YORK RESEARCH ON FOSTER CARE and ADOPTION
Over the past eight years researchers from the University of York have been working with seven local authorities on a major programme of foster care research. So far three studies have been completed.

<table>
<thead>
<tr>
<th>STUDY 1</th>
<th>STUDY 2</th>
<th>STUDY 3</th>
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<tr>
<td>looked at the experiences of foster carers and their needs for support.</td>
<td>looked at the characteristics and outcomes of 596 placements provided by some of the carers in Study 1.</td>
<td>looked at where these children were after three years.</td>
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We have already provided a leaflet on the results of studies 1 and 2 (available on [www.york.ac.uk/swrdu](http://www.york.ac.uk/swrdu)).

This leaflet introduces a new study and outlines the findings from the last one.

### THE NEW RESEARCH STUDY

Following on from these studies we have been funded by the DfES to undertake a new study involving some of these original foster children. This new work, *The characteristics, outcomes and meanings of three types of permanent placement* will allow us to compare three ways of caring for young children; long-term fostering, adoption by foster carers and adoption by ‘strangers’. This study will provide important new data on which children in which circumstances may benefit from each type of placement. We will be working again with the same seven local authorities.

The new study will continue until 2007 and will involve:

- a policy study;
- a survey of 175 children (25 in each authority) through postal questionnaires to their parents or carers, telephone interviews with social workers;
- and interviews with 50 children and their carers or parents.

This new research will focus on outcomes for the children in the three types of placement. It will be particularly concerned with the views of the children. We will look at the meanings they attach to each type of placement, their sense of identity, their wishes and feelings and their perceptions of permanence.

For information on the new study, please contact:

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The new study builds upon the three previous foster care studies. The rest of this leaflet describes the findings from Study 3.

At the beginning of 1998, in Study 2, all of the children (596) were in foster care. Study 3 in 2001 traced where the children were three years later. The aim was to understand why they were in their different settings, how they were doing there, and what they felt about their situation. In this way study 3 explored the links between what happens in foster care and what happens after it.

To explore these issues we sent questionnaires to the current or latest social workers of all the children, to their current or latest foster carer, to the current carers of all those not in independent living, to foster children and to the young people in independent living. We related this information to data we had on these children from Study 1 and 2 and tried to understand it in the context of 30 case studies which we also undertook.

### WHERE WERE THE CHILDREN AFTER THREE YEARS

Overall only 40% of the children were still in foster care three years later. A quarter of the children were with the same foster carer. The remainder were almost equally divided between new foster carers (15%), adoptive families (16%), their own families (17%) and independent living (18%). A handful were in some form of residential care (4%) or could not be traced (7%).

<table>
<thead>
<tr>
<th>WHERE WERE THE CHILDREN IN 2001?</th>
<th>NUMBER (%)</th>
<th>AVERAGE AGE (YEARS) IN STUDY 2 (1998)</th>
</tr>
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<tbody>
<tr>
<td>With same foster carer (from 1998)</td>
<td>144 (24%)</td>
<td>9.93</td>
</tr>
<tr>
<td>With new foster carer</td>
<td>89 (15%)</td>
<td>9.26</td>
</tr>
<tr>
<td>Adopted by foster carer (from 1998)</td>
<td>21 (4%)</td>
<td>3.45</td>
</tr>
<tr>
<td>Adopted by 'other'</td>
<td>69 (12%)</td>
<td>2.41</td>
</tr>
<tr>
<td>Residential care</td>
<td>23 (4%)</td>
<td>11.38</td>
</tr>
<tr>
<td>With birth family</td>
<td>102 (17%)</td>
<td>8.36</td>
</tr>
<tr>
<td>Independent living</td>
<td>107 (18%)</td>
<td>16.13</td>
</tr>
<tr>
<td>Lost track/no longer in the sample</td>
<td>41 (7%)</td>
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</table>

The likelihood of these different destinations varied with age.

Adoption was reserved for young children. Three quarters of those aged less than two in Study 2 (1998) were adopted. Only 3 of the children aged six or over in Study 2 were adopted by the time of Study 3. Young children of this age were also less likely to be adopted if placed with relatives, in close contact with their birth family or disabled (specifically those with learning impairment(s)).
FINDINGS FROM STUDY 3

At the other end of the age range it was rare for young people to stay on in foster care after the age of 18; 9 out of 10 of those aged 15 and over in Study 2 were not living with their foster carers three years later in Study 3.

Continuing in foster care was mainly reserved for those aged between 4 and 14 with disabled children being particularly likely to stay on. Breakdowns, particularly among teenage placements, the pull of home and the expectation of moves at 18 meant that few children stayed for a lengthy period in the same foster placement. Disruption was a continuing risk even for those who had been with the same carer for some time and especially so in the teenage years. Four in ten of those who were aged 11 or over and had been with their foster carer for at least two years in Study 2 had experienced a disruption by Study 3.

HOW DID THE CHILDREN GET ON IN THE DIFFERENT SETTINGS?

Adoption

Adoption was seen favourably by social workers and former foster carers. They said it offered security, safety and guidance to the child. It was also the most ‘permanent’ setting. None of these placements disrupted over the three years. On our outcome measures adopted children did ‘better’ on a number criteria compared with those who go to other destinations. Adoptions by former foster carers did particularly well.

Return to birth family

Children who went home generally wanted to be there and their families wanted to have them. The cases that seemed to be going well were ones where children were returning to a situation that had changed and improved in some way.

"Parents regretted past mistakes and were determined to make a success of rehabilitation by ensuring lasting changes."  

Former Foster carer Study 3

Nevertheless some of the children who returned home did not do well. In less than a third of the returns home did the social worker feel that the environment was fully satisfactory, materially adequate and safe. Children at home were more likely than others to suffer re-abuse. Returning home was associated with a failure to improve at school and among older children, with an incidence of difficult behaviour that was greater than that found in residential care. Systematic help from social services was rarely given and hardly ever intensive.

Return home was not particularly stable over the three years: 1 in 3 of the children who were tried at home did not stay there. Older children returning home were more likely than younger ones to move on.

Foster care

For some children adoption or return home are not appropriate. Foster care can offer these children an opportunity to grow up in a family.

Foster care was generally seen as satisfactory. It was more likely to be seen favourably if the child had not experienced a move from foster care and was therefore still with the original foster carer.
In Study 3 most children seemed to be settled in fostering. However, some saw it as 'abnormal' and some continued ambivalent relationships with families who would neither let them be in foster care nor have them home. The children varied over how they saw the relationship between fostering and their own family.

“Yeah. I mean, I always knew I couldn't go home, but I didn’t kind of think that I’d be in care this long. But I also didn’t think I’d be back with my mum. That’s kind of strange.” Foster child Study 3

One way to increase the permanence of foster placements is through residence orders. However, only 10% of the foster carers in Study 3 had obtained a residence order. Those carers who had obtained an order emphasised the ‘normality’ this brought to their day-to-day lives along with the increased sense of security the children could feel. For some of these carers a guarantee of continued social work and financial support was essential.

**Independent Living**

Young people leave foster care at a much younger age than their peers leave home. Study 3 showed that staying on beyond the age of 18 was rare. Those young people remaining in foster care after the age of 18 were more likely to be disabled.

There were grave reservations over independent living. Hardly any social workers felt that the young people’s situations fully met the criteria of being satisfactory, safe and materially adequate. Foster carers were particularly critical, feeling that in many cases moves to independent living were premature and that a number of young people were ill-supported.

Some young people in independent living ‘did well’. Typically they were young mothers who got support from partners and family and a small group who went to university. However, most care leavers experienced a wide variety of troubles including, loneliness, debt, unskilled and poorly paid jobs, depression and quarrels with their families.

“ I think it is wrong to put foster children out of fostering at 18 years, it must be awful to have no home. (Young person) will always have a home with us.” Foster carer Study 3

“ It was a big step - I mean, social services literally took me out of foster care and chucked me into a hostel… they moved me in when I was not ready for it. It was a shock. I mean, the first night, I didn’t talk to anybody - I was shy, I was straight up into my room.”

Young person living in a semi-independent hostel in Study 3
Drastic changes to this situation are difficult to bring about. Most foster children do not want to be adopted. It is hard to bring about changes in the children’s own families so that they can be safely and satisfactorily brought up there. Solutions to this dilemma may involve a large number of minor improvements rather than dramatic changes in re-organisation or approach.

A greater decisiveness when young children are first fostered involving accurate and swift assessment of the chances of rehabilitation.

Some carers said concerns over reduced finance and support after the adoption prevented them from adopting the foster child. Local authorities could make sure there are no principled objections and then meet carer’s anxieties about continuing financial and practical support.

There is a need for authoritative and proactive management of contact and for active management of risk among those who return home. Among those who had been abused by their families unrestricted contact with home was associated with foster care breakdown and re-abuse.

Work may be needed to reduce the sharpness of the dilemma (home or away). This could be done by developing ‘shared care’ involving families and foster families and by improving the quality of home.

"Child is very well attached to foster carer - perhaps too well. Difficulty will be in moving her on effectively. She is like ‘part of the family’ and it is difficult for her and foster carer to think about her having to move on just because she is a foster child, if she were a natural child of the family she could stay until she wanted to move out." 

Social worker Study 3

MESSSAGES FOR POLICY AND PRACTICE

CONTRIBUTIONS TO RESOLVING THIS DILEMMA MAY INVOLVE:
There is also scope for increasing the support given to those who do return, paying particular
attention to parent preparation, practical support for parents, mediation between parents and
child and provision of independent support for the child. In some cases foster carers could play
a pivotal role. Intervention with the school may be as important when the child is at home as it
is while the child is in foster care. It seemed illogical to offer less support to birth parents than
to foster carers. Anything that can be done to improve the quality of parenting among parents
to whom the child returns should improve results.

There were genuine concerns about some of the children who had returned to their birth
families where there was a fear that care needs were not being met and a risk of abuse
remained. At the minimum these placements need to be actively monitored.

In order to achieve greater permanence in foster care it is important to reduce the incidence of
breakdowns so there is a need to handle disturbed attachment behaviour, minimise unhelpful
interference from birth family and enable the child to adjust to and enjoy themselves at school.

It did not seem that the children or the carers with residence orders differed from many others.
There may be more scope for increasing the use of residence orders (or special guardianship)
by tackling the financial and other difficulties they can raise for carers.

A key assumption that needs to be challenged is that foster children effectively have to move
out of their foster homes at 18. Some do stay on. But both foster children and foster carer’s
seemed to feel that moving on was expected. There may be scope for enabling staying on by
changing the incentives so that staying on becomes less financially disadvantageous for foster
carer and child and for continuing levels of support. The assumption would be that the young
person would move on but when they were ready and with flexible support.

Experiments should be made in minimising the abruptness of the transition from foster care to
independence by providing as much support for those in or looking for work as is currently
available in the best schemes for those going to university.

Finally, children in all of the destinations need access to adults whom they trust and whom
they can talk with on a regular basis.

In all of the destinations it is reasonable to pay close attention to the factors that are closely
associated with outcomes: what the children want, their situation at school, their relationships with
their current carers and their relationships and contact with their own families. These ideas should
inform new efforts to support children that should then be evaluated through research.
MORE INFORMATION ON STUDIES 1 TO 3:

There are three books based on the York foster care studies (These books are available from: http://www.jkp.com or +44 (020) 7833 2307):

<table>
<thead>
<tr>
<th>Study</th>
<th>Authors</th>
<th>Title</th>
<th>Year</th>
<th>Publisher</th>
</tr>
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<tbody>
<tr>
<td>Study 1</td>
<td>Ian Sinclair, Ian Gibbs and Kate Wilson</td>
<td>Foster Carers: Why They Stay and Why They Leave.</td>
<td>2004</td>
<td>Jessica Kingsley Publishers</td>
</tr>
<tr>
<td>Study 2</td>
<td>Ian Sinclair, Kate Wilson and Ian Gibbs</td>
<td>Foster Placements: Why They Succeed and Why They Fail.</td>
<td>2004</td>
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<tr>
<td>Study 3</td>
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<td>Foster Children: Where They Go and How They Get On.</td>
<td>2005</td>
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