A Foster Parents Perspective: An evaluation of support services provided to foster parents while caring for a foster child

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Abstract

This research aims to identify how foster parents feel supported in their role. Much of the research previously conducted in this area’s shows that many foster parents feel they do not have any support, all the while being asked to go above and beyond for the child in their care.

Previous research also shows that foster parents feel isolated when it comes to decision making regarding the child in their care and often feel like they are babysitters, despite caring for a child for several years.

This research aims to make prominent how foster parents feel they have not had the support and will look for emerging themes within each participant’s experiences, creating a detailed account of why foster parents feel unsupported.
Introduction and Literature Review

Foster Care Partners, (2012) state that fostering provides children and young people with the opportunity of a family life when they are unable for whatever reason to live with their own family. Legally, the responsibility for children and young people in foster care remains with the state and the birth parents. Most children in foster care will continue to have regular contact with their birth parents and the role of the foster carer is to provide a secure and stable home in accordance with the care planning process.

The purpose of this project is to identify personal issues within the area of Foster Care and the personal effects on those who foster. It is important for this issue to be researched as stated above by Foster Care Partners, responsibility for children in Foster Care remains with their biological parents and the HSE. Yet, foster parents are the people who have these children in their care and most familiar with the child’s experience and feelings towards being separated from their home.

The role of the foster parent and family is one which can create much stress and emotional demand from those involved and yet they must endeavor to support the foster child in this transition, ensuring their physical and emotional safety and well being. However, as this transition into a new home and family is not an easy one, we must look at the support services provided for families who foster, to ensure they have the best available care when they need it.

By doing this research, the researcher hopes to achieve an understanding of the effects fostering a child has on all those involved within the family and who are affected by a foster child in the home. Each experience will be noted and will have it’s own individual differences, what area’s the interviewee’s all agree on or disagree on which will provide a research project which address’s the key issues raised.

The researcher will do this by performing a qualitative study. Qualitative research methods allow the researcher an opportunity to gain a more personal and detailed account of the feelings of those involved. The researcher has chosen qualitative research as the research is non experimental and will be carried out by discussing the main topic with those most affected. This will be done by conducting
interviews with parents who foster. The researcher’s aim is to meet with foster parents who also have biological children in the home. The reason for this is that researcher will be able to determine differences and similarities between each interview and research previously carried out within the area of foster care.

In order to successfully complete the research, the researcher will review previous research already carried out which argues or agrees with the research question above. By doing so the researcher can determine what knowledge of the topic is already available and see what needs to be made available. This also allows the researcher note any comparisons or any disagreements within the interviews and the research previously carried out.

McDonald, Burgess and Smith (2003) research showed that foster parents are not happy with the services provided to them and that they are most likely to hear of changes and options available to them through other foster parents and that the information is not provided to them by their case worker. “It is clear that the traditional support given to foster carers is not always valued by them as it appears unable to address successfully the complex issues and state of impasse that often exists. Furthermore, foster carers require inter-disciplinary team-based interventions where they are regarded as equals and to be fully involved in the decision-making process” Mc Donald, P.S., Burgess,C., & Smith, K. (2003). A Support Team for Foster Carers. Despite Foster Care Partners (2012) stating that they place their carers at the heart of what they do and will go the extra mile as and when required.

It is vital as a foster carer that you try to understand the message behind you children’s behaviour. Without this understanding, laying down rules, no matter how clearly or often you do so will only serve to frustrate you and push your foster children to escalate the behaviour you are trying to change. (Foundation for Fostering, 2011).

While this is stated by the Irish Foster Care Association, much of the studies already published focusing on this area show that foster parents feel they did not receive the full history of the child, which in turn did not allow for them to care for the child correctly; many also stated they did not feel they had the support they
needed from their case worker which also impacted their ability to care for a child fully.

Several of the reasons why some foster parents planned to quit or had quit already centred around communication with the child welfare agency and inadequate services. About 40 percent of the total sample reported receiving inadequate agency support. About one-third reported poor communication with foster care workers, and 34 percent said that they quit because of behaviours exhibited by children in their care. Many parents also reported a lack of specific needed services, including day care, respite services, and financial reimbursements. Also, foster parents reported conflict between the foster children and their own children as a reason for quitting. Rhodes, K. W., Orme, J. G., & Buehler, C. (2001). A Comparison of Family Foster Parents Who Quit.

One of the reasons for this may be due to support workers and social workers not being happy within their role, as research carried out by Alissa Schwartz shows that, while trying to identify the positive effects of social workers within the area of foster care, the negative outweighed the original their positive contribution. “In general, foster care workers made overwhelmingly negative comments about the larger environment within which their agencies were embedded. Schwartz, A. (2011). Foster Care Workers' Emotional Responses to Their Work. Schwartz also noted that the area of child welfare struggles with high rates of job turnover. This may contribute to foster patents not feeling fully supported in their role as their support changes all the time.

Rosenwald and Bronstein (2008) findings showed that foster parents do not feel valued, appreciated or trusted in their role and that their frustrations are directed specifically towards caseworkers who they felt did not provide them with necessary information or include them as parents in decision making.

The above research would indicate that foster parents do not feel supported by their social worker and also that the social workers feel more negatively regarding their role than positive. Perhaps the negative attitudes of social workers within their
role have a knock on effect, creating a negative train of thought for the foster carer.

By conducting a qualitative research project the researcher will be in a position to discuss previous research findings with the interviewee’s and compare and note any changes within the area since previous research has been carried out. This will allow the participants an opportunity to advise if they have had similar experiences or if the research is something they do not agree with.

Within this research topic of foster care, the researcher must be mindful that the foster parents are not only fulfilling a role but may have become attached to a foster child. They may have had the child live with them for several years, raised the child and so the questions asked must respect their position as a parent and not an emotionally unattached care giver. For some foster parents, they may feel we are discussing their role as a parent. They may also feel that they are isolating the foster child from the family unit by discussing the different relationships which occur in foster care. “Attachment quality is considered important by attachment researchers because it reflects the quality of the infant’s relationship with the caregiver, and also because it is associated with the child’s later interpersonal functioning” Dozier, M., Stoval, K., Albus, K. E., & Bates, B. (2001). Attachment for Infants in Foster Care. Careful consideration must be given within this area by the researcher and also by the caregiver.

The personal effects of caring for a child in foster care can be often more stressful and worrying than raising a biological child. Research carried out within this area by Rosewald and Bronstein (2008) states that “foster parents referred to their work as back breaking and have shared it’s difficult impact on their biological children and their marriages” Rosenwald, M., & Bronstein, L. (2008). Foster Parents Speak. Sacrifices made by the foster parents are partly due to the fact that they do not feel trusted in their role. As previously noted, Rosewald et al (2008) found that foster parents felt irritated in their role as they did not feel valued, appreciated or trusted in their position. “These frustrations were directed specifically towards case workers who did not provide them with the necessary information or include them as partners in decision making” (Rosewald & Bronstein 2008). Therefore the pressure of ensuring a child’s safety while not feeling trusted ads to the pressure of the foster parents
creating hostile feelings about their decision to foster.

Rhodes et al. (2001) also focused on foster parents and their discontent within their role as foster parents. “Most foster parents cited more than one reason for discontinuing foster care. As has been found in previous research on retention, common reasons for quitting were lack of agency support, poor communication with workers, and children's behaviours”. (Rhodes, Orme, & Buehler, 2001).

Attributing to foster parents concerns where the health issues of children who come into their care. As noted in previous research, “Foster parents at all sites were consistent in identifying a range of developmental and health problems for the children in their care. These included low birth weight, exposure to alcohol and others drugs, otitis media, obesity, skin conditions like eczema, respiratory conditions like asthma, dental problems, enuresis, speech delays, failure to thrive, and developmental delays”. Pasztor, E., Holliger, D., Inkelas, M., & Halfon, N. (2006). Health and Mental Health Services for Children in Foster Care.

Due to the disruption in their childhood or teen years, children in foster care have many emotional barriers to overcome which will affect their education, confidence and their ability to be successful. “For most teens the transition to adulthood is a gradual process. Becoming less dependant on their parents and more prepared to meet their own needs” Dworsky, A., & Courtney, M. E. (2009). Homelessness and the Transition from Foster Care to Adulthood. Unfortunately for children in foster care they do not have the benefit of staying at home and being financially dependent on their parents. When a child in foster care turns eighteen they become their own dependent and no longer a dependent of the state. They are now without family and are financially unsecured. The transition from adolescent to adult is made largely on their own. (Dworksy & Courtney, 2009).

As a result of not being able to secure employment and a safe place to live, many foster children find themselves homeless with no financial stability and no option of further education when no longer of age to be dependent on the state. “Despite considerable evidence that youth’s aging out of foster care are at a higher risk of becoming homeless, relatively little is known about how different
demographics, family background, or placement history characteristics might either contribute or protect against homelessness during the transition to adulthood”. (Dworksy & Courtney 2009). Aging Out (2007) conducted a study following the trends of foster children who became homeless following their 18th birthday and found that “youths in foster care had poorer educational outcomes than their age peers not in foster care, 38% of the youth in foster care changed schools at least once, compared to 7% of the general population, disproportionately had disabilities that hampered their learning, experienced higher rates of school disciplinary problems that qualified them for the drop-out prevention programs than did and higher rates of homelessness which may have contributed to low academic achievement” Aging Out of the Foster Care System to Adulthood: Findings, Challenges, and Recommendations. (2007).

“Although attaining educational success can be challenging for many youths, those placed in foster care are particularly vulnerable to these challenges and face many obstacles to educational achievement” Havalchak, A., White, C., O'Brien, K., Pecora, P. J., & Sepulveda, M. (2009). Foster Care Experiences and Educational Outcomes of Young Adults Formerly Placed in Foster Care.

As also argued by Bruskas, (2008), children in foster care are more likely to be absent from school due placement disruption in foster care which effects their school performance and experience.

Perhaps failure to support the child in care entirely is an attribute to their academic downfall. If we provide the correct support for those working to support the child, perhaps foster parents will feel differently about the child in their care and push the child to succeed. According to King, Kreamer, Bernard & Vidourek, (2007), foster parents with a higher education were more involved with the foster child and spent more time listening to the child in their care. The research focused on foster parents involvement and authoritative parenting. They found that “foster parents use of authoritative parenting differed based on level of education and years as a foster parent” King, K., Kraemer, L., Bernard, A., & Vidourek, R. (2007). Foster Parents’ Involvement in Authoritative Parenting and Interest in Future Parenting Training. Although this research did state there is no difference or relationship between income
and the parenting differences. If authoritative parenting is due to a higher level of education among the foster parents then the researcher must look at why the importance of education is not embedded into the children in their care as stated above, the parents with a higher education are the parents who show more involvement with the foster child.

Research findings in relation to children in foster care and education shows that foster children with more than two social workers during their time in foster care appeared to achieve higher education success following secondary level education. “Young adults who reported having one or two social workers while in care had lower odds of completing a high school diploma, obtaining any education post-high school, and completing a post-secondary degree than young adults who had three or more social workers. One possible explanation for this is that youths who switched social workers several times eventually found one they felt comfortable with and who was the best fit for them. More specifically, young adults with a strong interest in their academics may be more motivated to seek a caseworker who better fits their needs” (Havalchak, White, O'Brien, Pecora & Sepulveda, 2009).

Another support system which may prove beneficial to a foster child and parent is from one foster child to another. Baker A.J.L, discussed the importance of foster children sharing stories. Through this, the foster child would feel less isolated and feel they have more support. Baker’s research showed that “only in foster care do adults share children with complete strangers, strangers who they then become competitive with and disdainful towards.” Baker, A. L. (2007). Fostering Stories. Support from other children, teens or adult who have been in foster care would be largely beneficial to a child in care. Mitchelle, Kuczynski, Tubbs, and Ross (2010) also noted that the importance of learning about foster children’s views is evident when one consider the expert inside knowledge. Baker also noted that by sharing stories from foster child to foster child, they demonstrated the frustrations, inconsistencies and barriers created by the child welfare system, the foster family and the caseworker who do not always have the same agenda, though both are assumed to be acting in the best interest of the child. “The increasing complexity and diversity of the needs of the young children coming into foster care result in a requirement for a more sophisticated expertise and a strengthened support system for foster parents”
Marcellus, L. (2010). Supporting Resilience in Foster Families

One of the most obvious reasons for difficulties when fostering is the various placements and changes children in foster care endure. James, S. (2004) argues that this disruption and instability is a serious issue that unfavorably affects the lives and outcome of children in foster care placements. James’s study focused on why this happens as frequently as it does and noted the following, “behavior related placement disruption needs to be taken seriously; it is associated with other variables that indicate risk for a foster child. Behavior related placements change could, therefore, serve as a clear marker for needed and immediate intervention” James, S. (2004).

Why Do Foster Care Placements Disrupt?

Foster Children’s Experiences

This study will not focus on children’s experiences in foster care and their perspective due to their vulnerability; it did not appear ethical to do so. However, previous research within this area is available. This research is a foster child’s perspective and advice from them to other foster children, to foster parents and case workers. When addressing case workers the researcher found that children too feel negatively about the case workers.

“Child care workers were advised to consult with children about their placements and ask them for their opinions about issues such as the foster placement context, visitations with original family and preferred school. It was also suggested that children be asked if there is anything they need from their original home during the foster care transition. This suggestion is understandable because a child care workers may not know or be aware of objects of significance beyond those founded on basic needs” Mitchell, M. B., Kuczynski, L., Tubbs, C. Y., & Ross, C. (2010). We care about care: advice by children in care for children in care.

Foster children also expressed the need for information about what foster care will do for them, why they are there and what they hope to achieve by placing a child in care “Providing children with information about foster care and their new home environment may assist children by minimizing ambiguity and subsequent stressful appraisals”. Mitchell, M.B. (2008). The transitioning into care project.
Research Design and Methodology

Aim and Objectives

- The aim of this research is to identify how foster parents feel they are supported in their role.
- The research aims to identify which areas foster parents feel they do not receive enough support in.
- The research aims to show a foster parents view on way’s they feel they could be supported more which will encourage their want to foster again.

According to previous research within this area, foster parents have argued they do not feel supported or trusted within their role which has had a negative impact on their ability to perform their role. “You have all the responsibility but when it comes to making the decision for your foster child…you’re nothing…your powerless… you don’t have a say….And you have to sit back and watch their wrong decisions happen…And then pick up the pieces when it’s all falling apart” (Rosenwald & Bronstein, 2008).

Research Design

The researcher chose to perform a qualitative research study as it was believed that the qualitative research would allow the researcher a more accurate and more personal account of how foster parents feel supported in their role.

“Qualitative research was typically designed to reveal a range of experiences and identify commonalities and differences between groups or individuals” Townsend, A., Cox, S. M., & Li, L. C. (2010). Qualitative Research Ethics.

The purpose of this project is to identify issues raised by foster parents regarding their experiences as foster parents and how they feel they have been supported in their role, if supported at all. Due to this, the researcher felt that engaging with foster parents on a one to one basis would provide a more accurate account of how they feel about their role as a foster parent and most importantly how they feel they have been supported or when they have not been supported in their role.
As there is no hypothesis to prove or disprove, the hope is that an understanding or pattern among participants will be found within the interviews, allowing the researcher make evident the main concerns among foster parents.

**Methodology**

In order to gather the data required, the researcher met with six foster parents. Within the six foster parents interviewed, one foster parent fostered over 20 years ago, however her experience is vital as it will show how support services have developed over time, if at all. One foster parent only fosters new born and infants, this researcher found this area important as fostering children of this age is an immense responsibility and also raises the question of emotional attachment. The remaining four participants have been fostering for over 20 years and will continue do so in the future.

The original aim was to also conduct interviews with social workers working within the area of foster care. Regrettably, when approached many social workers advised that due to time restrictions they would not be in a position to participate. Although the research findings are one sided, the researcher must note that all participants involved were unaware of the other participant’s opinions within this area as interviews were conducted privately and information gathered is strictly confidential.

In doing so, the researcher will be able to evaluate how many of the participants feel the same regarding the amount of support provided to them in their role, therefore showing if the support is needed for people in these role’s or if the support in place is effective.

While social workers were unavailable to participate, the researcher was able to meet with a member of staff from the Irish Foster Care Association. The staff member is not a social worker, however the agency is in place for any queries raised by social workers, foster parents and as a mediation should there be any accusations made within the area of foster care. The staff member is also a foster parent which allowed the interview to have a diverse range of questions and a broader and more detailed response than anticipated.
Design

The researcher has chosen qualitative research as the research is non-experimental and will be carried out by discussing the main topic with those most affected. This will be done by conducting interviews with families who have fostered as they will be the provider for the child. Each participant will be asked ten questions regarding their experiences which will centre around the support they received during this time. The researcher will review the research gathered and note any similarities between interviewee’s creating a theme.

“Qualitative research is a situated activity that locates the observer in the world. It consists of a set of interpretive, material practices that makes the world visible. These practices turn the world into a series of representations including field notes, interviews, conversations, photographs, recordings and memos to the self” Ritchie, J. & Lewis, J. (eds) (2003) Qualitative Research Practice.

The benefit of qualitative research is that it allows the researcher gain a more personal and accurate sense of how people feel regarding being a foster parent.

Ethical Issues

When conducting any form of research, the researcher must be mindful not to offend, upset, embarrass or take advantage of the interviewee’s. The questions asked are often personal, in some cases there may be questions asked and the interviewee may not even discuss the topic with close friends. Privacy is essential. “Human research should never injure the people being studied, regardless of whether they volunteer for the study” Babbie, E. (2010) The Practice of Social Research.

Babbie also noted that other forms of research can argue why it is important the research is carried out such a medical research as it will aid in finding cures and preventions of illnesses. “Social scientists can seldom make this claim and only argue the research may ultimately help all humanity” (Babbie, 2010).

Due to the sensitivity of the research subject, each participant was asked to sign a consent form and allowed an opportunity to view the questions before the
interview began. This was offered to participants as the researcher did not want to upset any participant at any stage within the interview. All participants refused this offer as they felt comfortable that the information provided, such as surnames, names of social workers and most importantly names of foster children was strictly confidential.

Within this research topic of foster care, as previously stated and supported by Dozier et al (2001), the researcher must be mindful that the foster parents are not only fulfilling a role but may have become attached to a foster child and careful consideration must be given within this area by the researcher and also by the caregiver.

**Conducting the Interview**

The researcher met with each participant in their own home as this was convenient for the participants. Upon meeting the participants, the researcher advised each participant that the interview would take no longer than forty minutes and that due to the nature of the research, interviews would be recorded using a Dictaphone to allow the researcher analyse the interviews at a later stage, participants were also asked to sign a consent form agreeing to be interviewed and that the findings within the interviews would be used for an undergraduate study. All participants agreed provided all recording were deleted and not shared with any other researcher for the same area.

When conducting the interviews, the interviewer allowed for the fact that participants may be apprehensive about discussing such a sensitive topic and so encouraged a relaxed conversation regarding their experience. By doing so, the participants opened up more and began to express their opinions regarding their experiences rather than a simple answer to their experience. They gave insight into how it affected them at the time, how they would handle a situation now and also why they choose to continue to foster and for some, why they chose to stop fostering. Due to the interviews taking a conversational approach, the researcher was careful to ensure that all area’s related back to the interview question of support services provided.
Limitations

The limitations within this research were centred mainly on the lack of access to social workers and their being unavailable to discuss the topic. Despite this, the researcher found that foster parents were very open with their experiences which allowed the researcher insight into how social workers behave in their role. Although it must be noted that no social workers participated in this study.

Due to the limitations regarding social workers, perhaps the research may have benefited by conducting a quantitative research analysis as this would have been most convenient for social workers to participate. The issue with this is creating two different questionnaires and measuring both separately.

Method Analysis

Qualitative analysis has allowed the researcher the opportunity to create themes arising within each interview. By doing so, the researcher has created a thematic analysis and made prominent the continuous issues raised within each interview. As previously stated, the research may have benefited by a quantitative research approach, although the researcher argues that it would be impossible to gain a personal perspective on the role of a foster parent, support services provided and the limitations foster parents have regarding how the child is cared for from a quantitative analysis. “Qualitative researchers are interested in understanding how people interpret their experiences, how they construct their worlds and what meaning they attribute to their experiences” Merriam, S.B, (2009). Qualitative Research, A Guide to Design and Implementation (ch1, p5). Showing that while the researcher is conducting a study with foster parents regarding support services, how each participant feels regarding this may be similar but no two participants will be affected in the same way. This is an area which cannot be explored with quantitative research.
RESULTS

This research focused on Foster Parent and their attitudes towards the support services provided to them and the foster child while in their care. By conducting a qualitative research analysis the researcher was able to look for emerging themes within each individual interview. The following is a list of themes which emerged within all six interviews.

Safety

As all of the foster parents interviewed had biological children, the issue of safety was raised for each parent in various ways. Two foster parents raised the issue of bullying by a foster child. "One of our foster children was inclined to be a bit of a bully. I suppose he was a typical foster child. He sought out the weak link which was Jake because he has aspergers." (Ashley, Foster Parent). Despite having a child with special needs Ashley chose to foster to help out other children who she believed needed help but found that her own children may be at risk.

Rose, another foster parent who waited to foster until her own children were older as she felt she didn’t want anything to interrupt their upbringing explained that "The little girl I had was 3 years older than my grandchild but in the same school and was telling my grandchild that she was really ugly and told her that her mother only tells her she pretty to make her feel better, she told my grandchild to look in the mirror and see how ugly she was. My grand daughter’s hair started to fall out and all." (Rose, Foster Parent).

Several participants stressed that they should have been given more information on their foster child’s history. By doing so they felt they would have been better prepared for a situation when it arose and also better able to help their own children deal with such cases. "There had been abuse there but nothing was said to us so I had to put it all in writing to have it dealt with. I think because I worked within the agency at the time I had an inside view of how things work and a better understanding so in a way I was lucky but I don’t know how foster parents do it now." (Breda, Irish Foster Care Association and Foster Parent).
Relationships with Foster Children

Relationships with foster children can be complex due to the nature of foster care. Many foster parents stated that although they knew the child in their care wasn’t there for very long, an emotional attachment develops. This may have occurred due to all foster parents interviewed being biological parents.

However, one foster parent decided that after an emotional attachment so strong she felt she had to give up fostering. "I felt I was getting too attached to Tony and I knew that it was time to stop. Also his mammy was doing better and by the end of the year she had come full circle and we had a great conversation one day were she said “I don’t want to lose home, I’ve lost 2 other children, and I really don’t want to lose him” (Joy, Foster Parent).

Foster parents often find the attachment so strong they want to adopt their foster children. Although this is often difficult as the biological parents of a foster child need to be in agreement, despite not being able to care for a child. Charlotte, (Foster Parent) explains why she sought to adopt her foster child...

He was here short term but it kept being extended and he was here so long that we fell in love with him and we knew we weren’t going to be able to hand him over so I asked the social worker what would happen if the mother didn’t get better and she said that he would go into long term foster care.

Although Charlotte also stated that it wasn't easy, despite having this child in their home for nearly 5 years, their battle to adopt him was solved only due to the foster/adopted child's biological mother choosing them. The HSE has told them, they were too old to adopt but you can foster long term. "They were trusting us to foster him long term but not adopt. So I said no, if I couldn’t adopt him I’m not taking him long term because he would have a different surname, he wouldn’t be entitled to come on holidays with our family." (Charlotte, Foster Parent).
Support Services

Foster parents deal with many conflict situations, but how do foster parents feel they are supported in their role? Many argued that the support provided to them at times was less than adequate in an area which provides safety for children. “I felt your complaints weren’t taken seriously, if you think that a mother is not suitable to take a child a home and you call the social worker, they don’t really listen to you”. (Charlotte, Foster Parent).

“I always felt there was a bit of a gap in that system. I would have to ring the foster child’s social worker and not my own and I always felt the foster child’s social worker was harder to get than my own”. (Joy, Foster Parent).

The area of support services for foster parents shows a difference in opinions among foster parents although the main focus remain the same for all parents. “In my experience I think that kids are well looked after. They each have their social worker who comes with them and they are very good, better than the social worker I would have at times which is important because it all about the children anyway” (Rose, Foster Parent).

Although, one foster couple argue that support services within the area are not good enough. When they noticed inappropriate behaviour with one of their foster children they felt the support services lay idle despite many queries. “We had seen stuff and we went back to the social worker on numerous occasions and said, Are you sure there nothing else, were seeing this behaviour” and they kept saying “No, no nothing we know off, it wasn’t until we got a new social worker who is brilliant and we sat here and had a conversation one day and I said to her I know we are not being told everything, I know that behaviour isn’t normal”. (Ashley, Foster Mother). Following this conversation they felt that again they didn’t get the information they needed. It wasn't until Ashley put her queries in writing via email they received a response. “When we eventually get answers we were told that there was history there with inappropriate touching. The way they portrayed it was he kissed a girl in the school yard because they were all playing kiss chasing. What actually happened was that he had touched another boy which was all brushed over until Ashley started probing for answers. Eventually we were told that his foster mother and her sister
where in the house one day, Nathan and the foster mothers niece were playing in the sitting room and all of a sudden there was quite in the house and they went into see what was going on and Nathan had his trousers off and the little girl sitting on his lap with her trousers off as well and we had been told nothing of that for months. Inappropriate touching they said, and since that they have tried to say that we misunderstood the situation and that is how they speak and that is what they meant all along”. (Barry. Foster Father).

Breda from the Irish Foster Care Association explains how their agency is there to support foster parents although they are not HSE related. “We often state the fact that we are there to ensure the best interest of the child. There is another support agency Epic who provides care for the foster child. There are times when they are supporting children in the home and we are supporting foster parents at the same time so we work very closely with them at times”.

Social Workers

There were many conflicting opinions regarding social workers and their role. Some felt they social workers role was vital and very supportive, some felt they are only of importance for the child in care, despite every foster parent being entitled to their own social worker to aid them in the process. “All foster carer’s are supposed to have a link social worker who is a foster care worker and their support worker from the HSE. They don’t all have a social worker, children are allocated a social worker. Foster parents are told they have a social worker but it just a name on file of a person who looks after that case”. (Breda, Irish Foster Care Association).

The conflicting opinions are not only in the different interview as explained by Rose, “Well some social workers are really good, some couldn’t care less. They listen to you and go along with what you are saying like they are really listening and that’s the end of it. They don’t care once they’ve done their part in answering your call. But then some of them are great so it goes both ways I suppose. My first social worker was great, But then I have a friend who has a social worker who I had before who I thought was brilliant but she finds her crap. And the social worker I have now I like but another friend of mine has the same social worker and she finds her crap as well so you get a mix”. (Rose. Foster Parent).
For one foster parent, her experience shows that social workers maybe sometimes just want the job done regardless of if the job is done right, “We have our own social worker and most the time we have called to say I’m not sure about the mother or if the child will be safe and they have told us “ah, their fine” and they are not fine because they have ended up back in care”. (Charlotte, Foster Parent).

Negative Areas of Foster Care

Although fostering a child can be rewarding and a positive experience, it is not without difficulties. One foster family found it restricted their normal activities with their family. “When our kids were a bit younger every weekend Barry got off we would go off for a drive and do a walk, Barry and Stephen are mad into their hiking but we wouldn’t be doing anything to extreme with them. But Christina didn’t like this and the minute we would be in the car she would want to go home. This went on for weeks until our kids decided they didn’t want to go with her anymore”. (Ashley and Barry, Foster Parents).

Breda felt that although she always done her best for every child in her care that sometimes foster children feel hard done by. “She would say it because she’s a foster child, she thinks she was treated differently even though she had the same treatment as any child in my home, she feels the world owes her”. Despite endlessly encouraging a family unit among her biological children and foster children.

“Once a mother took the baby home, said she was going for a walk then had her mother phone and say they weren’t coming back with the baby and that they were keeping it.” (Charlotte, Foster Parent). A frightening experience for any foster parent.

Positives Areas of Foster Care

Each foster parent expressed that although foster parenting is difficult that they found the experience to be a positive one, for themselves, children in their home and also that the foster child benefited greatly from the experience. “Some children in care don’t have any relationship with their biological parents but the traits that come out down the line shows that it’s in the genes. It is scary to see them go through something when they have no idea why. But I don’t regret fostering at all”. (Breda,
Irish Foster Care Association and Foster Parent). When participants were asked what makes you do this over and over despite the difficulties it can create for your own family the response centred on being able to help others. “It is brilliant when a baby is adopted. I’m not saying it not good when a baby returns to a mother but when you see a couple who can’t have children come into your home to meet this baby they are going to adopt, it’s priceless”. (Charlotte, Foster Parent).

A more emotional and positive aspect to foster caring is when your own child learns not only do they have easy compared to others but when they learn how to communicate better. “Christina our first foster child, her mother just didn’t cope at all and never looked for help so I think it got to the stage where she had no choice before she got help. And I know it can sound silly but I think that helps Shannon to see it’s better to get help now rather than later. And with us encouraging it made it easier for her when she was struggling”. (Barry, Foster Father).

**Summary of Results**

The emerging themes from the samples involved in this research show that while the overall experience as a foster parent is a positive one, the positive area’s emerged when foster parents felt they made a breakthrough with a foster child, when the biological children in the home learned from the experience and when foster parents felt they had helped the foster child. All experiences relating to support provided to them when needed and areas surrounding social workers has had a negative effect on the foster care experience and even made foster parents doubt themselves and their ability to help children in care. Previous research within this area also shows that the participants within this research are not alone in this feeling.

Schwartz paid much attention to the area of foster care workers within their role and her research found that foster care workers have an overwhelming amount of negative thought towards their role. Schwartz research aim was to study the positive subjective experiences and in turn found that her research sample gave a much higher response to their negative areas within their role than the positives within their role.
Discussion

The aim of this research is to discuss with foster parents their experiences as a foster parent and make prominent their feelings regarding support services provided to them, if foster parents feel they have adequate support to fulfill their role as a foster parent and to identify issues foster parent endure within their role. All participants expressed positives experiences regarding being a foster parent, however they noted that many negative experiences while fostering has at times made them question their decision to do so. All participants made a connection between negative experiences and support services provided to them at this time. Most prominent to the researcher when conducting interviews with participants was that, while all participants had several situations which impacted them and their families in a negative way, the overall opinion on being a foster parent was a positive one. Despite the many negative experiences foster parents repeatedly stated they would not change their decision to foster and of the participants still fostering, they said they will continue to do so.

Only one participant within this research spoke of not fostering again due to an emotional attachment to a child and felt that after the child left her care, she could not continue fostering as she felt she really missed the child and that it wasn’t fair to her own children and to herself should a similar situation arise again.

Background

The researcher’s reason for focusing on foster care is largely due to several of the researcher’s family being involved within this area as foster parents. Due to this and seeing firsthand how foster parents can feel very much in the dark about their foster child and their history, foster parents feeling very much isolated from the decision making process and also seeing what is asked of foster parents prompted the researcher to explore the area further with foster parents who are not within the family. The researcher chose to explore outside the family in order to find out if these where common feelings across the board with foster parents.

Participants were asked ten questions regarding their experiences being a foster parent, however as the researcher did not want to prompt question after question, the interviews took a natural flow and this allowed the researcher gain much
more from the interviews than anticipated. Although the researcher was mindful to always draw the conversation back to the support services provided to them at this time. Each foster parent spoke, without the researchers prompting, of support services they would like to see improve and their overall experience as a foster parent, its effects on their biological children, which must be noted was an overall positive one. They spoke of their experiences and changes it has made to their family life. Most importantly and also without prompting from the researcher, each foster parent expressed concerns regarding support services not provided, foster children and issue’s with not having their full history provided and how safety issue’s which were raised when full history of a foster child is not provided and the overall lack of guidelines to adhere to.

As stated by Breda at the Irish Foster Care Association “There is not any clear role for foster parents. You really are taking a child into your own home with a huge amount of issue’s and there is no set guidelines” (Breda, IFCA & Foster Parent). Although Fostering First Ireland state the “fostering is a way of providing a family life for someone else’s child in your own home when they are unable to live with their birth family” (FFI, 2012). This guideline does not provide a full and accurate description of how being a foster parent actually works. In addition to Breda’s statement regarding lack of guidelines, a previous study within this area focuses on ways to approach this matter.

“In a series of interviews with ten foster carers it was established that the traditional support given to foster carers was not valued by them as it was unable to solve the complex issues and state of impasse that often existed. Foster carers desired team-based and inter-disciplinary interventions focused upon them as equals. Prospective foster care support teams need to be explicit about their remit and referral process and have a clear foster carer focus. Such teams can have a positive effect upon the psychological well-being of foster carers, their child management, and upon the children themselves.” (Mc Donald et al, 2003).
Foster Parents on Support Services

“Foster Care Partners recognizes and values the important work that foster carers do in giving children and young people in the care system experience of family life. We place our carers at the heart of what we do and will go the extra mile as and when required. We commit to 24/7 support to our carers and offer a programme of ongoing training and development as they progress through their fostering career”. (Foster Care Partners, 2012).

A mixed feeling among the participants within this research as foster parents change social workers often and find that from foster child to the next, the experiences have been very different. However, when the issue of the child history was raised, foster parents argued that they did not receive enough history to cater to the child’s well being. They also stated that when questioning a child’s history for reasons of safety, social workers were not supportive or helpful and the process was long, despite the child already being in care. When one foster mother experienced difficulty with her foster child, she spoke with her social worker and questioned the child’s history. Although advised at the time, there was nothing to be concerned about, she later found out from the foster child’s social worker that the child in her care had suffered abuse for many years before being placed in care. At this time, Rose felt she must confront her social worker for answers who responded with “Well Rose, if you’d known about the child when I asked you to take her, what would you have said?” Upon advising the social worker that she may have had doubts, the social worker replied “Well there you go, that’s why” (Rose, Foster Parent). Most concerning about this is that the child in care is not receiving the support required to overcome such an experience. The foster parents also have their own children to look after and cannot do so adequately without full details of the child in their care.

“Most children in foster care, if not all, experience feelings of confusion, fear, apprehension of the unknown, loss, sadness, anxiety, and stress. Such feelings and experiences must be addressed and treated early to prevent or decrease poor developmental and mental health outcomes that ultimately affect a child’s educational experience and the quality of adulthood. Systemic orientation for all children entering foster care is proposed as a preventative
intervention that addresses associated experiences of children in foster care” (Bruskas, 2008).

The above statement argues that children in foster care characteristically have concerns which need addressing, in addition to this, some children will have issues previous to foster care and will need support in this area. This support cannot be provided by the carer when they do not know the problem exists.

The HSE have outlined to foster parents that their role as a foster carer goes beyond the normal activities carried out with biological children as they have to “help the child in care understand the reasons for their separation from their birth parents and to express their feelings about this loss in their lives. Carers’ must help foster children to make sense of what has happened and the transition in their world”. Foundation for Fostering. (2011). Irish Foster Care Association. An impossible request of foster parents when details of what the child in the care has been through are not provided.

**Foster Parent and Social Workers**

This link should represent a strong and a child support focused relationship, one which both parties engage in fully to meet the needs of a child in care. As outlined by Irish Foster Care Association, “The social worker is the one with most responsibility as they have a responsibility to both the child in care and also the foster family to provide them with full and up to date details about the child. For the child, they have to ensure they are placing the child within a safe and healthy environment. Carry out assessments previous to the child’s placement and maintain a relationship with the child when placed in care”. (Foundation for Fostering, 2011). To the researcher’s disappointment, you will also note that some of the participants within the research have stated that their experience with social workers has not been positive. In one of the participant’s experiences, the foster parents felt entirely unsupported upon the arrival of their first foster child. Having no previous experience with a foster child in their home, they expected the social worker would provide full information and contacts for the child should they be required. They also thought the social worker would stay at least an hour to help the child settle and be introduced to their new home. Unfortunately their experience reflected a less than enthusiastic
social worker. “For our first foster child, our social worker was on leave so we did not have one. Christina (foster child) arrived with a social worker who stayed about ten minutes. This was her social worker. We had no contact number for her if anything happened or we needed anything. God forbid there had been an accident, we did not know who or where to contact. When our social worker returned we had Christina about four weeks and I was expecting her to contact us. After two weeks of hearing nothing I contacted her.” (Barry and Ashley, Foster Parents). The participants also stated that in part they could be to blame for not asking for information they felt they may need while the social worker was in their home, however as it was their first experience, they felt it should have been provided to them as they were unaware as to what questions should be asked. They feel now they would be in a better position to approach a social worker they feel could be more encouraging in such a transition.

Previous research which focused on social workers and their role’s shows that over all social workers, case workers and those working within the area of foster care are not content in their position. “In general, foster care workers made overwhelmingly negative comments about the larger environment within which their agencies were embedded”. (Schwartz, 2011). If one assumes that social workers of the participants feel this way also, then it is very possible the social worker negative attitudes are having a secondary effect on the participants. This leaves open the opportunity for research to be conducted within the area of social care workers and support for them in their role also. Further research in this area noted that “Without exception, foster parents recognized the need for more effective and efficient communication with caseworkers, as well as between themselves and health and mental health service providers”. (Pasztor, et al, 2006).

**Foster Parents and their Experiences.**

While all participants agreed that their experiences overall were positive, they also stated they felt they did not receive the support they needed in their role. Previous research within this area fully supports the foster parent’s feelings. Rosenwald et al, (2008) findings showed that foster parents do not feel valued, appreciated or trusted in their role and that their frustrations are directed specifically towards caseworkers who they felt did not provide them with necessary information to care for the child in their care and also protect their own children. They also noted they were not included as
parents regarding decision making for the child in their care. Sacrifices made by the foster parents are partly due to the fact that they do not feel trusted in their role.

**Negative Experiences**

As previously noted, each foster parent spoke about being a foster parent as a positive experience, however each foster parent specified several times throughout the interviews that negative area’s of being a foster parent outweigh the positive as it is more likely that when taking a child into your family home it will be a turbulent experience and one which will affect other children in the home. This negative emotion was closely linked with the lack of support provided to them as all participants spoke of the lack of support they received and gaps in the system. Rosenwald et al, (2008) research supports this view of participants as their research found that foster parents found it challenging to partner with case workers for the best interest of the child. “They cited systemic problems including lack of coordination care compound by rigid rules” Rosenwald, M., & Bronstein, L. (2008).

**Positive Experiences**

Positive area’s of foster care as identified by foster parents centered mainly on the ability if being able to care for a child in need and found it to be a rewarding experience. Some also noted that their own children benefited from the experience as it taught them to appreciate the opportunities that are open to them. Charlotte, (Foster Parent) has been fostering for over twenty years and only fosters new born pre adoption babies. Charlotte expressed her positive experiences by explaining that if a new born did not have a foster family to go to, they went into orphanages. No amount of time spent in an orphanage would provide the love, care and attention new babies receive in her home. Research carried out by Dozier et al, (2001) focuses on the area of attachment issue’s for infant in foster care and their results found that the relationship between caregiver and infant’s in care plays a large role in the child’s interpersonal functioning. Making Charlottes concerns regarding for orphanages evidence of how lack of care and attention can be effect infants at a later stage. And although Charlotte felt emotional attachment to those in her care, particularly when in her care for up to a year, Charlotte stressed that her desire to provide care for children at this age outweighed the heartbreak of saying goodbye.
Foster Parents and Safety

“Youth in foster care face significant life challenges that make it more likely that they will face negative outcomes” Williams, C. A. (2011). Mentoring and Social Skills Training: Ensuring Better Outcomes for Youth in Foster Care

On the other hand, Fostering First Ireland states that fostering is providing a family life for a child who cannot live with their biological family. If this is indeed the case why are foster children expected to be faced with a more unconstructive lifestyle? Leve, Fisher & Chamberlain (2009), reports that the “most common reasons for child placement are parental neglect (67%), physical abuse (16%), sexual abuse (9%), and psychological abuse (7%), with much of this taking place in early childhood”. Leve, L., Fisher, P., & Chamberlain, P. (2009). Multidimensional treatment foster care as a preventive intervention to promote resiliency among youth in the child welfare system. Evidence supports the view that children in care are children who have already suffered some form of neglect or abuse and therefore, treatment while in care should be provided. While removing a child from a negative situation will increase their chances of a healthier lifestyle, social workers must address the issues a child in care will have already endured and take steps to provide support for them while in care. In order to provide the best care for a child in foster care, the participants of this study felt that knowing the history of the child in their care would have made a difference to their ability to understand the child’s behavior and temperament and most certainly have allowed them an opportunity to help the child try to overcome their previous circumstances. They also noted that not knowing the history had an impact on the children already in their home. “One of our foster children was inclined to be a bit of a bully. I suppose he was a typical foster child. He sought out the weak link which was Jake because he has aspergers”. (Ashley, Foster Parent). Due to having aspergers syndrome, their biological child was at risk as he didn’t have the tools to cope with a bully.
Previous research within this area showed that foster parents feel they have little or no help and feel they are limited within their role. “Four major concerns were identified by the foster parent participants: (1) the development, health, and mental health needs of the children placed in their care; (2) access to health and mental health services for the children, and continuity in service provision; (3) communication challenges with casework staff and other service providers; and (4) foster parents' role limitations”. (Pasztor, Holliger, Inkelas & Halfon, 2006).
**Strengths Limitations Recommendations and Conclusion.**

**Strengths and Limitations.**

This research aimed to uncover how foster parents feel regarding the support services provided to them during their experience with foster children. As the research used a qualitative method, it allowed the researcher meet with foster parents and discuss fully their personal experiences and gather the appropriate data required to conduct such research.

Qualitative research also allowed the researcher note other areas of concern for foster parents and note the reoccurring patterns throughout the interviews.

This research cannot claim to be a reflection of all foster parents and their experiences as this research was conducted using only six participants. The research would have benefited greatly with participation from social workers and case workers working within the area of foster care. Although it must be noted that, while participation from social workers would have added to the research, the research would nevertheless, not be representative of how all those within the area of social work feel within their role.

**Recommendations.**

Following on from the above research, the researcher believes that further studies surrounding the gap between foster parents, social workers, support services and child history is highly recommended. Perhaps combining a broader qualitative study with a quantitative study would add to the research findings. The quantitative research allows for participants to answer most honestly as there is complete anonymity. Combined with the detail findings of qualitative research, the researcher argues that this would provide a much more comprehensive representation of how foster parent’s feel within their role.
Conclusion.

The researchers aim was to identify how foster parents feel regarding the support services they receive while having a foster child in their care. As noted above, this is a small scale research project and would benefit largely from a more detailed study involving more than six participants.

Although it is a small scale study, the researcher would argue on behalf of the participants points of view as all participants shared the same opinions and beliefs towards support services provided to them. All participants felt negatively with regard to support services provided and much of the research previous to this study also supported the participant’s views.
References


• Fostering First Ireland, (2012). [www.fosteringfirstireland.ie/fostering-information/what-is-fostering](www.fosteringfirstireland.ie/fostering-information/what-is-fostering)


• Schwartz, A. (2011). Foster Care Workers' Emotional Responses to Their Work.

Appendix 1.

A Foster Parents Perspective: An evaluation of support services provided to foster parents while caring for a foster child.

My name is Danielle Devine and I am conducting research that explores Support Services provided for Foster Parents.

You are invited to take part in this study and participation involves an interview that will take roughly 40 minutes.

Participation is completely voluntary and so you are not obliged to take part. If you do take part and any of the questions do raise difficult feelings, you do not have to answer that question, and/or continue with the interview.

Participation is confidential. The interview, and all associated documentation will be securely stored on a password protected computer.

It is important that you understand that by completing and submitting the interview that you are consenting to participate in the study.

Should you require any further information about the research, please contact
STUDENT NAME & DETAILS: Danielle Devine . 1291853@mydbs.ie
SUPERVISORS NAME & DETAILS: Niall Hanlon. Nhanlon@mydbs.ie
Thank you for participating in this study.

Participant Signature: _______________________ Date:___________________
Appendix 2.

Interview Questions

• Why did you decide to foster?

• Do you feel your experience being a foster parent has been a positive or negative experience? And why?

• Do you feel your biological children have been affected by foster children in the home?

• Can you tell me about the longest child you had in your care?

• Can you tell me about the support services provided to you while fostering?

• During your negative experiences, would you argue you had adequate support?

• What has your relationship been like with your social worker during this time?

• Are there any area’s within your experience you would like to see improve?

• What steps do you take to ensure a child in your care feels included and at home?

• How do you feel when a child leaves your care?

• Do you feel your role in a foster child’s life is significant?

• Would you encourage a friend or family member to become a foster parent?

• Do you feel that foster children have enough support provided for them by the
state?