Increasing the Cultural Responsiveness of Family Group Conferencing

Cheryl Waites, Mark J. Macgowan, Joan Pennell, Iris Carlton-LaNey, and Marie Weil

Child welfare struggles to manage child abuse and neglect and to seek permanency for children, while being culturally responsive to the communities it serves. Family group conferencing, piloted in New Zealand and now used in the United States and other countries, is a strengths-based model that brings together families and their support systems to develop and carry out a plan that protects, nurtures, and safeguards children and other family members. This article describes the model and a culturally competent method for assessing and adapting the model for the African American, Cherokee, and Latino/Hispanic communities in North Carolina.

Key words: African Americans; child welfare; cultural competence; family group conferencing; focus groups; Cherokee; Latinos/Hispanics

Diversity has greatly enhanced the richness of our society. Yet child welfare programs have not fully examined or used this richness to create programs that are inclusive and respectful. Human services organizations need to establish culturally competent programs that recognize and use worldviews to guide practice. "The question is no longer one of 'whether' to provide culturally competent services to clients, but rather 'how' can we do it best" (Asamoah, 1996, p. 1). In a multicultural society best practice is moving beyond self-awareness and cultural sensitivity to a point where attention to cultural knowledge is mainstreamed and service delivery systems and treatment models are adapted to fit diverse client communities.

Reflecting national trends, North Carolina struggles to address child abuse and neglect and their frequent co-occurrence with domestic violence (Edleson, 1999; North Carolina Department of Health and Human Services, NC Child Advocacy Institute, 1999; U.S. Department of Health and Human Services, 1997) while seeking permanency for children within strict federal timelines (Adoption and Safe Families Act of 1997 [P.L. 105-89]). As one response, the North Carolina Division of Social Services adopted as policy the family group conferencing service model and funded the North Carolina Family Group Conferencing (NC-FGC) Project (Pennell & Weil, 2000). The NC-FGC Project sought to enhance the cultural responsiveness of child welfare interventions across the state by introducing a partnership-building model that highlights the importance of the family's cultural knowledge for safeguarding children and other family members. The project investigators further recognized that to effect a culturally responsive program, guidance was required from diverse groups in North Carolina (Waites, Macgowan, Pennell, Weil, & Carlton-LaNey, 2000).

This article reports the research undertaken to augment the cultural application of FGC in North Carolina. The research used a community-based program development approach to assess and improve the cultural responsiveness of family group conferencing for three groups in North Carolina: African Americans, American Indians, and Latinos/Hispanics. To enhance the cultural relevance and acceptability of the model, focus
groups were used to provide guidance from these groups on how to develop partnerships to protect, nurture, and safeguard children and other family members by using the FGC model.

**Family Group Conferencing Model**

The FGC model is based on Maori culture (Love, 2000) and is similar to practices in many indigenenous cultures and to models promoted by social workers (Burford & Hudson, 2001). FGC was first legislated in New Zealand after dissent by its indigenenous people against Pakeha (European-descent), expert-driven approaches, seen as undermining their kinship structure and cultural identity (Rangihau, 1986). Maori protests converged with economic reforms on the role of the state and community demands for greater professional accountability to clients. The 1989 legislation mandated the use of FGC for child welfare and youth justice and, in so doing, sanctioned lowering reliance on legal and protective interventions and advancing the principles of family responsibility, children’s rights, cultural affirmation, and community–state partnerships (Hassall, 1996). Given indigenous influences, “family” was broadly defined to encompass immediate family, relatives, and tribal groupings. Before child welfare could proceed to court, the legislation stipulated that in most cases an FGC had to be called first.

The conference was to provide the larger family group with an opportunity to develop a plan to resolve the child welfare concerns. The FGC model sought to deprofessionalize child welfare decision making while safeguarding the interests of the child. Checks-and-balances were built in by having the family group formulate a plan that had to be approved by the protective authorities before implementation. Given the power imbalances between child welfare and its client families, the model deliberately promoted the voice of the family group. This included having a coordinator who did not carry the case organize the conference; inviting the family group to attend; preparing them for participation; following their wishes on the time, location, and format of the conference; providing sufficient information for developing a plan without imposing solutions; leaving the family group to deliberate in privacy; negotiating with them the final plan; and reconvening as necessary.

During the 1990s numerous countries, including the United States, imported and adapted the model. Implementation studies have found that families came when invited; they develop plans that workers were grateful to approve; and family groups and workers, including in North Carolina, were satisfied with the process and the resulting plans (Pennell, 2002). Outcome studies show promising results: keeping children with their families, kin, or cultural group; stabilizing children’s placements; decreasing child maltreatment; and increasing family pride (“Promising Results,” 2003).

**Cultural Competence and Best Practice**

From the start the NC-FGC Project recognized that adherence to the model’s key principles required flexible reshaping to fit within North Carolina’s cultural contexts. Thus, the investigators emphasized that cultural responsiveness is essential for best practice, defined as quality professional practice based on the evaluation of what is most effective. It is evidence-based practice derived from the best information available or the conscientious, explicit, and judicious use of current best evidence in making decisions (Gibbs & Gambrill, 2002; Howard, McMillen, & Pollio, 2003). Too often, though, what is considered evidence-based practice ignores the voices of those for whom programs are intended (Beresford, 1999; Gambrill, 2003). The study reported here uses the voices of underrepresented communities to develop guidelines and other protocols to contribute to improved outcomes for children and their families.

Our framework for understanding cultural competence is transactional and views cultural identity as a negotiated process rather than a cluster of qualities (Barth, 1969; Bennett, 1975). The ways in which that distinctiveness is defended, asserted, preserved, or abandoned amount to ethnic identity (Green, 1982). In essence, cultural identity comprises the “boundaries that groups define around themselves, using selected cultural traits as criteria or markers of exclusion or inclusion” (Green, 1982, p. 12).

The *culturally competent social worker* has been defined as one who can effectively apply social work skills in a way that is knowledgeable and respectful of a client’s culture (Weaver, 1997). Cultural competence is often seen as having three components: (1) knowledge of the client’s cultural context, including history and worldview; (2) practitioner awareness of own assumptions, values,
and biases; and (3) application of appropriate interventions and skills (Brown, Bradtke, & Fong, 1993; Sue, Arredondo, & McDavis, 1992; Weaver & Wodarski, 1995). In addition, cultural competence is seen as an ability to provide services that are perceived as legitimate for addressing problems experienced by culturally diverse people (Dana & Matheson, 1992; Green, 1999). It denotes the ability to transform knowledge and cultural awareness into interventions that support and sustain healthy client–system functioning in the appropriate cultural context (McPhatter, 1997). For the NC-FGC Project we defined cultural competence as the “commitment and capacity to learning about and appreciating cultural differences and similarities, evaluating one’s own cultural competence, adapting one’s personal and professional actions and advocating accordingly” (Pennell, Macgowan, Waites, & Weil, 1998, p. 20).

**Culturally Responsive Programs**

When working with racially and ethnically diverse families and communities, workers need to tap into the traditions, worldviews, and strengths of cultural groups while remaining open to the dynamic nature of culture. Recognizing that there is considerable diversity within each cultural group is an important element (Nakanishi & Rittner, 1992).

Culturally sensitive programs view families in relation to their own values and natural support systems, neighbors, and communities (Hodges & Comer, 1995). These programs obtain the history, worldviews, and overall cultural information of the communities to which they provide services. The acquisition of this knowledge about a community and its members is necessary before planning and developing interventions that require their participation (Gutierrez-Mayka & Contreras-Neira, 1998). This cultural knowledge prepares programs to operate in a culturally appropriate manner and to be more responsive to and accepted by the communities they serve.

**Gaining Cultural Guidance through Partnership**

Designing culturally responsive interventions with guidance from ethnic communities promotes the development of culturally responsive services. Facilitating the inclusion of the ethnic communities’ thoughts and recommendations strengthens the model and its effectiveness.

Speaking directly to community members and obtaining their feedback concerning FGC seemed appropriate. Involving those that have often been left out of the program formation process linked to our goal of building broad-based support from a range of community partners. The project sought answers from these communities to the following questions:

- Would this model work for your group?
- How should this model be adapted for your group?

**Method**

In obtaining cultural guidance about FGC, we used qualitative and quantitative research methods sensitive to culture. The primary method for acquiring community guidance about FGC was the focus group. In addition, we used a quantitative measure on ethnic identity. Focus groups generate narrative data (Krueger & Morgan, 1998). Morgan (1996) presented four key elements of successful focus groups: (1) careful planning with clear purpose and objectives, (2) recruitment of appropriate participants, (3) effective moderation of meetings, and (4) detailed analysis and interpretation of the results. The procedures followed this model.

**Participants**

The research focused on three cultural communities in North Carolina: African American, American Indian, and Latino/Hispanic. A focus on these cultural communities seemed appropriate for demographic and service reasons. The child welfare system reflected an overrepresentation of African American (Brissett-Chapman, 1997; O’Donnell, 1999) and American Indian children (George, 1997; Matheson, 1996). African American children made up approximately 49 percent of the foster care population in 1997 and remained in care longer (Morton, 1999). The Latino community had expanded rapidly in North Carolina—up 128.9 percent since 1990 according to census estimates (U.S. Census Bureau, 2000), and outreach to this community was needed.

Six focus groups were held, two per cultural group. The intent was to be as representative as possible in collecting data from the cultural communities. Thus, data were gathered from both urban and rural sites. The focus groups took place in five geographic locations spanning the western to the eastern parts of the state. To select representatives for each focus group, we worked with a well-known community representative who

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served as host and invited participants. A criterion for choosing participants was membership in that cultural group. Some participants were professional service providers and others were lay community members, including service users. The desire was to have eight to 10 members for each focus group session that would last between one-and-a-half and two hours. Participants signed informed consent forms to participate in the research and be tape-recorded. The host selected the focus group locations.

Focus Group Procedures

Group members were introduced to FGC through the New Zealand video Mihis Whanau (New Zealand Department of Child, Youth and Family, 1995). This video shows a dramatization of an FGC that takes place in a Marae or Maori gathering place imbued with spiritual meaning. In accordance with Maori traditions, the FGC began and ended with song. A handout was provided outlining the mission and objectives of the NC-FGC Project. To obtain feedback about the model, seven open-ended questions were asked:

1. Did anything surprise you on the video?
2. What do you like about family group conferencing? Would this work for African American, Latino/Hispanic, or American Indian communities?
3. What things would you want to change to make family group conferencing better? What is the main reason for the change?
4. What would make it acceptable to African American, Latino/Hispanic, or American Indian families?
5. Suppose you were trying to encourage a friend or family member to take part in a family conference, what would you say to them?
6. What is the best way to get all family members to take part?
7. What else do you think we need to know?

The focus group began with introductions; the participants then completed the consent forms and ethnic-identity measures (described below), played the video, and discussed the seven questions. Refreshments were provided. Most of the time was spent obtaining feedback on the FGC model.

Measures

Both qualitative and quantitative data were collected. Qualitative responses were taped and flipcharted, and a research assistant prepared reflective notes.

We used the Multigroup Ethnic Identity Measure (MEIM) (Phinney, 1992) to assess participants’ association with the targeted cultural group. This quantitative measure was selected because of its favorable psychometric properties. The 14-item measure includes three components of ethnic identity reported in this study: affirmation and belonging (5 items), ethnic identity achievement (7 items), and ethnic behaviors (2 items).

Data Analysis

First, we analyzed the the transcripts and flip-chart notes through the constant comparative method using the computer program ATLAS/ti (Muhr, 1997). We also examined the reflective notes. The MEIM provided descriptive quantitative data.

Focus Groups Findings: Cultural Guidance

African American Consultation

The first focus group with African Americans was conducted in an urban county and the second in a rural county. The urban county focus group consisted of five women and one man. The second focus group consisted of six women and four men. According to open-ended responses, participants self-identified as black, African American, or Afro-American. (As indicated in Table 1, the group’s ethnic identity was strong.) The focus group participants in both counties consisted of human services providers, professionals, and paraprofessionals, and each group had one consumer. Both focus groups were held in the local communities at facilities that were convenient and comfortable for the participants. Refreshments were served. Both focus groups were audiotaped and one was videotaped.

The urban focus group was initially least receptive to FGC. Using their practice wisdom (many worked for the local department of social services), they were not optimistic that families would participate. Many indicated that families in their local communities might not be as cooperative as the family group in the video. However, after their initial reticence, they began to identify ways to make FGC workable and productive. The rural focus group members were optimistic from the beginning and welcomed the opportunity to
Table 1
Focus Group Ethnic Identity Scores, by Ethnic Group

<table>
<thead>
<tr>
<th>Ethnic Identity Measure</th>
<th>African American</th>
<th>American Indian</th>
<th>Latino</th>
</tr>
</thead>
<tbody>
<tr>
<td>Ethnic identity</td>
<td>3.57</td>
<td>3.44</td>
<td>3.55</td>
</tr>
<tr>
<td>Affirmation and belonging</td>
<td>3.90</td>
<td>3.78</td>
<td>3.60</td>
</tr>
<tr>
<td>Ethnic identity achievement</td>
<td>3.39</td>
<td>3.33</td>
<td>3.52</td>
</tr>
<tr>
<td>Ethnic behaviors</td>
<td>3.25</td>
<td>2.97</td>
<td>3.12</td>
</tr>
</tbody>
</table>

Note: Scores are out of 4, with higher scores indicating stronger ethnic identity.

participate in an effort to provide a service that would respect and benefit the community. Both groups were pleased that input from the community had been solicited before finalizing the plans.

Both groups agreed that FGC was a good idea and workable. They responded favorably to the inclusion of family traditions and a model that celebrated culture. The participants strongly connected with the recognition of the significance of faith, singing, and prayer as a part of their family joining together. They indicated that rituals and traditions that were meaningful to African American families would be a welcomed addition. It would be integral to creating an environment conducive to productive problem solving.

The focus groups also acknowledged that, from a historical perspective, FGC was not a new model and that the African American family had been engaging in such family group problem solving since their enslavement in this country. They were pleased that extended family members were included in the decision-making process and one participant said, “It had [has] everyone participating... It’s like a group decision.” There was also some question about how to include extended family that may be at odds with their relatives. However, participants felt that older family members might play a role in taking charge of the conferences and manage family disagreements. Both groups seemed to feel that reaching out to include all family members might help begin a process that could mend some disputes.

Another theme emphasized in both groups was that FGC would be worth a try if only to get “the Department of Social Services out of families’ business.” Participants were very clear that conferences should be in a culturally appropriate location like a “church, fellowship hall, or community center.” They warned that it would be essential to find a location that would protect the family’s privacy.

They were adamant that families would opt for FGC over their more traditional involvement with the local department of social services. There was also general agreement that families had been treated badly by the departments of social services for many years and as such were distrustful of those agencies and their motives. Although this was a reason given for why families would choose FGC, it was also given as a reason why it might be difficult to convince families that FGC was a legitimate strategy that would lead to the families having the opportunity to solve their own problems.

An Invitation to the Cherokee Reservation

Both of the Cherokee focus groups were held on the reservation in a Cherokee family services agency. These meetings were preceded by a number of contacts to develop rapport and plan the process together. We visited the reservation; later the Cherokee representatives attended a FGC training session in a nearby county; and these meetings were followed up by telephone, letter, and electronic mail. The Cherokee representatives agreed to host two focus groups with community members.

The focus groups mixed professionals and nonprofessionals and older and younger participants. The May 1999 focus group was composed of six women and one man, and the August 1999 focus group had six women and two men. The groups included both professionals and community members, some of whom were social services consumers. On the MEIM, the group participants
self-identified themselves as American Indian, Native American, Cherokee, Celta-Mohican, or white. (As indicated in Table 1, overall the group’s ethnic identity was strong.)

The focus group participants were visibly emotionally touched by the video Mihi’s Whanau and appreciated that the video showed a family group following indigenous rituals over the course of the conference. The two groups saw the model as moving away from government control to giving “people ownership in what happens to them.” They agreed that FGC was not a new practice for the Cherokee and that this model resonated with their traditional approaches in which women made decisions about the family and tribe. The same is true today. One woman said, “We are always together.” Expanding further, another Cherokee woman explained, “We don’t call it [FGC] anything. We just get together and we just do it. You know, you can do it with your immediate family. You can do it with your extended family. However, it just happens. We don’t have a special name for it or anything.”

To make FGC work, the Cherokee made a number of recommendations. Starting the program could not be rushed; instead the community should be prepared through a variety of educational means. One participant explained, “If they [the community members] hear something about a different way of doing things, . . . it is more acceptable.” Next, they stressed that FGC should be kept informal and carefully orchestrated to flow with their usual ways of gathering families. Particularly to attract men to the conference, they advised holding “a cook-out.” Whether the conference was convened inside or outside, the men would likely be outdoors. The sharing of food would allow communications to “trickle” between the men and women. They counseled against holding the conference in a courthouse or agency facility and recommended that the conference be held at the home of a respected relative, not directly involved in the issues being discussed. The FGC coordinator would preferably be from their community, relate in a supportive way with the family group, and work closely with the elders in organizing the conference. At the conference, the elder family members would take the lead in speaking and grant permission for younger family members to speak. The process would need sufficient time for processing the issues. With these culturally appropriate practices in place, the Cherokee participants concluded that FGC was “worth a try.”

**Latino/Hispanic Platica**

Two focus groups were conducted with Latinos/Hispanics. The term platica (chat) was used in an effort to make the meetings less formal and more inviting. There were seven women and two men in both groups. Except for one person who was bilingual and identified herself as European American, all participants were both bilingual and Latino/Hispanic. Participants were members of the local Latino/Latina communities, and one person had been a consumer of services. (As noted in Table 1, participants in the focus groups strongly identified with their ethnic groups.)

The participants were struck by how different family group conferencing is from conventional methods of service delivery. One participant observed: “The cultural sensitivity of the providers and the workers provided the family the opportunity for all to express their own opinions on their own values. Everything was taken into consideration to be able to bring all these people together. . . . It was very unique.”

The participants reported that involving extended family in dealing with family problems is congruent with their culture. One participant said: “It is powerful. . . . In regards [to] getting all the family members together and being a part of that process.” Another noted, “This is an opportunity for agencies to have more consideration of the family.” The participants thought that allowing families to come up with plans gave them ownership, increasing the likelihood of success.

One person from the group commented: “What happens when the family commits themselves and they fail? They fail for themselves. Now, when it is imposed, they don’t really care about it. But, when they choose the plan they know they have to work it out, because it is their own.”

However, it was also recognized that because of geographical separation and documentation status of some Latinos and Latinas in North Carolina, family involvement was not readily feasible with many people. Also, because many Latinos/Hispanics were new to North Carolina, there was relatively little or no multigenerational representation.

Some participants were struck by the model’s flexible approach in allowing family members as much time as necessary (that is, hours, if not a
couple of days) to come up with a plan. One participant commented, "Professionals can move in a million miles per hour and make some decisions, but families need time. I think in respect to the process we need to include everyone's opinion, and really give time for that to take place."

Another participant was struck with how the model allows participants to include expressions of faith or belief. A participant observed, "The faith piece in it... I don't think that sometimes they [other models] include or see including the faith component." The participant added that having the family group conference in a church or other faith-based venue is a "different twist."

The need for bilingual and bicultural facilitators was brought up. In describing her work in the Latino community, one participant remarked about the dynamic communication patterns in Latino families:

We just keep on going, back and forth and back and forth. And if there is an interpreter involved in any of this thing, one word can make the big difference. You know, just one word that you don't say right could be a big difference.

Cultural Guidance: A Strategy for Best Practice

The goal of the focus groups was to obtain cultural guidance that promotes the application of FGC in diverse North Carolina communities. Several general themes emerged that were used to advance FGC.

Location

The location of the FGC is important for creating a comfortable environment. The participants cautioned that social services agencies should not be used. A community-oriented setting was preferred by all. This type of setting would facilitate an atmosphere where "everybody felt relaxed... and free to speak and express their opinions... to be able to really express what they really want to say." All groups suggested a place where families would feel comfortable and have some modicum of privacy and control. In keeping with the focus groups' advice, the findings from the NC-FGC Project were that families are electing to hold their conferences in either churches or community centers and that their wishes are being respected by the FGC coordinators (Pennell et al., 2002).

Cultural Traditions

All the groups emphasized the critical importance of recognizing cultural traditions and worldview to "feel comfortable being there." Some common traditions included having food for an all-day conference. It facilitated an intimacy conducive to families coming together to problem solve. They all indicated that beginning with a ritual was favorable to a productive conference. The Cherokee participants also informed us that their problem-solving approach required all to ponder the issue and not rush to a decision. The NC-FGC Project found that conferences were shaped to families' wishes.

Community Identity

The focus group members felt that the individual who coordinated the FGC should have some relationship with the community and identify with them in some way. They believed that having a coordinator who had the same cultural background as the families would be the best way to ensure participation. Participants of the Latino/Hispanic focus group saw language as a major barrier to effective service delivery. They shared how difficult it is to communicate through an interpreter and requested a bilingual service provider. All focus groups expressed preference for a service provider from their own culture. Someone who is culturally competent and accepted by the cultural group was the least of the requirements. The Cherokee, however, preferred a Cherokee service provider. The counties participating in the NC-FGC Project are home to numerous cultural groups and are generating creative plans to meet the challenge of cultural competence. These plans include hiring local coordinators from various ethnic and racial backgrounds, ensuring the participation of different cultural groups on their advisory bodies, securing interpreters with whom families are comfortable, and providing training to child welfare workers on how to take part in conferencing.

The Role of Elders

Most participants agreed that in their community it would be best if the elders played a major role in inviting family members and hosting and convening conferences. However, this would be a challenge for many Latino/Hispanic families as many elders in this community in North Carolina live in other countries. In general the consensus was that
the inclusion of family elders would be critical to the success of FGC, both in terms of the community’s acceptance of FGC as a viable strategy and in terms of the types of solutions that families would identify. The NC-FGC Project found a wide age spectrum at conferences, with grandparents, aunts, and uncles present.

Communication and Spreading the Word
Community education to let all know that there will be a change in how agencies work with families was indicated as important. Many participants expressed a lack of trust with the current system. Establishing ongoing communication that facilitates partnership between social services agencies and all local communities was suggested. This could be accomplished through outreach efforts in the tribal newspaper, local ethnic publications, community meetings, church group presentations, community-based organizations, and schools. All groups agreed that enhancing the way information is communicated between social services agencies and multicultural communities is necessary. A major issue for recent Latino/Hispanic immigrants is their unfamiliarity with U.S. culture, values, policy, and laws. They also maintain the cultural values and traditions from their native country. This dichotomy may cause confusion for families. The participants suggested using community outreach and education programs that work collaboratively with Latino/Hispanic families. They also stressed the importance of training service providers and proving them with cultural knowledge that enhances their understanding and skills in cross-cultural interactions. In response to these challenges, the NC-FGC Project developed a training program for social services staff and community partners that spelled out strategies for addressing cultural issues.

Conclusion
This article outlined an approach to gain cultural guidance and to build partnerships with the African American, Latino/Hispanic, and American Indian families and communities. Emphasis was placed on listening to and learning from community members and tapping into their strengths to reshape FGC to meet the needs of children and diverse families in North Carolina.

This study was one aspect of a stepwise process to gain cultural guidance. Outreach to other community groups and consumers is occurring. The small number of focus group participants places limitations on the study; at the same time, the geographic and cultural diversity of the groups has strengthened the utility of the findings for a statewide project.

We found that consulting with community partners to develop a culturally competent model can help the partnership-building process between child welfare agencies and cultural (ethnic) communities. Through collaboration culturally responsive practice models can be designed. We also found that

- families appreciate the opportunity to resolve their own problems.
- FGC can work if cultural adaptations are used and cultural traditions are respected.
- bicultural and bilingual coordinators, practitioners, and allied workers are important to effective FGC.
- holding FGCs in a culturally appropriate setting is important.
- establishing and maintaining ongoing communication and joint problem solving is necessary.

With this information we hope to make FGC culturally responsive and continue to build partnerships with African American, Latino/Hispanic, and American Indian families and communities.

References


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