KUMMARA FAMILY LED DECISION MAKING

Gerald Featherstone
Themes for discussion:

• What’s the difference between AFLDM & Family Group Conferencing

• What does it look like when it’s working well
  - AFLDM
  - Kinship care – mapping
  - Blended models

3. Training – what would I focus on if we were starting anew
What’s the difference

1. A/FLDM & Family Group or Conferencing
Who controls the agenda

Thinking from the side of the other

Location

Intent

Is this a part of the punishment? Or is this a genuine attempt to establish a new storyline

Key messages

Power and control …… Authority responsibility
(if it is used at the start must ask why)

There is some great work / and workers out there

What are the outputs – case plan that is dictated/directed, what role does the family play – usually cornered with phrases:

- what you need to understand,
- I’m sure you will agree,
- if you were serious about..
FLDM Key Stages
Role of the professional

Who’s at the centre

What do we really want to see happen with the family

Social Exchange Theory (Cost benefit)

V

Attribution theory (Knowledge & skills)

Our point of intersection

Single case plan

AFLDM
AN OVERVIEW – MODEL OF CHANGE

The family system is the client
(and so are all the individual members)

Understanding the families story/ pattern/ beliefs
(then testing the idea)

Changing the family’s story
(through doing things differently and widening the circle)

Amplify the change
(through reinforcement)

Family system cycle of functioning
(Cybernetics)

Meaning through language
(Narrative)

Adapted from the Leeds Systemic Family Therapy Manual, Leeds University
Process

Overarching Phase | FLDM Stage | Specific Tasks | Transition Points
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Referral received | Understanding the family story | • Does the referral meet the criteria for a FLDM?  
• Major decisions need to be made with a family group,  
• If CS is involved, they have referred for a FGM, | • What is the story of the family's way of functioning?  
• How can we involve the system to work together?  
• Clear and appropriate danger/worry statements,  
• Clear and appropriate bottom lines, non-negotiables and safety goals,  
• All necessary decisions have been made,  
• Mapping of family-professional system |
Preparation Phase | Initial Referral Meeting | • Has the child been included in the process?  
• How will the child's voice be kept central? | • Has the family relational system been mapped out?  
• What is the parental beliefs, attitudes, constructs towards change?  
• Who is available in the family system to help shift the current problem and find solutions?  
• Who has closeness can provide safety for the child?  
• Who has power and influence in the family system?  
• Who can bring the problem, the desire, and some capacity? (the minimum sufficient network) |
Establishing and Maintaining Partnership | Involving the child’s voice | | • Are the professionals all on the same page and working together?  
• Do they understand their role as information providers only? |
| Involving the parental system | Involving the family and community system | | |
| Involving the professional system | Changing the family story | | |
Process

- Changing the family story
- Information sharing
- What’s worrying – the problem and impact on the child/ren
- What’s going well – safety, strengths, and exceptions
- The future – the preferred future and “safe enough”
- Private Family Time
- Agreeing the plan
- Amplifying the changes
- Single Case Plan
- Action Research Methodology
- Reflections and learnings

- Grounding the group in the context of the problem, reframing previous attempts at solutions, and building hope
- Bouncing between Worrying and Going Well
- What is the underlying problem?
- What are the previous attempts at solutions that have created unintended problems?
- Specifics of frequency and impact on children:
- Exceptions to the problem,
- Looking for strengths and resources in the family to become safety (actions demonstrated over time),
- Building hope by acknowledging what has been done already by the family to resolve the problem.
- Reframing the children’s needs to find a “fit” between the family and professional goals,
- What does this goal look like from the family’s perspective? What is their preferred future?
- Scaffold the goal into ‘bite-sized’ decisions,
- Privileging the families’ ‘expert’ status and creating ‘space’ for the family to make decisions about their way to best reach the goals.
- Putting “flesh on the skeleton” of the decisions and make it specific: “who, what, when, where, how”
- Reality testing for capacity and being realistic,
- Future planning for hiccups/roadblocks/invitations to go back to old ways.
- Developing a meaningful plan for the family with the family by recording the decisions made,
- Decisions are recorded in family friendly language, understandable to a child, and are accurate,
- The Single Case Plan is on a relevant medium (on a fridge, in a calendar, in a story book, etc),
- 3 month follow up with family system.
- Professionals participate in reflective process of offload, reflect, and planning actions for the future,
- Track themes and helpful/unhelpful processes,
- Utilise ARM protocols and processes for reflection.
Integrating – centring the child’s voice
Involving the family system
(all the individual members as identified by family and child)

• We see the family system as the client in one hand, while also holding individual needs and the most vulnerable members with the other.
• This invites us to consider meeting the needs of the family system now and in the future. There is no point in meeting the immediate needs at the sacrifice of the child’s future – that just shifts the problem from now to later.
• We invite families to view goals and next steps as ways to resolve difficulties that have crossed generations, which were often coping mechanisms in previous generations.
• It also invites us to include in this process other agencies and professionals, combining the best of the family’s resources with the best of the professionals have to offer.
Understanding the Families Storyline

• Family Timeline:

1979
Father Strict
Mother Felt oppressed
Ellie born

1985
Ellie wins races at school
Mom proud

1986
Tries to “buy” friends
Mom depressed
Has to work

1988
Shipwreck

1989
Dad distant

1992
Ellie home alone
Sister graduates

1994

Ellie pregnant
Conversation with mother
“People in the projects”

1995
Ben born

1997
Viola born

2000
Rashan born

2003
Sharelle born

2005
Children placed in foster care
Possibilities Ahead
Understanding the Families Storyline

• Genogram:
We use family plans to reinforce the changed family storyline.

These are developed by the family during private family time in the AFLDM meeting of the actions that will change the family storyline. These are brought out through facilitation of what is currently working well (exceptions to the problem) and then the family have the option of using these experiences in private family time.
By their own hands

Goals: What needs to happen:

Communication in the home:
1. Be able to sit down and talk.
   - Family routines + values + teamwork (duties) - house rules;
   - Boundaries + routine.
2. Family environment:
   - People coming over to house - rules or who + when comes;

   - Being safe from violence;
   - Keep him safe from seeing or hearing violence and so child protection does not become involved;

3. Hearing contact with, [redacted] and extended family + support together;
4. Support for, [redacted], to help them with parenting + feel connected (not isolated);

1. Come No. 1, 2, 3 etc.
   Always;

2. Transfer to another house.
   - Stop people coming around;

   Communicate without argument;
   - Compromise with decisions;

   Family to meet up regularly;

   No violence;
   - Support each other.
The most important rule is that the house will be safe and calm and that there won’t be any dangerous people around so the children will feel safe and happy.

(Family consists of Father, Daughter and Grandchildren)

“If daughter L is having an episode

When Mummy gets confused she gets out of control and angry everyone wants the children to know they did not cause this.

“When conversation is not conversation”

Raised voices and yelling- Grandad calls J to drop off the children, return home when L is diffused.

M's (family friend's) daughter tutors “A” 2 days a week -

Grandad & Daughter M will organise between themselves to pick up the children from school.

L to be assisted to find alternative accommodation, L to notify family before she visits ring first

This is about L taking responsibility, L will not be able to come back to the house when she becomes manipulative or makes G feel guilty or acting the victim.

The children go to respite when Grandad needs the support.

L Rehab or Detox – Adults and Family do best to help Mummy

The children see Kambu for their health needs.

Grandad is happy to have the children, he Loves them, they are not a burden
Changing the Families Storyline

• An example family storyline - organised around emotional pain and shame

- There is conflict in the relationships, fighting, anger, cutting off relationships in the family and with extended family members - this leads to build up of pain.

- MOTHER works hard to repair relationships and hold everyone together but it doesn’t work out the way she expects, things don’t get resolved.

- Everyone has their own individual ways of coping. The family copes by not talking about it, “no communication”

- Physical needs met, but no-one in the house relates to each other emotionally due to being numb.

- Pain overwhelmes the families ways of coping

- Family members use “painkillers” to numb the pain (i.e. “Bundy”, “withdrawing”, “voices”)

- "PAIN"
Skills; Qualities; approaches; and training
Types and nature of the parent-practitioner relationship – where are you now?

Expert

Dependent

Friendship

Adversarial

Avoidant

Partnership
Family Partnership Model

Construction Processes

Partner Qualities
Helper Skills
Helping Process
Outcomes
Characteristics of Parents and Children

Service & Community Context
The Helping Process

Partnership Relationship (Engage & Sustain)

Exploration

Understanding

Goal Setting

Strategy Planning

Implementation

Review

Ending
Essential qualities of the helper

- Respect
- Genuineness
- Empathy
- Humility
- Quiet enthusiasm
- Personal strength and integrity
- Intellectual and emotional attunement
Skills of helpers – training / development

Technical skills

- Admin
- Genogram family mapping
- Process understanding
- Report writing
- Stakeholder negotiation
- Problem statement
- Communicating and making use of technical knowledge, expertise and experience
- Problem management

Therapeutic skills

- Concentration/Active listening
- Prompting, exploration and summarising
- Empathic responding
- Enthusing and encouraging
- Enabling change in feelings, ideas and actions
- Negotiating
Partnership

• Working together with active participation/involvement
• Developing and maintaining genuine connectedness
• **Sharing decision making power**
• Recognising complementary expertise and roles.
• **Sharing and agreeing aims and process of helping**
• **Negotiation of disagreement**
• Showing **mutual trust** and **respect**
• Developing and maintaining openness and honesty
• Communicating clearly
Presenting difficulties

Widen the circle by asking questions about who else can help,

Reframe

These elements need to be found in some of the participants of

Family behaviour during FLDM process

Elicit solutions

What are the myths that the family have that they fear to break?

What are the family secrets?

Preparing the child to be included in the process, and

What keeps the situation the same?

Agreeing on the plan

have desire to do something about it, and

Develop strategies for what the meeting should look like to

Challenge existing patterns and beliefs

Worries and safety (difficulties and strengths)

Successes in all areas of family life and relationships with wider

Relationships within the family and wider system

Information sharing:

Externalise the problem

Clarify and set specific goals for the meeting process

The child's voice

Clear goals and actions that have been developed by the family

FLDM process, what led them to work with us

Future goals and next steps

Private family time

When has the problem been overcome?

Provide distance between family and the problem

Questions and the context of the child's voice

Understanding the Family's Story

(Finalizing for the meeting)

Changing the Family Story

A plan to keep the new family story strong