommendation # 6

Research and development activities to occur within the context of team learning. This involves shifts from focussing on individual staff members to teams. It entails moving from a system of centralized decision making to one that encourages initiative and innovation from teams that are willing to assume more responsibility. It promotes creative synergy and larger goals.

Recommendation # 7

Create a work environment and organizational structure that promote continuous learning, self-responsibility, pro-active creative development, power sharing, and visionary thinking. This involves structural, operational and leadership changes.

Recommendation # 8

Empower communities to take ownership and responsibility toward supporting the development of healthy children and families. Child and Family Service organizations need to create the space that allows communities to address child and family matters. At times this will mean "getting out of the way" and trusting in the outcome of a guided community planning process.

Community-based Practice Model

Bureaucratic child and family services have traditionally been organized to deal with the residual effects of child neglect and abuse rather than the cause. Power and control of services have remained with bureaucrats resulting in the disempowering of families and communities. The fragmentation of services that focus on symptoms has led to a growing number of children entering the child and family services system. The present legislation and organization of provincial Child and Family Services is such an example.

A move in a new direction would require the sharing of power with the community. The present Child and Family Services Act (Manitoba) itself is not the problem as it simply empowers local authorities to keep children safe. The problem rests with the bureaucratic system of governance. Moving in the direction of community control provides an opportunity for members themselves to define the abuse situation and develop a holistic approach to addressing the causes that lead to child protection concerns. A community approach to governance honours and respects the development of unique community standards, policies, governance structures, and a pro-active orientation to problem solving.

Recommendation # 9

Develop community-based program centres. Having programs located in communities increases community ownership and partnership opportunities. Working together with community members creates several advantages in terms of developing a common language, common strategy, and increased participation in addressing community needs. It is also an important variable in helping ensure that we remain accountable to the community

itself for what we achieve, not only to the funders for what we provide.

Recommendation # 10

Develop community-based standards and policies. Present child and family service standards, policies and practice guidelines are developed in offices far removed from the communities in which practitioners work. Often these do not reflect the realities or needs of the communities, making more sense to those who developed them than to those who are recipients of service. Developing community-based standards and policies grounds service delivery within a practice and community context. This will lead to an increase in program effectiveness and efficiency, and more important, be better able to address the causes of child protection concerns.

Recommendation # 11

Develop an integrated model of service. Our experience has shown that the welfare of children is best addressed in a manner that utilizes innovative approaches within a strong inter-sectorial policy framework. This requires a shift from the residual approach to a broad based inter-sectorial proactive approach that encompasses all the determinants of child well-being. It requires a paradigm shift, an establishment of a new vision of child well-being as opposed to the negative emphasis on child protection. Effective strategies must go beyond the traditional boundaries of child protection and include the development of inter-sectorial policies that involve all other government departments particularly Justice, Education, Health, Family Services among others. For many of our children in care, child protection concerns arose because of the lack of available front-end promotional services in other government

departments. The challenge is to develop a common and collaborative front to more effectively meet the needs of the community. A community-based practice model that brings together health, education, justice, and family services will eliminate the arbitrary rules and policies that prevent sharing and cooperation among current service systems.

Recommendation #12

Promote social cooperation and the development of healthy communities. Global forces beyond national and provincial control make it likely that governments will continue to struggle with fewer funds and more demand for services. Therefore, leadership from non governmental organizations such as businesses, labour unions and non profit organizations must be mobilized to fill the gap. Our categorical approach to structuring out living and working patterns has us assigning responsibility for collective well-being to the “human service sector”, leaving out every other sector of the Canadian economy. We need to respond to our generic responsibility for promoting health and wellness for all Canadians, and broaden our thinking around partnerships that will bring us closer to our goals.

Recommendation # 13

Implement flexible funding frameworks. While a particular leadership orientation was required to make the changes that occurred for the Awasis Agency, flexible funding played a fundamental role in allowing the organization to implement a particular practice orientation. Flexible funding allowed Awasis to work with families, directly and indirectly, in ways that were empowering, innovative, and had impact. Direct support in the way of homemakers, community-based family support workers, family educators and parent support

groups were augmented by the development of various educational materials such as health care and child development video series, parenting training workshops and innovative community programs such as community theatre groups. As a result, service delivery dollars are allocated differently and are linked to front-end health promotional services rather than traditional protection dollars. In order to develop an integrated community-based practice model that incorporates health, justice, education, and family services, flexible funding would be required.

Conclusion

Without the political will to create supportive environments, or the imagination to direct funding toward innovative healthy-community approaches, which transform rather than nurse ills of communities, government, Child and Family Services and other organizations will continue to fail in a domain where they have an opportunity to lead. To bring about change in the interactional and behavioral patterns that continue to support “the problem” will require nothing short of a colossal leap of imagination about what is possible within community and government administrations. Intellectually, spiritually, and socially, the kinds of political reforms that promote self-responsibility and community renewal represents, I believe, one of the freshest, most exciting, and challenging of grounds upon which anyone might advance. The first step in fostering intentional change is stimulating awareness that exposes alternative ways of thinking. Alternative ways of thinking are derived from a holistic framework which fosters an ongoing change process encompassing shared vision, systems thinking, team learning, awareness of mental models, and personal mastery rather than merely particular

objectives and results. Paradoxically, by emphasizing an ongoing change process, the objectives and results are realized, but are always realized in ever changing contexts and truly serve the people in them.

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