CHARACTERISTICS, OUTCOMES AND MEANINGS OF THREE TYPES OF PERMANENT PLACEMENT – ADOPTION BY STRANGERS, ADOPTION BY CARERS AND LONG-TERM FOSTER CARE

Nina Biehal, Sarah Ellison, Claire Baker and Ian Sinclair
Social Policy Research Unit, University of York

Aims of the study

This study addressed the key question of how best to meet the needs of children who cannot safely be reunited with their parents. It aimed to answer two further questions which follow from this:

- How successful are adoption and long-term foster care, respectively, in providing security and permanence, and in promoting positive outcomes for children?

- How do children perceive the emotional and legal security and sense of permanence offered by different types of permanent placement?

To answer these questions, the study compared three types of permanent placement: adoption by strangers, adoption by carers and long-term foster care.

Study design

The study explored the different pathways that children follow through, and in some cases out of care, and the outcomes associated with these pathways. It compared the emotional, behavioural and relationship difficulties of children in each type of placement, their participation and progress in education and the stability of their placements. It also explored how children make sense of being fostered or adopted, their perceptions of belonging and permanence. In order to explore these issues we:

- Conducted focus groups and interviews with managers, staff and foster carers in seven local authorities;

- Analysed local authority administrative data on our *census sample* of 374 children;

- Conducted a postal survey of the carers and social workers of 196 children in our *survey sample:* these children had all been in foster care in 1998/1999 and, three years later, had still been living in the same foster placements (their 'index' placements) or had been adopted by strangers or their foster carers;

- Analysed historical data collected on 90 of the children in our *survey sample*, who had been previously surveyed in the York studies of foster care conducted five and eight years earlier;

- Interviewed 37 children and their foster carers or adoptive parents.

department for
children, schools and families

Pathways through care

Our analysis of administrative data on the 374 children in our *census sample* showed that, seven or more years after they entered their index foster placements:

- 45 per cent of the children in the study had left the care system through adoption (36 per cent), reunification with birth parents (less than five per cent) or Residence Orders (less than five per cent)

- 32 per cent were still settled in their long-term foster placement (our 'stable foster care' group);

- 23 per cent had left their index foster placements after living in them for three or more years (our 'unstable care' group).

Our postal survey of carers/adoptive parents and social workers of the 196 children in our survey sample provided more comprehensive information about children's pathways.

- 22 per cent of the children were fostered by relatives or looked after by them on Residence Orders,

- 18 per cent of the children who were no longer looked after were cared for by their former foster carers (either adopted by carers or on Residence Orders).

The pathways taken by children were significantly associated with their age at last entry to care. Children adopted by strangers had last entered care significantly younger (mean age 1.5 years) than those adopted by carers (mean age 3.1 years), in stable foster care (mean age 3.9 years) or in the `unstable care' group (mean age 5.3 years).

Among those children who had left the care system by the time of our *survey*, over one third continued to live with their former foster carers, who had obtained adoption or Residence Orders for them. In total, therefore, 72 per cent of our *survey sample* had been settled with the same carers for seven or more years, either in stable, long-term foster placements or remaining with their former foster carers under a new legal order. The proportion of children in the wider population who settle in stable placements with (current or former) foster carers may be somewhat lower than this, however, as our *survey sample* included a higher proportion of children adopted by their foster carers than is the case nationally. Nevertheless, when assessing stability it is important to take account of those children who leave the care system but remain with former foster carers under an adoption or Residence Order.

One quarter of the children in the *survey sample* were disabled, half of whom had learning difficulties. Most of these children were in stable foster placements or had been adopted by their former foster carers. Overall, there was no difference in the proportion of children who were disabled among those who were adopted and those in stable foster care (29 per cent in each group).

What influenced decisions about adoption?

Children were more likely to be adopted if they had last entered care at a young age and lived in certain local authority areas. Nearly two-thirds of the children adopted by strangers had last entered care before they were one year old, as had half of those adopted by carers. Adoption was also more likely if children had never been placed with relatives and if there face-to-face contact with birth parents had been discontinued.

The nature of any continuing relationships with birth families and a child's own wishes are important factors in determining whether or not adoption is in the child's best interests. The research also showed that some foster carers were reluctant to adopt the children they cared for due to fears that they may lose support. However, decisions about adoption may also be influenced by local policy, resources and practice cultures. It was clear from our focus groups that views varied as to the children who would benefit from adoption. The views of key local professionals on the desirability of seeking adoptive placements for older children and the feasibility of doing so, may have a substantial impact on day-to-day social work decisions.

Comparing the stability of long-term foster care and adoption

Long-term foster care is intended to be permanent, but for many children it is not. Disruption rates for children in foster care compared unfavourably with those for children adopted. Just 13 per cent of the children who had been placed for adoption or adopted at any point in their lives had experienced the breakdown of an adoption / placement for adoption. Among the 135 children in our *survey sample* who had not left the care system (or who had remained with their former foster carers on a new legal order), however, 28 per cent had left their index foster carers after placements lasting three or more years.

When comparing the stability of adoption and long-term foster care, it is difficult to compare like with like. Children in long-term foster placements generally enter these placements at a significantly older age than children enter adoptive placements. Previous research on both adoption and foster care has found a strong relationship between age at placement and the risk of disruption, so differences in disruption rates need to be interpreted in the light of differences in age at placement.

Furthermore, and related to their earlier age at placement, the children in our study who were adopted by strangers were significantly younger, at the time of our survey, than those in our long-term foster care and `unstable care' groups. The placements of older children are known to be more vulnerable to disruption, so this too makes it difficult for us to be sure that in comparing disruption rates we are comparing like with like.

What influenced placement stability?

Age at placement was also a key predictor of placement stability. Children in stable foster placements had entered their index foster placements at a mean age of 4.1 years, whereas those in the unstable care group had only begun their final episode of care at an average age of 5.3 years.

The severity of the children's emotional and behavioural problems also appeared to increase the risk of placement disruption. For a sub-sample of 90 children, we had data collected five and eight years before our survey. Comparing scores on measures completed by foster carers earlier in their lives, we found that the children in our `unstable care' group *already* had significantly worse scores on our measure of emotional and behavioural difficulties (the *Strengths and Difficulties Questionnaire*, [SDQ]) eight years earlier, compared to children who went on to experience stable foster care or be adopted.

There may also be carer-related reasons for placement disruption, although these may not be the sole reason for placement breakdown. Five years before our current survey, the index carers of the children whose foster placements subsequently disrupted (our `unstable care' group) had been rated as less accepting on our measure of carer rejection, compared to the carers of the children who subsequently remained in stable foster placements. Children's emotional and behavioural difficulties may help to trigger, or reinforce, rejection by carers.

Equally, rejection by carers may increase the severity of children's emotional and behavioural difficulties. Children's emotional and behavioural difficulties and carers' parenting style may interact and, in combination, influence the risk of placement disruption.

Child and carer relationship styles may create a downward spiral. However, the ability of carers and children to become closely attached to one another undoubtedly made a difference to placement stability too. Our qualitative data showed that those long-term foster carers who persisted in caring for children despite their behavioural difficulties often felt a genuine love and a powerful commitment to them.

In a small number of cases, events in carers' lives, such as marital breakdown or bereavement, also contributed to the disruption of placements. Worryingly, for five of the children in our `unstable care' group, their previous long-term foster placements had ended when evidence of carer abuse or neglect had come to light. Among the sample as a whole a total of five per cent (10) children were reported to have experienced abuse or neglect by former foster carers. Clearly, placement quality is as important as placement stability.

A large part of the difference found in stability rates is likely to be due to the fact that children who are adopted (by strangers) often enter care before they are one year old reducing the length of their exposure to pre-care adversity. Long-term foster care is often, though not always, used for children who enter care at a later age and for whom placement outside the care system has not been planned or, if planned, has not been achieved.

It is important to consider risks to placement stability in context and to understand how they operate in combination with one another. The children in our study who had entered care at an older age already had serious emotional and behavioural difficulties by the time they entered their index foster placements. The context of being a foster carer rather than an adoptive parent may also help to shape patterns of placement stability.

Comparing emotional and behavioural outcomes

Across the sample as a whole, 38 per cent of the children had total scores on the SDQ that indicated clinically significant emotional and behavioural difficulties. The most common

difficulties were conduct disorder (37 per cent), hyperactivity (33 per cent) and peer problems (33 per cent). Lower scores on the SDQ, indicating less serious difficulties, were predicted by entry to the current placement at the age of three or under.

We found no significant difference in average scores on the SDQ between children in long-term foster care and those who had been adopted. In one sense this was a positive finding, as those children in our sample who were in stable foster care, (all of whom who had lived with their current carers for seven years or more), were doing no worse than those who were adopted. The corollary of this, however, is that the emotional and behavioural difficulties among the adopted children in our sample were such that a number of them were likely to have support needs similar to those of children in stable foster care. Children whose foster placements had disrupted, however (that is, those in our `unstable care' group), had significantly worse scores for emotional and behavioural difficulty than those in stable foster placements. Children who were disabled also had significantly worse scores on the SDQ, compared to those who were not disabled.

For the sub-sample of 90 children on whom we had collected these measures five and eight years earlier, we found that on average scores on the SDQ showed little change over time, although there was improvement for some children and some deterioration for others. The severity of children's emotional and behavioural difficulties may therefore be largely determined by pre-placement adversity and the length of children's exposure to these adversities.

Both entry to care and placement with their current carers at an older age seemed to reduce the chance of improvement in scores on the SDQ. Every effort should therefore be made to ensure that, as far as possible, children are placed in their final, long-term placement as early as possible. Permanency planning needs to be both timely and effective.

Educational participation and progress

The children in stable foster care were doing as well on measures of participation and progress in education as those who were adopted. Although they were more likely than the adopted children to display behavioural problems at school, they were no more likely to truant or be excluded and their scores were similar on our measure of general educational progress (we

used a four-point scale ranging from 'well above average for ability' to 'well below average'). Again, this finding is both positive and negative. For children whose foster placements endure over time, it is encouraging to find that educational progress may be no worse, on average, than those for children who are adopted. However, we know that overall, looked after children do significantly worse on measures of educational outcomes, in comparison with the general population.

The adopted children in the study were doing no better than those in stable foster placements. This issue is complex, as educational progress and participation were associated both with the severity of children's emotional and behavioural difficulties and with whether or not they were disabled. As we have seen, on average the children who were adopted had scores on the SDQ that were similar to those of children in stable foster care, and they were equally likely to be disabled. The key predictor of participation and progress in education, however, was the severity of children's emotional and behavioural difficulties (as measured by the SDQ).

Our `unstable care' group was doing significantly worse on all measures of participation and progress in education. They were more likely to have truanted and also more likely to have been excluded from school in the previous six months, to display behavioural problems at school and to do worse on our measures of educational progress. However, the strongest predictor of doing badly at school, on a composite measure of participation and progress, was having high scores for emotional and behavioural difficulties on the SDQ.

Perceptions of belonging and permanence

Our interviews with children and their adoptive parents or foster carers explored perceptions of belonging and permanence. Most of the children adopted by strangers had been placed as infants. For the majority of those interviewed, their primary identification was with their adoptive families. Birth parents were psychologically present to the children, to varying degrees, but none of them had any direct contact with them, although some were inquisitive about birth relatives. These children appeared to feel emotionally secure in their adoptive families.

Children adopted by carers indicated a strong sense of belonging to their adoptive families. Although a few wondered about their birth parents, there was no apparent sense of divided

loyalties at this stage in the children's lives. Two children who had been placed with their adoptive families at the age of five expressed great relief at having achieved the legal security of adoption. The fact that carer-child relationships were already strong before the adoption application was made contributed to the success of these carer adoptions.

Most of those settled in long-term foster homes viewed their carers as parental figures and felt a strong sense of belonging to their foster families. For a small number of children, who had been placed with these carers in infancy and identified themselves with them more or less exclusively. The exclusive nature of these foster placements, where the severity of parental abuse or rejection meant there was no direct contact with birth parents, appeared to facilitate to the children's sense of emotional security and belonging. In these circumstances, however, adoption by carers might have been more appropriate than long-term foster care.

For another group of children foster care was inclusive as they had relatively unproblematic face-to-face contact with birth parents. These children appeared able to reconcile the fact that they, in different senses, belonged both to a birth family and a substitute family. Although there was some ambivalence and anxiety on the part of some children or carers, the children appeared able to manage attachments to two families without too much inner conflict, viewing their foster carers *'just like'* another family and generally appearing to feel a reasonable sense of emotional security, despite lacking the legal security afforded by adoption.

A third group of children in stable foster care were more obviously troubled by feelings of ambivalence, hurt and anger towards their birth parents. These children had some face-to-face contact with birth parents but this was usually intermittent and sometimes difficult for the children. Although settled in their foster placements, their complex feelings about their birth parents led them to feel a more qualified sense of belonging to their foster families. These conflicts of loyalty were not always apparent to their foster carers, some of whom perceived the children as their own and thought that the children felt a reciprocal sense of unqualified belonging.

Implications for policy and practice
Comparing placement stability

This study has shown that the experience of long-term, stable foster care may be very positive. Although it cannot give legal security, long-term foster care may provide emotional security and a sense of permanence to children. The problem remains, however, that although long-term foster care *can* offer permanence, in practice it may fail to do so. However, it is important to take account of the fact that children typically enter their permanent placements in foster care at a significantly later age than adopted children:

- Timely decision-making and timely planning for permanence are essential to enable children to enter their permanent placements as early as possible. This may enhance both the likelihood of placement stability and, where this is in children's best interests, the chance of adoption This has implications both for children's services and the courts;

- Carer adoption gives later-placed children a chance of adoption. It is important, where it is appropriate for the child, for carers to be encouraged and supported to obtain a legal order, for example residence, special guardianship or adoption;

- Placement quality is as important as placement stability.

Long-term foster care

Despite the lack of legal security many of the children in stable foster placements felt emotionally secure in their placements and considered them to be their permanent home. Others in stable foster care felt some ambivalence due their feelings about their birth families, but most of these children were nevertheless settled and happy in their placements:

- Stable, long-term foster care may be very successful in providing emotional security and positive outcomes for children.

Emotional, behavioural and educational outcomes for children

Despite being placed at an older age, children in long-term foster placements may do as well as adopted children on measures of emotional and behavioural difficulties and of participation and progress at school. It is therefore encouraging to find that in many respects, children in stable, long-term foster placements may do as well as

those who are adopted. This is important, as adoption will not be appropriate for all children and not all children wish to be adopted. At the same time, it is discouraging that adopted children in the study were doing no better than those in stable foster care and that, on average, both groups were more likely to have mental health difficulties than the wider population of children.

For the children in our `unstable care' group, whose previous long-term foster placements had disrupted after three or more years, emotional and behavioural difficulties were particularly serious and had contributed both to placement instability and poor integration and progress at school. High scores on the SDQ were the strongest predictor of doing badly at school. They had already had significantly worse scores on the SDQ eight years earlier, compared to children who were subsequently adopted or who settled in long-term foster placements. In these circumstances, even high quality substitute parenting may find it difficult to produce substantial change:

- Children who are adopted may need an equivalent level of support with mental health problems, behavioural and educational difficulties to children in long-term foster care;

- The use of the SDQ to screen for mental health difficulties in looked after children may help to identify those at high risk of placement instability and of poor integration and progress at school.

Local authority variation

The age at which children are taken into care is a crucial determinant of their subsequent pathways. The likelihood of adoption may be influenced by local differences in policy and practice and some authorities may be more effective in planning for other permanent placements and in supporting these arrangements:

- Local policy-makers and senior managers can help to shape practice through the mechanisms set up to ensure effective decision-making and planning for permanence. Policy decisions about the proportion of resources devoted to increasing and supporting adoption, or to supporting children and foster carers, may also contribute to shaping the pathways of individual children;

- Other potential reasons for local authority variation include staff shortages, the actions of local courts and local practice cultures, which may be harder to address.

Implications for the use of care and accommodation

Children's needs may not be the only driver of decisions about looking after children, as local policy and practice in relation to thresholds for taking children into care may also play a part in shaping children's care careers. Local thresholds may, in turn, be influenced not only by concern about resources but by the bleak view of the care system evident in much public and professional debate. Although there is clearly much that can be improved in relation to placement stability and outcomes, our findings show that these concerns about the quality of care may not necessarily apply to many children who settle in long-term foster care:

- A lack of confidence in the quality of care may lead to a philosophy of 'last resortism' within children's services and the courts, which may leave some children unprotected or delay their inevitable entry to care. In these circumstances, delaying difficult decisions about entry to care, or delaying decisions about permanency, may mean that children lose their chance of adoption or, if adoption is not appropriate, of stable foster care.

Nevertheless, even if permanent adoptive or foster homes are found in which children experience loving and stable care, many children (and their carers or adoptive parents) are likely to need substantial ongoing support if they are to have a chance of realising their full potential.

The full report of this study will be published in 2010 as:

Nina Biehal, Sarah Ellison, Claire Baker and Ian Sinclair *Belonging and Permanence: Long-term Outcomes in Foster Care and Adoption.* London: BAAF.

Additional Information

Further information about this research can be obtained from Isabella Craig, Analysis and Research Division, 4FL-ARD, DCSF, Sanctuary Buildings, Great Smith Street, London SW1P 3BT

Email: isabella.craig@dcsf.gsi.gov.uk

The views expressed in this report are the authors' and do not necessarily reflect those of the Department for Children, Schools and Families.