

## CHAPTER 8

# Passion for Those Who Care: What Foster Carers Need

*Rob Twigg*

Those researching and writing about child and family services generally focus on the needs of the children coming into care. Some expand that focus to include the children's families, and others include the social systems that impact on them. The needs of those who provide services to these children and their families are rarely the focus of research, writing, or policy. This chapter looks at the needs of one group of service providers: foster carers and their own children. The thesis of this chapter is that fostering can and must become a service that successfully meets the needs of both those who need the service (foster children and their families) and those who provide the care, including foster carers and their families. The chapter focuses on the implications of the needs identified, and on how child and family services agencies could modify the way in which they work with foster carers for the improvement of the system.

---

**SUGGESTED CITATION:** Twigg, R. (2009). Passion for those who care: What foster carers need. In S. McKay, D. Fuchs, & I. Brown (Eds.), *Passion for action in child and family services: Voices from the prairies* (pp. 165-184). Regina, SK: Canadian Plains Research Center.

## THE GROWTH OF FOSTER CARE IN THE CHILD WELFARE SYSTEM

Child welfare services are currently being asked to provide out-of-home care for a large number of children.<sup>1</sup> Across North America and the United Kingdom from the 1970s through the 1990s, there was a significant increase in the number of children and youth entering the child welfare system (Hochmann, Hochmann, & Miller, 2003). The most recent available references are that an estimated 33,000 children were in care in the United Kingdom (Wilson, Sinclair, & Gibbs, 2000) and 500,000 in the United States (Gibbs & Wildfire, 2007; Hochmann et al., 2003; Redding, Fried, & Britner, 2000). In Canada (not including Quebec), there were 76,000 children in care between 2000 and 2002 (Farris-Manning & Zandstra, 2003), an increase from 36,080 in 1997 (Human Resources Development Canada, 1997, cited in Farris-Manning & Zandstra, 2003).

Children who cannot be kept in their family homes, even with the provision of support services, find their way into out-of-home care and, most often, into foster care. While current Canadian data is not available, foster care has traditionally been the major service provider for this population (Twigg, 1991), providing as much as 60 percent of out-of-home care (Gibbs & Wildfire, 2007; Wilson et al., 2000). Wilson et al. noted that, although the number of children in care in the United Kingdom has not changed since 1997, the proportion of children in state care who are being fostered has nearly doubled. While kinship care is a growing subset of foster care—the number of children living in kinship care homes in the U.S. increased 40 percent between 1980 and 1990 (U.S. Bureau of Census, 1991)—this chapter focuses on foster care in non-relatives' homes.

## PROBLEMS IN PROVIDING FOSTER CARE

Cashen (2003) and Manning and Zandstra (2003) both reported that there is a shortage of foster care spaces across Canada due in part to the challenges faced in recruiting and retaining foster families. Manning and Zandstra further noted that an increased length of stay in placement is contributing to this lack of space. A U.S. study showed that the length of stay of children in foster care increased during the 1990s and remained at high levels, with most stays being between 21-35 months (Barbell &

---

1 While recognizing that those coming into the child welfare system range in age from birth to 16, the term children will be used throughout this paper.

Freundlich, 2001). Fuchs, Burnside, Marchenski, & Mudry (2007) stated that children with disabilities in Manitoba remain in care for long periods of time “not because of ongoing risk of maltreatment, but because they have intensive needs for care as a result of their disabilities which communities and services are unable to fully meet” (p. 128).

One outcome of this shortage of foster care spaces is the growing number of children being served through group care and institutional/residential treatment. One study showed that the number of children placed in group and institutional forms of out-of-home care increased by 58 percent in the 1990s (Barbell & Freundlich, 2001). This increase in the use of other forms of out-of-home care implies that there is a shortage of family-based resources, an interpretation that seems valid given the constant attempts by foster care providers to recruit more carers.<sup>2</sup>

Throughout its history, foster care has had its critics. One of the most common criticisms is the treatment children receive in the foster home. In 1994, Van Biema wrote that “foster care is intended to protect children from neglect and abuse at the hands of parents and other family members, yet all too often it becomes an equally cruel form of neglect and abuse by the state” (p. 144). A recent U. S. study (Doyle, 2007) found that children who remained with their parents, regardless of the issues the family faced, experienced fewer delinquencies and teen births and did better in the job market as adults than did children who were placed in care.

It is a bitter irony that a system designed to provide safe and loving homes to children in need of such often places them in as much risk as did the homes from which they were removed. Many reasons can be offered to explain this irony, but these certainly include: not adequately screening newly recruited foster carers; not providing sufficient support and training for them; placing more children in carers homes that they could reasonably be expected to care for; lack of adequate reimbursement for foster carers (Rosenthal et al., 1991, cited in Kendrick, 1994); social work caseloads that are too high for the social workers to be able to adequately support the carers (Cashen, 2003); and often a silo approach to service

---

2 Providers of in-home care will be called foster carers in this chapter. While the term foster family is most often used in North America, I have chosen to use the British term foster carer, as I feel it more accurately reflects the variety of carers, including single persons.

provision that leaves one social worker responsible for the child in care, one for the foster carer, and one for the child's family.

Concerns are also raised about the level of training in child welfare that social workers receive in their academic programs. Tracy and Pine (2000) discussed the challenges facing child welfare education in both agencies and universities. At the university level they cited differences in areas of concentration among schools, with some allowing students to concentrate their learning on child welfare, others focusing on other areas of social work practice and still others taking a generalist practice approach. Armitage, Callahan, & Lewis (2001) discussed the "creative tension" that existed between social work faculties in British Columbia and the provincial government, as the latter tried to ensure that all child welfare social workers would have a Bachelor of Social Work degree, one of the recommendations of the Gove inquiry into the death of Mathew John Vaudreuil, age 5 1/2 years (Government of British Columbia, 1995). Armitage et al. suggested that, in this instance, social work education struggled with a dilemma "... as old as its origins. Does it prepare students for practice under these conditions, or does it prepare students to protest against them?" (p. 11). Recruitment of social workers lacking the necessary academic training to adequately do the work for which they are hired means that, even if the other challenges described above were to be miraculously overcome, an adequate level of care still could probably not be guaranteed. As Allen and Bissell (2004) stated about the U. S. child welfare system:

In too many states, neither the child welfare agencies nor the courts have the trained staff, skills, or resources necessary to make decisions about the care and treatment that is appropriate to meet the individual needs of children and their families. (p. 64)

Although there is less written about the Canadian child welfare system than is written about its counterpart in the United States, conversations with social workers and foster carers suggest that the same statement can be made about the situation in Canada in 2008.

One of the reasons for this shortage of resources and adequately educated staff is the changing needs of the children being fostered. Child welfare in the 1980s was characterized by an emphasis on maintaining children in their familial homes. This emphasis temporarily reduced the

number of children coming into care but meant that those coming into foster care entered care with special needs that presented the foster carers with new challenges (Brown & Calder, 2000; Redding et al., 2000; Wilson et al., 2000). Writing of the situation in Manitoba, for example, Fuchs et al. (2007) stated that “the number of children involved with mandated child welfare agencies who have medical, physical, intellectual, and mental health disabilities has increased dramatically over the last decade” (p. 128). Cashen (2003) found that 66.2 percent of the foster families she interviewed felt that “children’s behaviour is more difficult now than ever before” (p. 143).

Many of the children with special needs are cared for in treatment foster care (TFC) programs designed to address these needs.<sup>3</sup> Treatment foster care is more costly than regular foster care and requires a high level of psychological skills on the part of all staff, including those who provide the family-based treatment. In addition, all members of the TFC team, including the carers, need adequate training and support to deal with the children needing this level of care. For these reasons, TFC has always made up no more than a minority of foster care placements (Twigg, 2006).

As TFC placements fill, children needing similar accommodation are placed in regular foster homes. As these homes fill, child welfare programs can be forced to place children in motel and hotel units. Support and supervision may be provided in these settings, but hotel life is not family life. It does not provide the setting in which new and more appropriate parenting styles can be practiced and children raised in a normalized environment, which is the implicit goal of state interventions that remove children from their parents.

As we have seen, the ability of the child welfare system to provide successful family-based living arrangements for children in need of such is hampered by several factors, one of which is a significant lack of foster carers. This lack has been documented throughout the history of foster care, with the reason for the shortage most often identified as social changes, such as both parents working outside of the home, affecting family life (Testa & Rolock, 1999; Twigg, 1991).

---

3 Treatment foster care programs are known by many names, the most common being treatment family care, therapeutic foster care, specialized foster care, family based treatment, intensive foster care, and parent therapist program.

Foster care programs have responded to this chronic lack of carers in the same way decade after decade, by recruiting new carers. Funding is allocated for recruitment drives, which generally are sufficiently successful to justify continuing them. Most foster care systems have policies that require potential carers to meet certain standards. For example, police checks may be required, work histories and financial statements assessed, family histories studied, and candidates psychologically screened (Anderson, 1982, cited in Kendrick, 1994; Francis, 1991, cited in Kendrick, 1994; Government of Alberta, 2007). Policies are typically in place requiring carers to have a certain level of training before they first take a child into their home. Unfortunately, when these policies hamper the ability to provide placements for kids, the screening and training process is often truncated.

What the emphasis on this front end challenge, the recruitment of foster carers, fails to address is the dropout rate of experienced foster carers. Whatever success the recruitment drives have is diminished by the number of carers retiring. Christian (2002) reported that some agencies have foster carer turnover rates of between 30 percent and 50 percent a year. Although interviews with carers who have retired or who are considering retiring from fostering are rarely done, the information found in the literature discussed to this point suggests that carer views are almost universally shared, and that they leave for reasons that can be grouped under the headings of lack of support, lack of recognition, lack of training, and lack of adequate financial compensation. The remainder of this chapter, after an initial discussion on the development of foster care, expands upon these four needs of foster caregivers. Following this, suggestions are made about ways to deal with these needs, with a view to reducing the loss of trained and experienced carers.

## **DEVELOPMENTAL TRAJECTORY OF FOSTER CARE**

Discussion of the needs of foster carers must start with a discussion of the role of the foster carer in the child welfare system. Foster care, as currently practiced, has its roots in the child-saving movement of the late 1880s. Hutchison and Charlesworth (2000) argued that this was the time of the transition from the economically useful, and even necessary, child to the economically useless, but emotionally priceless, child. Prior to the Industrial Revolution, children from a very young age had a role to play in the family economy and were valued for this. Parents also expected

that their children would provide for them when they were too old or ill to care for themselves, by carrying on the family business and/or providing a place to live and the care needed to sustain life.

The Industrial Revolution brought families into the cities, where increasing numbers of new industrial jobs were emerging. At first, children remained economically necessary as there were many jobs for children—jobs that their size and physical dexterity made them ideal candidates for, regardless of the inherent drudgery and physical danger. Wages were such that, in many instances, the combined income of father, mother, and all children in the family was barely enough for survival.

As the Industrial Revolution continued, children's jobs began to disappear and were taken over by more sophisticated machines. At the same time, social reformers raised public concern about children's working and living conditions, and steps were taken to make changes. Employers were required to provide education for the children they employed, primitive safety standards were introduced and, ultimately, child labour was abolished. This progressive step forward left many unsupervised children on the streets where they were, rightly or wrongly, seen as a nuisance and a menace. Those concerned with the plight of these "street urchins" thought their best interests would be served by removing them from the negative influences of the cities and sending them to rural areas. Placement was with farmers and others who needed extra hands to complete their labours.

In reaction to the criticism of the child protection system that grew as the plight of these "saved" children was recognized, those who took children into their homes were expected to do so out of love for children rather than for any hope of adequate remuneration, whether "in kind" through child labour, or monetarily through the placement agency. Over time, this policy was revised so that the basic cost of raising a child was provided to foster carers by child welfare agencies. This was generally considered to be acceptable, since the philosophy of foster care was that children were placed with loving parents who were motivated by affection and a sense of charity rather than cash. Supervision of the foster placement, when it happened, was rudimentary. Often, the children in care never met the supervisor.

Over time, and as foster care became less of a private venture and more of a state run enterprise, standards for the care of children the state was responsible for were developed, and foster carers were expected to

adhere to those standards. Beginning in the late 1970s, public concern about physical, and later sexual, abuse and corporal punishment meant both that more and more children came into care as a result of their parents abusing or maltreating them<sup>4</sup> and that the monitoring of foster homes increased. Standards were put in place to forbid carers from physically touching children both because of the fear of abuse and the recognition that abused children might well misinterpret the carer's behaviour. Concerns about the living environment of the child in care led to policies regarding living space, the number of children allowed to be fostered by one family, play space, fire safety, and others.

Concerns about nutrition found their way into foster care policies, and nutritional standards for meals served to children in care were set. The growing awareness of the importance of maintaining one's religious and/or cultural heritage—and the political struggles that ensued from this—placed expectations on the carers to be aware of, sensitive to, and supportive of the religious/cultural heritage of the children residing in their homes (Brown & Calder, 2000). The fostering paradigm shifted from exclusive to inclusive fostering, setting out expectations that foster carers would be ready and able to work with the biological parents of the children in their care (Brown & Calder, 2000; Ryan, McFadden & Warren, 1980; Wilson et al., 2000).

The shifting social and political motivation behind many of these changes has led some to describe child welfare policy as being a pendulum (Finholm, 1996; Patterson, 1999; Trocmé & Chamberland, 2003; all cited in Dumbrill, 2006). Dumbrill reported on how child welfare in Ontario shifted in 10 years from being based on the "rule of optimism," which is a strengths-based approach to practice (Dingwall, Eekelaar & Murray, 1983, cited in Dumbrill, 2006, p. 6) to the "rule of pessimism" (Reder et al., 1993, cited in Dumbrill, 2006), which is based on a deficit model.

This developmental trajectory of the regulation of foster care has created a debate as to whether foster carers are volunteers or professionals. Although policies and standards affecting foster carers, and public

---

4 Although public attention has been focussed on the plight of sexually abused children, that population has never made up much more than 25 percent of children brought into state care. Neglect is by far the most common reason for removing children from their parents' care.



expectations of what they should and should not do, have been growing over the years, foster carers are still seen in many places as volunteers fostering for the love of the child. This debate is beyond the scope of this chapter, but it should be noted that the place of the foster carer subsystem within the larger foster care system does influence the decisions made regarding support and recognition, the topics foster carers identify as most important to them. Redding et al. (2000) indicated that these factors not only contribute to satisfied foster carers but also to successful placement outcomes, the goal of the foster care system.

This chapter is based on the assumption that foster carers are professionals and deserve to be treated as such. Foster carers are a significant subsystem of the foster care system (Twigg, 1991). They provide 24-hour care for the children in their care and have insights and understandings based on that care that need to be recognized. Whatever the long term goal of the placement, whether return to the biological family, adoption, institutionalization, or independent living, providing the child with the support, role modeling, and often the training needed to meet that goal is done most regularly and most consistently in the foster home and by the foster carers.

## **FOUR NEEDS OF FOSTER CAREGIVERS**

### **Need for Support**

Critics of the foster care system often point to the lack of support foster carers receive from the placement agencies as one of the main reasons foster carers give for retiring from fostering (Cashen, 2003; Chamberlain, Moreland, & Reid, 1992; Martin, Altemeier, Hickson, Davis, & Glascoe, 1992; Walter, 1993). Gibbs and Wildfire (2007) reported that a less-than-satisfactory working relationship with foster care agencies is “the most commonly cited factor affecting foster parents’ decision to cease foster parenting” (p. 588). Rindfleisch, Bean, & Denby (1998) found that seven of the fourteen factors they identified as predicting why foster parents would leave fostering were related to the relationship between foster parents and the agency. Brown and Calder (2000) asked foster carers what they need to be good foster carers. One set of answers clustered around “support from social services.” Wilson et al. (2000) stated that “the provision of effective support becomes a moral imperative; irrespective of any effects it may have on recruitment, effectiveness, and retention of foster carers” (p. 207).

As has been noted, fostering has become more challenging over the decades, both because of the increasing needs of the children brought into care, the increased expectations placed on the carers, and the monitoring of their work both by foster care agencies and the general public. These increasing demands need to be balanced by the creation of an environment in which carers receive the training, understanding, reimbursement and personal and familial support they need (Redding et al., 2000)

Foster carers need a place where they can debrief after serious issues and where they can celebrate successes. Wilson et al. (2000) identified six potentially stressful fostering events for which foster cares need support: “(placement) breakdowns or disruptions, allegations, relations with birth parents, family tensions, ‘tug of love’ cases, and other disagreements with social services” (p. 193).

Foster carers need to be able to relate to others who will understand the nature of fostering and be able and willing to support them (Redding et al., 2000; Twigg, 1991; Wells & D’Angelo, 1994). For example, they need support in grieving the loss of a child from their home, whether from graduation, placement failure, allegations of abuse, or death. Edelstein, Burge & Waterman (2001) suggested that unresolved grief caused by the lack of recognition of and support for the foster carers’ grief is a reason many carers retire from fostering.

Family units are generally thought of as being subsystems of larger family systems. These larger family systems are often sources of support for families as they go through the challenges of living. Brown and Calder (2002) found that foster families reported that having supportive extended families contributed to their success and longevity in fostering. Practice experience shows that many foster families do not have such supportive extended families. Foster care agencies can provide the forum for such support through ongoing support/training groups for foster carers. Brown and Calder (2002) found that the foster parents they studied indicated that they valued the support they received from other foster parents. Social workers can also provide such support if they are trained to recognize the need and are mandated to provide the support.

One challenging area in which foster carers need support is that of allegations of abuse, whether physical or sexual (Wells & D’Angelo, 1994; Wilson et al., 2000). Wilson et al. reported that an estimated one in six foster carers in the United Kingdom will have to deal “with a complaint

or allegation" (p. 195) at some time in their fostering career and that this incidence rate is growing. As far back as 1992, researchers (e.g., Carbino, 1992) found that foster carers were more likely to be reported for allegations of child abuse and neglect than were biological families. Brown and Calder (2002) found that 70 percent of the families they studied were concerned about being accused of abusing children in their care. Rindfleisch et al. (1998) found that this concern was one of the factors that influenced the decision of some foster carers to retire from fostering.

Some children who come into the foster home as victims of abuse or neglect behave in ways that contribute to their revictimization in the foster home. Some of these children may also pose risks for the abuse of other children in the home, both foster and biological children. The foster carers, including their children and their support network (e.g., respite care, extended family, friends) need training and support in how to recognize and respond to such behaviour. They also need support during the investigation of complaints against them, something that neither the agency nor the social workers can legally provide in most North American jurisdictions. In the United Kingdom, a program titled the National Foster Care Agency (National Foster Care Association, 1993; Robertson & Moody, 2007) provides such training and support. No such support exists in North America.

### **Need for Recognition**

One of the consequences of being given the status of volunteer in what has become an increasingly professional child welfare system is that the foster carer is seen as someone whose contribution is highly valued, but someone without the credentials to make a valuable contribution to a professional dialogue (Seaberg & Harrigan, 1999; Wells & D'Angelo, 1994). As one foster parent stated, "The chain of command doesn't lead to the people who can actually change the problems in the system. We (foster parents) have no input, we either have to accept the way things are or get out" (cited in Cashen, 2003, p. 144). This lack of recognition leaves the foster carer either excluded from case conferences and other planning meetings, or grudgingly granted the status of observer at such meetings. Gibbs and Wildfire (2007) reported that having no voice in planning for the children in their care was a reason cited in their study for leaving fostering. Brown and Calder (2002) found that most of the foster parents

they studied wanted to be involved in making decisions that affected children in their care. Only half felt they were treated as professionals.

Foster carers repeatedly complain of being overlooked and of their voices not being heard when decisions are to be made regarding the children in their care. Gibbs and Wildfire (2007) reported that social workers who do not clearly communicate their expectations and treat foster carers in a “condescending manner” are two of the primary reasons foster carers give for leaving fostering. This lack of recognition makes the foster carers feel insignificant and lacking in validation for their commitment to the child. In addition, lack of recognition for their efforts while working with more difficult children under the increasing scrutiny of the foster care agency is a recipe for disillusionment, placement failure, burnout, and retirement from fostering.

An example of this lack of recognition and its impact on the recruitment and retention of foster carers is the status of foster carers’ own children, called the “unknown soldiers of foster care” by some (Twigg, 1994). Foster carers told Brown and Calder (2000) that among the supports they need to be good foster carers was support for their own children. Concerns about the impact of fostering on their children are one of the main reasons carers give for retiring from fostering (Twigg, 1994; Twigg & Swan, 2007). Children of foster parents report that social workers don’t know their names and show no interest in them when they come to visit the foster child. If social workers don’t know the names of the foster carer’s own children, how can they help the carer and his/her children to deal with the challenges of fostering? Indeed, how can they expect to retain the foster family? One study (Swan, 2002) showed that as many as one-third of the foster carers’ children interviewed indicated that they would not consider becoming foster carers because of the way they were treated by the social workers. Thus, the lack of recognition by social workers of foster carers’ own children both contributes to the retirement of foster carers and significantly reduces one pool of potential foster carers, a pool of people with first-hand experience of the challenges of fostering.

### **Need for Addressing Financial Concerns**

The financial concerns expressed by foster carers are of three varieties: 1) lack of adequate reimbursement for the work that they do (Brown &

Calder, 2002; Gibbs & Wildfire, 2007; Rindfleisch et al., 1998); 2) lack of adequate compensation for expenses associated with fostering (Brown & Calder, 2000); and 3) a frustrating bureaucracy that makes it difficult to get approval for expenses associated with fostering and creates delays in receiving reimbursement (Rindfleisch et al., 1998).

The question of adequate reimbursement for the work being done is directly related to the previous discussion of the status of the foster carer in the foster care system. If carers are volunteers who work for the love of the child, they need no material reimbursement. If they are recognized as part of the foster care system, the reimbursement should be consistent with their status in the system and what is expected of them. If they are professionals, they should be paid a wage in keeping with the requirements of the job.

As in all forms of employment, the rate of pay is understood to reflect the value the employer, and thus society, places on the job, in this case fostering. Brown and Calder (2002) reported that 44 percent of the foster parents they studied felt they were not adequately compensated for their services. Cashen (2003) found that many of the foster parents she interviewed felt that the “current per diem rates were an insult to foster parents who provide exceptional care to children” (p. 147). If the rate of pay foster carers receive both fails to cover the actual costs of fostering and is not competitive with wages paid in the workplace, many will not be able to enter fostering, and many foster carers will have to retire in order to achieve an income adequate to support their desired lifestyles and work in a field with more public recognition.

It is the lack of fit between what they receive and what they are expected to do that seems to be at the heart of the reimbursement issue (Seaberg & Harrigan, 1999; Wilson et al., 2000). Foster carers are most often paid on a per diem basis, where they receive reimbursement for the number of children they have in their home per day. Some are paid on a contract basis where their services are contracted for the period of time the child is in the home; others are paid on a salary basis, where they are seen as employees of the foster care agency. Per diem rates rarely cover more than the anticipated costs of fostering, contracts sometimes include benefits, and salaries usually include benefits. It is increasingly common for the demands of fostering to require that a carer be at home, or at least on call, 24 hours a day, making it impossible for them to work outside of

the home, alongside of fostering. To the extent that the rate received for fostering is less than the income they could receive in the workplace, it often becomes financially impossible for the carers to continue fostering.

Which of these reimbursement models is the best and what the proper amount of reimbursement should be is beyond the scope of this chapter and may well vary given the geographical area the fostering is being carried out in and the nature of the children in care. However these decisions are made, the process should be transparent and the reimbursement should accurately reflect the nature and value of the work provided.

The issue of reimbursement for expenses related to fostering should be dealt with by each fostering agency so that what is considered a reimbursable expense is clearly spelled out and accurately reflects and adequately covers the expenses related to fostering. The reimbursement system should also be clearly understood by all and should contain no unnecessary impediments. It should also be recognized that unexpected expenses may be incurred, sometimes on an emergency basis.

### **Need for Training**

It stands to reason that the need to provide adequate training for the carers increases as the needs of the children entering the foster care system become more challenging, as more is known about how to care for the varying physical, mental, and emotional challenges these children bring with them into the foster home, and as the expectations about how to manage a foster home have increased (Twigg, 1991). As discussed previously, this need has been addressed at the policy level, but reports from the foster carers indicate that the product being delivered is inconsistent, not sufficiently ongoing, and, all too often, too little, too late (Gibbs & Wildfire, 2007; Wells & D'Angelo, 1994).

In most if not all North American jurisdictions, training is to begin before the carers first have a child placed in their home. This initial training tends to be focussed on the policies and expectation of the agency and is seen as orientation. Some training may be given regarding how to identify, understand, and respond to the needs of the children to be cared for. As we have seen, the realities of the demands for placements often truncates this process so that carers have a child placed with them before going through basic orientation. Ongoing training is also hampered by many factors such as lack of resources, scheduling problems, transportation issues especially for those fostering in rural areas, and a lack of

priority given to training by the foster care system.

Redding et al. (2000) reported regarding treatment foster care programs that

[W]ithout appropriate and sufficient training for foster parents, early termination is likely. Studies have found that training reduces the number of unsuccessful placements and increases the retention of TFC parents in the program, with the probability of a desired outcome increasing in direct relation to the amount of specialized training received. (p. 439)

The lack of timely, consistent, and relevant training is a contributing factor to both carers retiring from fostering and the complaints made against carers for improper treatment of children in their care. It seems likely that a proper training program has many benefits, including support and supervision for the carers. In addition, a proper training program provides accountability—the agency is more accountable for the services it provides to the carers, and the carers are more accountable for meeting the agency's standards.

As mentioned earlier, one area of increasing concern for foster carers, and one that reflects both support and training needs, is allegations of abuse in the home. Both the allegations and incidence of abuse in foster care are significant, with some researchers suggesting that the incidence of abuse in foster homes is at least as great as that in the homes of the general public. These allegations and incidents can involve a foster carer, carer's child, extended family member, alternate caregiver (e.g., respite care), or other foster child. Kendrick (1994) documented this issue as it was 14 years ago, referencing both Canadian, U.S., and U.K. studies that addressed the need both for adequate training to deal with what can become a sexualized relationship within the foster home and how to deal with the aftermath of the relationship—the investigation, possible closure of the foster home, and possible criminal charges. In the U.K., the National Foster Care Association provides both training in how to handle allegations and support for carers who are alleged to have abused or allowed abuse to occur in their homes (National Foster Care Association, 1993; Robertson & Moody, 2007). Although North American foster carers face similar issues, a body similar to the NFCA does not exist on this continent.

## WHAT TO DO

This chapter has presented the items that foster carers indicate influence their decision to leave fostering, as reported in the few published foster carers' exit interviews, the author's experience in the field, and anecdotal reports. These three knowledge bases show that the same concerns are voiced by those considering leaving and by those who give no indication that they are considering leaving fostering. If fostering is to survive as a means of providing out-of-home care, it is necessary that these concerns be recognized by the foster care system and steps be taken to bring about the necessary changes.

As many of these concerns relate to the status of the foster carer in the foster care system, how that question is addressed is critical. Foster carers are facing increasing demands on their time, resources, and skills, as the needs of the children they are being asked to care for increase and as the scrutiny they undergo by the placement agency, the government, and the general public increases. In spite of this, their place in the foster care system all too often remains one of a volunteer, a service provider whose service is valuable but who do not have a place at the decision-making table.

If the carers' role were seen as significant and if they were seen as being at least as expert about the way to best provide daily care for the foster child as the other professionals in the system are about their own areas of expertise, many positive changes would likely occur. First, the carers would be more satisfied with their work and would be less likely to retire. Second, it would be easier to recruit new carers as reports of satisfaction from existing foster carers would significantly influence the decision-making of those considering fostering. Finally, and most importantly, the services provided to the foster child would improve; the outcomes of being in care would be more positive, and the long term personal, interpersonal, and societal consequences of fostering failure reduced.

Reimbursement is another issue regularly raised by the carers. Carers need to be adequately reimbursed for their time and work. The per diem system still used in many programs was designed at a time when society expected one middle-class parent, usually the wife, to remain home in a care-giving role. Currently, it is possible, and even necessary, for both spouses to work outside the home to maintain middle-class status. Thus, a reimbursement system based on one member making a "living wage" is out-of-date.



The increasing demands on foster carers also make it necessary to revisit the reimbursement scheme. Reimbursement systems such as contract work and part or full employment need to be seriously considered, and the state, whose children are being cared for by the foster care system, needs to provide the resources necessary to provide adequate care for its children. Once the state makes this commitment, the foster care agencies will be in a better position to properly reimburse the carers.

Training of foster carers is another area of concern that is often reported. As the demands on the foster family increase, the support services available to them must be increased accordingly (Twigg, 1991). Redding et al. (2000) summarized a series of studies that show foster carers are more satisfied with their work if they have a supportive group experience. One of these support systems is ongoing and relevant training.

There are many challenges to be faced in making such training possible, including finding adequate training materials, competent trainers, and a mechanism for providing training that is responsive to such things as schedule conflicts and fostering in rural and remote locations. On-line programs, chat rooms, and distance education facilities could be used to overcome some of these challenges.

## FINAL WORD

As long as the child welfare system remains as it is, it can be expected that 60 percent of children in care will be in foster care. If the needs of these children and their families are to be met, a trained and dedicated cadre of foster carers is required. This cadre can only be successfully recruited and retained if the needs addressed in this chapter are met. Until they are, we will continue to struggle with the challenges of recruiting and retaining qualified carers. Those carers who remain will continue to struggle with the various forms of stress discussed in this chapter, all of which are caused by this poorly structured and under-funded service.

## REFERENCES

- Allen, M., & Bissell, M. (2004). Safety and stability for foster children: The policy context. *Children, Families, and Foster Care*, 14(1), 49-73.
- Armitage, A., Callahan, M., & Lewis, C. (2001). Social work education and child protection: The B.C. experience. *Canadian Social Work Review*, 18(1), 9-24.
- Barbell, K., & M. Freundlich. (2001). *Foster care today*. Washington, DC: Casey Family Programs.

- Brown, J., & Calder, P. (2000). Concept mapping the needs of foster parents. *Child Welfare, LXXIX*(6), 729-746.
- Brown, J., & Calder, P. (2002). The needs and challenges of foster parents. *Canadian Social Work, 4*(1), 125-135.
- Carbino, R. (1992). Policy and practice for response to foster families when child abuse or neglect is reported. *Child Welfare, LXXI*(6), 497-509.
- Cashen, C. (2003). Foster parent satisfaction in Nova Scotia. *Canadian Social Work, 5*(2), 138-150.
- Chamberlain, P., Moreland, S., & Reid, K. (1992). Enhanced services and stipends for foster parents: Effects on retention rates and outcomes for children. *Child Welfare, 71*, 387-401.
- Christian, S. (2002). Supporting and retaining foster parents. NCLS State Legislative Report: Analysis of state actions on important issues, 27(11). Retrieved June 3, 2008, from <http://www.ncsl.org/programs/cyf/fosterparents.pdf>
- Doyle, J. (2007). Child protection and child outcomes: Measuring the effects of foster care. Forthcoming, American Economic Review. Retrieved April 29, 2008, from [http://www.mit.edu/~jjdoyle/doyle\\_fosterlt\\_march07\\_aer.pdf](http://www.mit.edu/~jjdoyle/doyle_fosterlt_march07_aer.pdf)
- Dumbrill, G. (2006). Ontario's child welfare transformation: Another swing of the pendulum? *Canadian Social Work Review, 23*(1-2), 5-20.
- Edelstein, S., Burge, D., & Waterman, J. (2001). Helping foster parents cope with separation, loss and grief. *Child Welfare, LXXX*(1), 5-25.
- Farris-Manning, C., & Zandstra, M. (2003). Children in care in Canada: A summary of current issues and trends with recommendations for future research. Ottawa, ON: Child Welfare League of Canada. Retrieved April 29, 2008, from [http://www.nationalchildrensalliance.com/nca/pubs/2003/Children\\_in\\_Care\\_March\\_2003.pdf](http://www.nationalchildrensalliance.com/nca/pubs/2003/Children_in_Care_March_2003.pdf)
- Fuchs, D., Burnside, L., Marchenski, S., & Mudry, A. (2007). Children with disabilities involved with the child welfare system in Manitoba: Current and future challenges. In I. Brown, F. Chaze, D. Fuchs, J. Lafrance, S. McKay, & S. Thomas-Prokop (Eds.), *Putting a human face on child welfare: Voices from the prairies* (pp. 127-145). Prairie Child Welfare Consortium [www.uregina.ca/spr/prairiechild/index.html](http://www.uregina.ca/spr/prairiechild/index.html) / Center of Excellence for Child Welfare [www.cecw-cepb.ca](http://www.cecw-cepb.ca)
- Gibbs, D., & Wildfire, J. (2007). Length of service for foster parents: Using administrative data to understand retention. *Children and Youth Services Review, 29*(5), 588-599.
- Government of Alberta. (2007). Becoming a foster parent. Retrieved May 14, 2008, from <http://www.child.alberta.ca/home/884.cfm>

- Government of British Columbia. (1995). Executive summary: Report of the Gove Inquiry into child protection in British Columbia. Retrieved May 18, 2008, from <http://www.qp.gov.bc.ca/gove/govevol1.htm>
- Hochmann, G., Hochmann, A., & Miller, J. (2003). Foster care: Voices from the inside. Commissioned by the Pew Commission. Retrieved January 18, 2008, from <http://pewfostercare.org/research/voices/voices-complete.pdf>
- Hutchison, E., & Charlesworth, L. (2000). Securing the welfare of children: Policies past, present and future. *Families in Society*, 81(6), 576-585.
- Kendrick, A. (1994). Fostering assessment in the context of child sexual abuse: A literature review. Retrieved May 25, 2008, from <http://www.sircc.strath.ac.uk/research/kendrick.html>
- Martin, E. D., Altemeier, W. A., Hickson, G. B., Davis, A., & Glascoe, F. P. (1992). Improving resources for foster care. *Clinical Pediatrics*, 31, 400-404.
- National Foster Care Association. (1993). *Making it work*. London: National Foster Care Association.
- Redding, R., Fried, C., & Britner, P. (2000). Predictors of placement outcomes in treatment foster care: Implications for foster parent selection and service delivery. *Journal of Child and Family Studies*, 9(4), 425-447.
- Rindfleisch, N., Bean, G., & Denby, R. (1998). Why foster parents continue and cease to foster. *Journal of Sociology and Social Welfare*, 25(1), 5-24.
- Robertson, S., & Moody, S. (2007) Managing allegations—can we make a difficult experience more positive? The Fostering Network, Scotland. Workshop presented at the International Foster Care Association 2007 European Training Seminar, Malta, November 18, 2007.
- Ryan, P., McFadden, E., & Warren, B. (1980). Foster families: a resource for helping parents. In A. Maluccio & P. Sinanoglu (Eds.), *The challenge of partnership: Working with parents of children in foster care* (pp. 189-199). Washington, DC: Child Welfare League of America.
- Seaberg, J., & Harrigan, M. (1999). Foster families' functioning, experiences and views: Variations by race. *Children and Youth Services Review*, 21(1), 31-55.
- Swan, T. (2002). The experience of foster caregivers' children. *Canada's Children*, Spring, 13-17.
- Testa, M., & Rolock, N. (1999). Professional foster care: A future worth pursuing? *Child Welfare*, LXXVIII(1), 108-124.
- Tracy, E., & Pine, B. (2000). Child welfare education and training: Future trends and influences. *Child Welfare*, LXXIX(1), 93-113.

- Twigg, R. (1991). The next step in foster care. *Journal of Child and Youth Care*, 6(1), 79-85.
- Twigg, R. (1994). The unknown soldiers of foster care: Foster care as loss for the foster parents' own children. *Smith College Studies in Social Work*, 64(3), 297-313.
- Twigg, R. (2006). *Withstanding the test of time: What we know about treatment foster care: A Monograph on treatment foster care*. Hackensack, NJ: Foster Family Based Treatment Association.
- Twigg, R., & Swan, T. (2007). Inside the foster family: What research tells us about the experience of foster carer's children. *Adoption and Fostering*, 31(4), 49-61.
- U.S. Bureau of Census. (1991). *Current population reports: Marital status and living arrangements: March 1990* (Series P-20, No. 450). Washington, DC: U.S. Government Printing Office.
- Van Biema, D. (December 2, 1994). The storm over orphanages. *TIME Magazine*, 144.
- Walter, B. (1993). *In need of protection: Children and youth in Alberta*. Edmonton, AB: Children and Youth Advocate.
- Wells, K., & D'Angelo, L. (1994). Specialized foster care: Voices from the field. *Social Service Review*, 68(1), 127-144.
- Wilson, K., Sinclair, I., & Gibbs, I. (2000). The trouble with foster care: The impact of stressful 'events' on foster carers. *British Journal of Social Work*, 30, 193-209.