Factors which affect the Retention Rate of Foster Carers

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Abstract
The thesis explored the factors which affect the retention of foster carers. It was based on an interview with two fostering social workers and a survey of foster carers from a particular HSE area. It divided its focus into three areas: (i) the process of becoming a foster carer, examining recruitment, assessment and training; (ii) the reality of fostering examining placement issues from beginning to end, and; (iii) the implications of issues from the previous two areas for social work practice. These areas were explored by combining the research findings with relevant literature and findings from other research studies.

Key words: retention of foster carers, social work

Introduction
Social workers are charged with the responsibility of placing children who are deemed to be ‘at risk’ in care. According to the Irish Social Services Inspectorate (2005), 84% of children who come into care are placed in foster homes, relative or general. This is a significant number. However, significant social and demographic changes in Ireland have affected both the recruitment and retention rate of foster carers. The decline in marriage and birth rates coupled with the increase of women in the workforce, the responsibilities of fostering and insufficient resources for foster parents and children have led to a decrease in the number of people coming forward.
as potential foster parents and in the number of people remaining in the service (Gilligan, 1990; Horgan, 2002). Children come into care for a myriad of reasons including marital breakdown, mental health problems, abuse and neglect. While relative foster carers have a vested interest in caring for their own, general foster carers look after those who are strangers to them. This research is concerned with the latter group. Why do these people put themselves forward as foster parents and what keeps them in the service? In other words, what factors affect the recruitment and retention rates of general foster carers?

**Methodology**

Qualitative methods were used, drawing on Triseliotis et al’s (2000) study of Scotland’s fostering services. Structured questionnaires were also sent to 20 fostering couples. Only five were returned but this represented a quarter of the households targeted. A joint semi-structured interview was then conducted with two social workers based on both the survey and literature findings.

**Historical Overview of Foster Care in Ireland**

Fostering is not a new phenomenon. Up until the late eighteenth century it existed in the traditional form of supplemented kinship under Brehon Law. Horgan (2002) discusses how this changed under the Poor Law system with the introduction of residential care in the form of the workhouse in 1838. The current fostering system has its origins in the Irish Poor Law Amendment Act 1862 (Gilligan, 1990) which introduced the ‘boarding out’ system. Ireland neglected to change the reformatory and industrial school system following independence in 1922 (Powell, 1992; Doyle, 2004). Indeed the Health Act of 1953 reinforced this system by empowering the Health Boards to “have a child cared for either by boarding him out (foster care), by sending him to an approved school, or if the child was over fourteen years old, by placing him in employment” (Horgan, 2002, p.32). This was followed by the introduction of the Boarding out of Children Regulations of 1954 which set down for the first time the obligations of the Health Boards with regard to the ‘boarding out’ or
fostering of children (Horgan, 2002; Giligan, 1990). These are similar to those in force today.

The *Kennedy Report* was published in 1970 and fundamentally changed the Irish child care system. McCarthy *et al* (1996) and Kelleher *et al* (2000) outline the main recommendations of the Report. The emphasis was on de-institutionalisation, family protection, and the setting up of a child-centred system. The preferred solution to residential care was fostering, with residential care to be viewed as a last resort.

The *Kennedy Report* coincided with the 1970 Health Act, which divided Ireland into eight Health Board Regions, each of which provided a programme of community care. Consequently, social workers were given “the primary responsibility for supporting families in need and placing children in care” (McCarthy *et al*, 1996, p.3). Most of the Report’s recommendations were enforced over the next decade. The few remaining institutions were closed down in the years following the report and numbers in residential child care fell dramatically, while those in foster care simultaneously increased (McCarthy *et al*, 1996). This remains the case. In their last annual census, prior to being taken over by the Health Information and Quality Authority (HIQA), the Irish Social Services Inspectorate (ISSI) reported that there were 5,060 children in care at the end of December 2005, 84% of whom were in foster care (ISSI, 2005).

Section 39 of the 1991 Child Care Act obliged the Minister to make regulations regarding the placement and welfare of children in foster care. This lead to the introduction of the Child Care Regulations in 1995. Following the publication of the Working Groups report in 2001, a committee was established which led to the publication of The National Standards for Foster Care in 2003. The Standards form the main basis for best practice and quality in the provision of foster care services.
The process of becoming a foster carer

Recruitment

The first part of this research focused on the process of becoming a foster carer, namely, recruitment, assessment and training. Unlike most HSE areas, this social work office had not run a recruitment campaign for 3 or 4 years. This was due to the surprisingly high number of enquiries and applications they received as well as the limited number of staff they had to carry out the assessments. However, they acknowledged the need to run a campaign to recruit carers from ethnic minority backgrounds as they currently do not have any and have yet to receive any enquiries from these groups.

In terms of foster children, the social workers stated that their biggest problem was recruiting foster carers for children from age ten upwards. They had very few foster carers willing to take teenagers and admitted that these homes were nearly always full forcing them to refer to either private fostering agencies or residential care. The survey findings reflect this. All the respondents only wanted to foster children under twelve, with two only willing to foster babies or infants.

It seems the best method of recruitment is word of mouth. In the Triseliotis et al (2000) study, over half of Scotland’s foster carers said that they had heard about fostering through relatives, friends and co-workers. This finding is reflected by the respondents in this study, the majority of whom first heard about fostering from other foster parents. Other sources included friends, relatives and a church newsletter. It is fair to say that, considering the lack of campaigns run by this social work office, word of mouth is probably their primary source of enquiries. Therefore a positive experience of the fostering system boosts recruitment and retention rates.

Motivation

Motivation to foster is crucial to people’s decision to pursue fostering. It is also central to the retention of foster carers once they begin caring as reminding themselves of why they began to foster in the first place may help them to get through
particularly difficult times. All the respondents to the survey felt they could offer a child a loving home. All had children of their own, some grown up, and wanted to help and care for other children in need. Enabling a child to “have the opportunity of having a normal and better life” was the number one motivation the social workers came across in people applying to be foster carers.

Assessment

The aim of any assessment is to ensure that the applicant is suitable to foster and that fostering is suitable for the applicant. It is a serious task which requires people to examine their personal lives in great detail with someone who is essentially a stranger. It requires great skill on the part of the social worker to handle this process both sensitively and objectively. Establishing a positive working relationship will help forge a partnership both during and after assessment. To do this, the social workers emphasised the need for honesty on both sides. They felt that this was crucial to establishing trust and to dealing with any issues that arose during assessment. The rigorousness of the assessment would reveal any lies or non-disclosures which would undermine both the working relationship and the assessment.

While all the foster carers felt that the assessment content was fair and relevant to ascertain their suitability as foster parents, they all felt it took too long to complete. This ranged from a few months to a year. The National Standards (2003) state they should be completed within four months despite the 2001 Working Group report recommending six months. However, the social workers stated that they were taking up to a year due to staffing levels and the time taken for police checks and medical reports to be returned. Warren (1999) acknowledges that this is a common complaint from prospective foster carers and highlights the danger of applicants “losing interest and drifting away if the assessment process becomes too protracted”. The social workers have found this to be the case as sometimes it is a year or two before they get around to assessing an application, by which time the applicants circumstances have often changed and they no longer want to pursue fostering. It is therefore vital for the
retention of foster carers that assessments are carried out in a thorough but timely manner.

**Training**

All of the foster carers in this study felt that training was beneficial to them. However, two felt that no amount of training could really prepare them for the reality of fostering. But this is true of any profession.

Both the social workers and the foster carers agreed that training provided them with a greater knowledge and understanding of both the child’s and the birth families issues and needs. The foster carers especially valued listening to other foster carer’s experiences. In fact the foster carers wanted more question and answer sessions with experienced foster carers and professionals in order to learn how to deal with specific issues or situations, with particular emphasis on practical advice and information. As well as discussion, these sessions provided the opportunity to develop peer support networks which were helpful in general, but invaluable in times of crisis especially outside of social work office hours.

Given that the majority of children taken into care present with challenging needs and behaviours, it is essential that foster carers receive adequate training, not only to provide a high quality of care, but to help prevent them from being overwhelmed and leaving the service. In fact a number of studies suggest that training has a positive impact on the retention of foster carers (see Warman et al, 2006; Triseliotis et al, 2000; Ogilvie et al, 2006; Pithouse et al, 2002).

**The Reality of Fostering**

The second part of the thesis looked at the reality of fostering. Issues which affect placements and ultimately the retention of foster carers can occur at any time, before, during or at the end of a placement. Placement breakdown can discourage foster carers from continuing with the service while successful endings can encourage their retention.
Placement Planning

(i) Matching

Child protection social workers should submit a Placement Request Form when making a referral which details the reason for the request, the child’s care history, his needs and presenting behaviours. The fostering social workers then use this form to match a child to a foster home. However, child protection social workers often neglect to do so or else fill them out inadequately stating that they are too time consuming and detailed. This lack of information can cause numerous problems with regard to matching, to the professional relationship between the social workers, to the management of behaviours in placement and to the trust between social workers and foster families who feel they have been lied to about the child’s behaviour. Difficulties working with social workers is one reason many carers leave the service.

The choice available for matching can be limited. Difficulties in finding placements for teenagers have already been noted. An increasing issue is the placement of children from ethnic minorities as they do not have any ethnic carers. While there is not a problem with availability in placing ethnic children in Irish families, certain problems in doing so have been encountered by the social workers such as recognising and addressing cultural differences, meeting the cultural and religious needs of the children, and reluctance on the part of foster carers to working openly with the birth families. The problem of having an adequate supply of foster carers to meet various children’s needs is an issue in fostering generally. However, the social workers were keen to point out that if there were placements available but they were not suited to the child they would refuse the request as they would be setting the placement up to fail. The effects of a placement breakdown can also lead to carers withdrawing from the service.
(ii) Placement Plans
Care plans are an assessment of a child’s needs and how they would best be met. A placement plan sets down the roles and responsibilities of everybody involved in meeting those needs. The 2003 National Standards state that they should be completed by both the child protection and fostering social workers with the foster carers for each placement. However, they are not being put in place in practice which may cause role confusion and put pressure on foster carers and the placement as well as negatively affecting the professional relationship between the two social workers.

Placement Issues
There are quite a number of issues which can arise during a placement. The most pertinent ones are discussed below.

(i) Professional Relationships
Foster placements require child protection and fostering social workers to liaise together to ensure that the child’s and fostering family’s needs are met. Clear role definition and open lines of communication ensure successful operation of the system according to the Working Group’s 2001 Report. However, this seems to pose problems in practice. The social workers felt that most child protection social workers were very good at linking in with them but others either minimised their role or did not see them as an important link. The social workers put this down to lack of communication and respect. This caused problems when foster carers raised issues with them which the child protection social workers often ignored. Triseliotis et al’s (2000) study revealed similar complaints from fostering social workers towards child protection social workers. Two main reasons for these tensions were revealed. First, the majority of child protection social workers had insufficient knowledge of fostering and the link workers role. In some cases, the social workers might actively shy away from communicating too closely with link workers as their lack of knowledge might be revealed and undermine their authority on the case. Second, as part of the link workers role is to support foster
families, they were often seen as mediator’s between foster families and child protection social workers when disputes arose, thus affecting the professional relationship between the two social workers. Lack of communication and availability as well as failing to provide comprehensive reports for the purposes of matching also featured as reasons. If problems remain unresolved or tasks uncompleted, it can lead to stress and frustration for foster carers which can make them leave the service.

(ii) Placement Type
With regard to placement type, half of the ten children featured in the survey changed from short-term to long-term fostering. Birth parents having difficulty in overcoming their problems was the main reason for placements types changing, especially if addiction was the issue. A change in placement type significantly impacts on the availability of foster carers. This has resulted in most of their foster carers having more than two placements in their care at any one time, despite Section 10 of the National Standards (2003) stating that no more than two children should be placed in the same foster home at any one time unless they are siblings. Over-placing can put pressure on the placements and may cause one or more of the placements to break down. This has a negative impact on all involved and may lead to foster carers having second thoughts about staying in the service.

(iii) Contact
One of the biggest issues in foster care is the relationship between the foster and birth parents which can often be fraught with tension and adversity. Birth parents are often suffering from separation trauma resulting in feelings of resentment, frustration and a sense of inadequacy and failure coupled with their existing issues. Foster parents resent the birth parents attitudes and behaviours towards them and the effect this has on them, their family and the foster child. The foster child can end up torn between the two sets of parents. However, contact is very important for a child’s identity and possible return home. As Gilligan (2000, p.204) states “You can take the child out of the family, but you cannot take the family out of the child”. While this issue is
covered in assessment and training, in practice this is one of the main issues that puts pressure on placements. Of the foster carers surveyed, at least two had had problems with birth parents at access visits. The social workers stated that they often have to challenge carers to overcome their negative feelings and work towards establishing a positive relationship with birth parents as foster children are not going to stop having contact with their parents, but they also need to support them in doing this. Difficulties with birth parents are another reason many foster carers leave the service.

(iv) Support

Providing support to foster carers and their children are a key part of the social workers role. Practical support and advice regarding behaviour management was the main reason foster carers contacted the fostering social workers. Other areas included contact issues, children’s learning difficulties, seeking additional services and financial support as well as problems with child protection social workers. One issue which compromised the social workers ability to provide support was allegations. As the social worker is the person who writes the report, the foster carers often feel unable to turn to him/her for support and so an independent counsellor is utilised instead.

The foster carers identified a number of supports they currently utilised including social workers, psychology, hospital treatment and play therapy. They focused on their foster children as opposed to themselves. Many wanted more access to psychology and services such as speech therapy and behavioural therapy for their foster children. They also wanted speedier access to these services. With regard to the fostering social workers, the foster carers valued their availability and helpfulness.

Sellick (1999, p.246) states that foster carers “value being understood, respected, listened to and having interest shown in them by the social worker”. He notes that availability, honesty and knowledge were other important attributes sought in social workers. If these factors were in place it lead to a positive working relationship and foster carers were more open to receiving constructive criticism from their link
workers. This is important as the social workers interviewed noted that they were there to challenge foster carers as well as support them. Sellick adds that supportive supervision sessions between foster carers, their link workers and the child protection social workers could benefit all parties in their practice and that peer support group sessions could also be beneficial to foster carers.

Being part of a foster family can have a huge impact on foster carers’ own children but this is one area of support the social workers felt they neglected due to resource and time limitations. While acknowledging that meeting the needs of foster children may be detrimental to the needs of carers’ own children, they felt that, generally, these children were happy to be part of a fostering family. This is reflected by the respondents who all felt that their children were happy and got on well with the foster children in their care. Furthermore, the social workers felt that they would be contacted if any difficulties did arise and could recall only a small number of occasions when they were. They felt that, on the whole, foster carers were very conscious of any impact on their own children and handled it appropriately.

Part (1999) conducted a study on foster carers and their children. The children felt that the positive aspects of fostering for them were companionship, looking after babies and young children and the challenge of helping while the negative aspects included difficult and annoying behaviour, stealing, the attention given to the foster children, the lack of privacy and sharing the foster children with their parents. However, Part found that these children had a high level of tolerance and understanding towards foster children as well as a greater appreciation of their own family. Despite the difficulties encountered, the vast majority of the children enjoyed being part of a foster family. These findings are echoed in other research studies (see Triseliotis et al, 2000; Pugh 1999). In addition, Pugh (1999) notes the positive role children who foster play by being role models for behaviour and providing support to their parents. She also notes that foster children will often disclose information to them before confiding in an adult. Therefore, it is crucial that children who foster receive the necessary support to minimise any negative aspects and enhance the positive.
Placement Ending

The end of a placement is an emotional time for all involved, especially if it is as a result of placement breakdown. Only one placement from the survey had ended and this was planned. The rest were on-going. The success of these placements may be due in part to the fact that the respondents were all fostering children under ten years of age, as the social workers identified challenging behaviour by teenagers as the biggest source of placement breakdowns. Generally, these were young people who had multiple placements in the past or came into care at an older age. However, they recalled one case where a placement broke down because the two young foster children placed were too close in age to the foster carer’s own child, which had a negative impact on him. In fact research shows that placing children of the same age as birth children carried a significantly higher risk of placement breakdown (see Triseliotis et al, 2000). In cases where older foster children were placed, the risk was significantly high if the age gap was less than five years.

Emotional support for foster carers when a placement ends has found to be lacking in a number of studies (see Strover, 1999; Triseliotis et al, 2000; Buckley, 2002; Fahlberg, 2006). The absence of follow-up discussions regarding the placement as well as feedback on the well-being of the children contributed to the emotional turmoil of foster carers, especially where they disagreed with the professionals’ decision to end the placement. However, the social workers in this study recognised the need for emotional support when placements ended and have previously utilised independent counselling services for some foster carers. They also give limited feedback on how the children are doing while respecting the birth family’s right to confidentiality. Some foster carers maintain informal links with the children where a positive rapport has been established with birth family. As unresolved feelings of loss and possible resentment or anger can contribute to a foster carer’s decision to leave the service, ensuring supports are put in place is vital.
Recommendations
The main recommendations for this particular HSE area were as follows: to balance both the positive and negative aspects of fostering as the image of fostering is important for both recruitment and retention purposes; to recruit carers from ethnic minority backgrounds in order to meet the needs of an increasing number of children coming into care; and to include birth parents and/or previously fostered children in training sessions to address issues between foster families and birth families, particularly regarding contact. These service users should also be included in the development of the service; placement plans should be implemented as soon as possible to ensure clarification and accountability of roles and responsibilities; and foster carer reviews should be implemented to ensure a high quality of care for vulnerable children and to identify any issues to be addressed in training as per Section 17 of the National Standards.

Implications for Social Work Practice
While the thesis was a small research project based on one particular HSE area, it is possible to identify certain elements which can be applied to general social work practice. For instance, no matter what area of social work we enter in to we will always have to abide by legislation, policies and procedures. These may not always be easy to apply in terms of time and resources but they are necessary nevertheless to safeguard both the client and ourselves. Despite the limitations they pose for how social workers practice, there is nearly always room for a degree of flexibility in their application. For instance, the social workers in this survey hold training sessions in the evenings to accommodate foster carers availability. As social work is often crisis led and therefore difficult to plan, the need to cope with various situations coupled with the best interests of our clients naturally entails a level of flexibility in our approach to practice.

Resources by their very nature are not infinite and will always be limited. This would be the case even without the current embargo. However, I firmly believe that the best resource we have is ourselves. Even where access to resources for clients is severely
limited, simply being there to listen, to acknowledge their difficulties and to offer as much practical support as possible can be enough in the interim while waiting to access services. Encouraging peer groups to get together and pool their own resources to help each other can also be of enormous help. While continuing to fight for more resources, we must be creative and flexible with the resources we have as well as sourcing those that may be otherwise overlooked.

Respect and communication are key elements of working with other professionals. Knowledge of each other’s roles is central to this as difficulties can arise when professionals have insufficient knowledge of or a lack of respect for each other’s roles. Professionalism and service quality are compromised when individuals fail to respect and communicate with each other. However, professionals also need to challenge each other when either bad practice or poor judgement affects the best interests of the child, which must be paramount.

Foster carers, birth parents, birth children and foster children are all users of the fostering service. However, foster carers and birth children are also providers of the fostering service. As such, we should treat them as partners in the delivery of that service. Therefore the same professional courtesy must be extended to them. Mutual communication, honesty and respect are crucial to establishing and maintaining a positive working relationship. However, as one social worker stated, foster carers need to engage in best practice and be supported and guided in doing so. This also entails being challenged in their practice by link workers and perhaps other social workers or professionals.

The biggest issue appears to be contact with birth parents. It needs to be made abundantly clear to foster carers that birth parents’ rights do not cease upon their child entering the care system. Every effort needs to be made by social workers, foster carers and birth parents to establish as positive a relationship as possible between foster carers and birth parents to ensure that the child does not feel torn between the two families. Involvement in training, direct work and mediation may be useful
methods to achieve this.

The social workers in this study admitted to neglecting the birth children of foster carers. The role of birth children in successful placements is being increasingly acknowledged in fostering literature. Being part of a fostering family can be challenging and children may not always tell their parents when they are finding things difficult. Tools such as play therapy, artwork, life story books and memory boxes can be used to build positive relationships with both birth and foster children, thus making it easier to discuss and resolve any issues which do arise.

**Conclusion**

There are many factors which affect the retention of foster carers, some of which have only been touched upon in this article. The in-depth process of recruitment, assessment and training provides the foundation for a high quality provision of care by foster carers. However, this doesn’t guarantee that they will implement what they have been taught. It is the social workers job to support, guide, challenge and continuously train foster carers to ensure that standards remain high. Ensuring the retention of foster carers necessitates that these processes are implemented in a timely, sensitive and professional manner. Foster carers need to be prepared, supported and trained in issues such as behaviour management and parental contact. Birth parents, foster children and birth children need to be consulted regarding care plans and placement plans and supported in their implementation. Communication between all parties, professionals and service users, is crucial to ensuring that the placement has the highest possible chance of succeeding.

The respondents listed behavioural issues, contact issues and thinking about future problems as negative aspects of fostering. These reflect some of the issues explored above. However, when asked about the positive aspects, all of them stated the joy of seeing a foster child grow and develop into a happier person. This reflects the high level of job satisfaction foster carers can obtain from fostering and cannot be underestimated in terms of carers deciding to continue fostering. In order to achieve
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this, social workers must endeavour to address any issues as they arise, keep communication lines open, to respect, challenge and support the foster carers in their practice and to endeavour to have positive working relationships with both professionals and foster carers. Only by working together can we ensure that we retain a high number of foster carers who are so crucial to a care system in which 84% of children are placed in foster homes.
Bibliography


